

Steve

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: **YP 6501B**  
 Policy No. \_\_\_\_\_  
 Claims No. **MT/1165612-002**  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
 repair at the time of inspection.

<input checked="" type="checkbox"/>	
N/S	O/S

Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: \_\_\_\_\_ days Res.: Yes or No  
 Term Sum: \_\_\_\_\_ % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_  
 Vehicle: IN / OUT

Veh No: **SLF 6011E** Yr Regd: **31/8/16**  
 Type: ☒ M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or  
 Make: **Tayara Alphard** c.c. **2493**  
 Colour: **Black** A/C: Insured / Std / NI / NA  
 Sp. Reading: **105580** T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: **AGH300043200**  
 Gen. Cond: Good / ☒ Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or  
 Brake: In order / ☒ Jammed / Leaked / Burnt or  
 Modi: Nil / ☒ S/Rim / STD A/Rim, or  
 Tyre Size: F: **235/50ZR18**  
 R: **1)**

☒ BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or \_\_\_\_\_

Front Rear  
 R/Bal. **5** mm R/Bal. **5** mm  
 L/Bal. **5** mm L/Bal. **5** mm  
 D.O.A. **19/3/22** D.O.I. **22/3/22**  
 Survey held at **Wah Hong**  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
**Prax LH**

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

Date / Time	Action / Instruction
	<b>MR-11SK</b>
<b>28/3/22</b>	<b>Steve informed LS \$4100 (red 4521, 52%)</b>

Check/Time, File Passes?

☐ : Preli. Report  
☐ : Final Report

Days Of Repair: **4**Resurvey No. of Trip: **1**

Date/Time, File Return to?

a) **28/3/22-typist**Report Format: **TP**Lump Sum / L&L: **\$4100**

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_) \$ + RS. \$  
☐ : Interview (\$ \_\_\_\_\_) Photos  
☐ : Tech. Invs (\$ \_\_\_\_\_) Quotes  
☐ : Weekend (\$ \_\_\_\_\_)  
 TOTAL

Survey Fee:

Transportation:

Photos

Quotes

TOTAL



# Wah Hong Motors & Credit Pte Ltd

Enterprise Hub 38 Toh Guan Road East #01-57 S(608581)

Email: motor@wahhong.sg

(199806235M)

Vehicle No. SLF6011E TOYOTA ALPHARD 2.5S A

Page No. 1

QTY	DESCRIPTION	CONDITION	REPAIRER'S ESTIMATE(S\$)	SURVEYOR'S ADJUSTMENT
<b>PARTS (LIST ITEMS)</b>				
1	Front fender / OD		1218.00	
1	Headlamp / OR		2729.00	
1	Headlamp top panel X R		271.00	
1	Front bumper / OR		1719.00	
2	Front bumper side retainer LH/RH@2*\$231 / OR		462.00	
1	Fog lamp outer chrome Lh / CUT		371.00	
1	Center grille X		1218.00	
1	Bonnet (Repair refer to labor) X R		0.00	
1	Support Panel (Repair refer to labor) X		0.00	
Part Items Total:			7988.00	
			-25% -1997.00	
			5991.00	
<b>SPECIAL NETT ITEMS</b>				
1	Front Bumper clips / MC		35.00	
1	Center grille Clips X		25.00	
1	Radiator Top garnish clips X		35.00	
1	Front Fender shield clips X		25.00	
1	Front Reverse Sensor X		200.00	
SN Items Total:			320.00	
Total Parts			6311.00	





# Wah Hong Motors & Credit Pte Ltd

Enterprise Hub 38 Toh Guan Road East #01-57 S(608581)

Email: motor@wahhong.sg

(199806235M)

Vehicle No. SLF6011E TOYOTA ALPHARD 2.5S A

Page No. 2

S/N	DESCRIPTION	REPAIRER'S ESTIMATE (S\$)	SURVEYOR'S ADJUSTMENT
<b>LABOUR</b>			
1	To remove the affected parts & fittings to commence repairs; panel beat & reshape the affected areas and replace the damaged parts and components	1000.00	400
2	To supply paint materials, expandable items & putty, respray paint on parts replaced & repaired	1000.00	600
3	To remove and refix wiring system at accident damaged area and check for all electrical proper function	90.00	30
4	To perform anti-rust treatment on affected areas	60.00	30
5	To remove and replace Front reverse sensor	100.00	30
6	To remove, replace and focus headlamp beam	60.00	30
Labour Total :		2310.00	
TOTAL (PARTS & LABOUR):		8621.00	

Stew (LKK)  
22/3/22, 12.30pm

ML  
L/S  
M/L  
4 d/s

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before and after painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary work must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