

ASS. REC. BY: Am

REF:

CS/INC 22002634/Rqy³

753B

COE XPIRY: 2026/MAY

- ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SKB99452at Workshop m/s Auto INSUREof 6, MARILYN LNInsured: INC

Policy No. _____

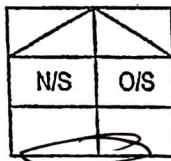
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 37K

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKB99452 Yr Regn: 2011 / JULYType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Hyundai ELANTRA 1.6AT c.c 1591Colour: RED A/C: Insured / Std / NI / NASp. Reading: 111712 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHDH41CMCU215784Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 205/55ZR16

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front 6 mm Rear 6 mmR/Bal. 6 mm L/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 16/03/22 D.O.I. 22/03/22Survey held at Auto INSUREDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>REPAIR LIMIT - 18K</u>
	Rasul finalised final fig \$400, 2 days. (Red \$5095.76, 93%)
	(No Lump Sum)

Date/Time, File Pass to?

☐ : Preli. ReportDays Of Repair: 2

1) 27/01 Typist

☐ : Final ReportResurvey No. of Trip: 1

Date/Time, File Return to?

2)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)Report Format: TP~~Lump Sum~~ / I.E.P. (\$) 400



Auto Insure Pte. Ltd.
6 Marsiling Lane
Singapore (739145)
E: claims01@autoinsure.com.sg
W: www.autoinsure.com.sg
T: 3157 2626 F: 6368 0081
GST No.: 201437380M

Page No.1

AUTOMOBILE ASSESSMENT REPORT

Our Ref: **SKB9945Z (MARVYN)**

Your ref: **SNC3649C**

Date: **18-Mar-22**

BY EMAIL ONLY
(claims01@autoinsure.com.sg)

ATTENTION: MOTOR CLAIMS DEPT

Email : MTCL@income.com.sg

NTUC Income Insurance company

1 Maritime Square
Harbourfront Centre
#10-01 Singapore 099253

Assessed Vehicle No : SKB9945Z
Car Make and Model : HYUNDAI ELANTRA 1.6 AT ABS D/AB 2WD 4DR
Date of Accident : 16-Mar-22
Date of Assessment : 18-Mar-22

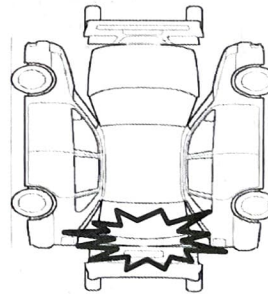
We have carried out a physical assessment of SKB9945Z at our workshop Auto Insure Pte Ltd sustained damages to the REAR portion of the vehicle.

4. DESCRIPTION OF DAMAGE

At the time of the inspection observed that this vehicle had sustained damages to the REAR portion of the vehicle.

Please see attached schedule for details.

Remarks: NIL



Estimated Amount : P/P
Adjusted Amount : \$ 5,880.46
Est. Repair Days : 4

Pursuant to your instruction, we have **NOT AUTHORIZED** repair.
The assessment was conducted on a "**WITHOUT PREJUDICE**" basis.

If we are not notified of anything within 14 Days from the date hereof, this report shall be treated as correct.

Disclaimer

This report is intended for the exclusive use of the addressee solely in relation to the loss of occurrence in which the assessed vehicle is involved.

No liability or responsibility whatsoever shall be held by
AUTO INSURE PTE. LTD. For any reliance on this report by any third party.

Our Ref: **SKB9945Z**

Your Ref: **SNC3649C**

S/NO	QTY	DESCRIPTIONS	ASSESSED CONDITION	EST. BY WORKSHOP
<u>PARTS REPLACEMENT - LIST ITEMS</u>				
1	1	REAR BOOTLID X nn		\$ 1,568.40
2	1	REAR BOOTLID EMBLEM (HYUNDAI) X nn		\$ 64.00
3	1	REAR BOOTLID EMBLEM (ELANTRA) X nn		\$ 68.00
4	1	REAR BUMPER <i>requir</i>		\$ 876.00
5	1	REAR BUMPER REINFORCEMENT X nn		\$ 364.80
6	1	REAR END PANEL X nn		\$ 546.00
			SUB TOTAL	\$ 3,487.20
			LESS 20%	\$ 697.44
			TOTAL AMOUNT	\$ 2,789.76

Our Ref: **SKB9945Z**

Your Ref: **SNC3649C**

S/NO	QTY	SPECIAL NETT ITEMS	ASSESSED CONDITION	EST. BY WORKSHOP
1	1	REAR BUMPER CLIPS X nn		\$ 50.00
2	1	REAR REVERSE SENSORS X nn		\$ 250.00
3	1	REAR END PANEL SEALANT X nn		\$ 300.00
4	1	EXHAUST TIP X nn		\$ 150.00
5	1	REAR BUMPER LOWER MOULDING X nn		\$ 400.00
6	1	REAR BOOTLID EMBLEM (ELITE) X nn		\$ 66.00
			SUB TOTAL	\$ 1,216.00
			TOTAL PARTS COST	\$ 4,005.76

Our Ref: **SKB9945Z**

Your Ref: **SNC3649C**

S/NO	DESCRIPTION	EST. BY WORKSHOP
LABOUR & PAINTWORK		
1	TO REMOVE THE AFFECTED PARTS & FITTINGS TO COMMENCE REPAIRS; PANEL BEAT & RESHAPE THE AFFECTED AREAS AND REPLACED THE DAMAGED PARTS AND COMPONENTS	\$ 600.00 200
2	TO REMOVE & REFIT WIRING SYSTEM AT ACCIDENT AND CHECK FOR PROPER FUNCTIONS	\$ 80.00 X
3	TO RESPRAY AND SUPPLY EXPANDABLE ITEMS & PUFFY ON PARTS REPLACED	\$ 600.00 200
4	TO PERFORM ANTI-RUST TREATMENT ON AFFECTED AREAS	\$ 60.00 X
5	SUNDRIES (SAND PAPER, WELDING WIRE ETC.)	\$ 50.00 X
6	TO VACUUM, WAXING & CLEAN	\$ 50.00 X
7	TO PERFORM WATER SEEPAGE TEST ON REPAIRED PORTIONS	\$ 50.00 X
TOTAL BEFORE GST		\$ 5,495.76
GST 7%		\$ 384.70
TOTAL (PARTS & LABOUR):		\$ 5,880.46

Adjustments / Recommendations

Our estimator have thoroughly inspected each and every item on the estimate against physical damage found on the vehicle and have listed the breakdown of our finding and recommendation.

Our Workshop has agreed to undertake the job at a **sum of \$ 5,880.46** for part by part with the third party insurance.

Yours Faithfully,

Jason Heng
Claims Director

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to confirmation by the third party

Accepted by the Repairer:

Signature:

Date:

Paul
Ap 9 0010068
2 days
22/03/22 @ 1500
Res after your

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	16/03/2022 17:32 (SGT)
Date of Accident	16/03/2022 08:30 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS CHANGI
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKB9945Z

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MARJAANAA BEHGAM BINTE MAADARSHA
NRIC No	SXXXX753B
Email Address	MARJAANAABBM@GMAIL.COM
Mobile Phone No	(Phone) +65-91189942
Alternative Phone No	+65-91189942

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Elantra
Variant	1.6 AT ABS D/AB 2WD 4DR
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1591

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00114702100
Cover Note Number	-

DRIVER

Name of Driver	UMAR SHARIFF S/O HASAMOHIDEEN
NRIC No	SXXXX392B

Date Of Birth 26/10/1991
 Occupation Indoor
 Date Of Driving Pass 22/02/2021
 Driving experience 1 YEAR AND 1 MONTH
 Gender Male
 Mobile Number (Phone) +65-96660974
 Alt. Phone Number -
 Email Address UMAR_SHARIFF@HOTMAIL.SG
 Address BLK 160 BUKIT BATOK ST 11 #03-62
 Address complement -
 Postcode S650160
 Is the driver the policyholder? No
 If No, Relationship of the Driver with the Insured Spouse
 Does Driver Own Other Vehicles? No
 Vehicle Registration Number of Other Vehicle Owned by Driver -
 Insurance Company of Other Vehicle Owned by Driver -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Chain Collision
 Weather Conditions Clear
 Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No
 Number of vehicles involved in the accident 3
 Was anybody injured in the Accident? No
 Was any injured conveyed to hospital by ambulance? -
 Was any other vehicle or property damaged? Yes
 Number of Passengers (Including Driver) 1
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

DETAILS OF POLICE ACTION

Was the accident reported to the police? No
 Was notice of intended Prosecution given? No
 If yes, against whom? -

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Yes
 Was there any video captured by Car Camera? Yes
 Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

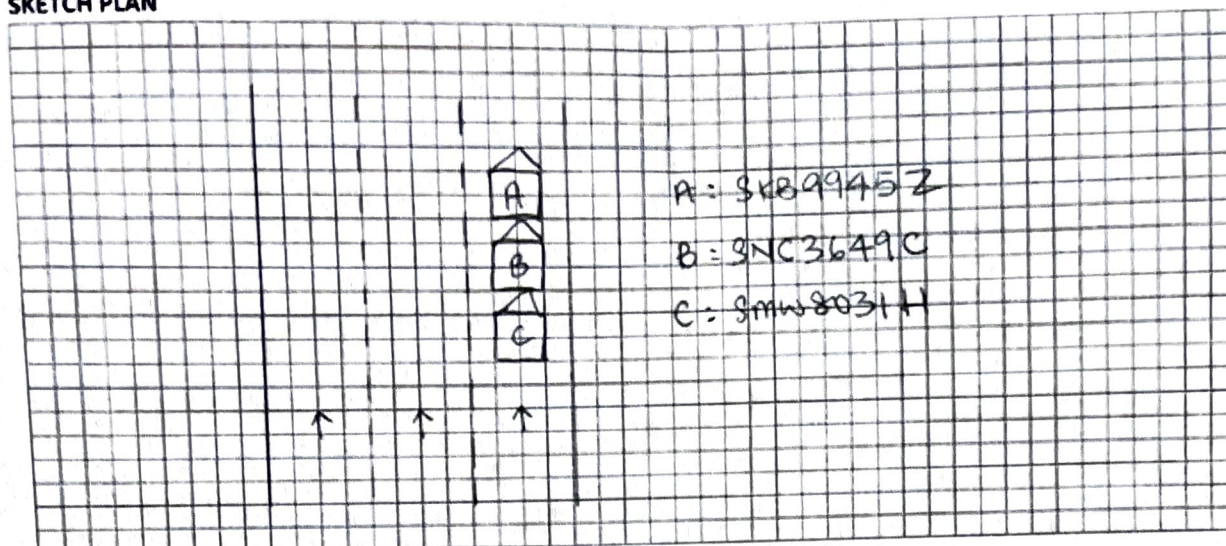
Vehicle Registration Number SNC3649C
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 Name of Driver -
 Contact Number -
 Address -
 Address complement -

Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMW8031GH
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along PIE towards Changi when the vehicle in front of me suddenly stopped. I managed to stop in time but suddenly I felt an impact on my rear and noticed that vehicle B (SNC3649C) had hit onto my rear causing damage. I was involved in a chain collision and the last vehicle is vehicle C (SMW8031H) I am the first vehicle.

DECLARATION

I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

G:\ARNIC SketchPlanForm_V3

2

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 753B

Vehicle Details

Vehicle No.: SKB9945Z
Vehicle to be Exported: No
Intended Deregistration Date: 18 Mar 2022
Vehicle Make: HYUNDAI
Vehicle Model: ELANTRA 1.6 AT ABS D/AB 2WD 4DR
Primary Colour: Red
Manufacturing Year: 2011
Engine No.: G4FGBU279494
Chassis No.: KMHDH41CMCU215784
Maximum Power Output: 95.6 kW (128 bhp)
Open Market Value: \$13,932.00
Original Registration Date: 15 Jul 2011
First Registration Date: 15 Jul 2011
Transfer Count: 2
Actual ARF Paid: \$13,932.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 31 May 2026
COE Category: A - Car (1600cc & below)
COE Period(Years): 5
PQP Paid: \$22,069.00
COE Rebate Amount: \$18,545.00
Total Rebate Amount: \$18,545.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 18 Mar 2022

OK

Hyundai Elantra 1.6A GLS (COE till 06/2026)

Overview

[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

Price	\$37,500		
Depreciation ⓘ	\$8,770 /yr	Reg Date	12-Jul-2011 (4yrs 3mths 7days COE left)
Mileage	91,000 km (8.5k /yr)	Manufactured ⓘ	2011
Road Tax ⓘ	\$812 /yr	Transmission	Auto
Dereg Value ⓘ	\$19,349 as of today (change)	OMV ⓘ	\$11,263
COE ⓘ	\$22,636	ARF ⓘ	\$11,263
Engine Cap	1,591 cc	Power	95.6 kW (128 bhp)
Curb Weight ⓘ	1,267 kg	No. of Owners ⓘ	2
Type of Vehicle	Mid-Sized Sedan		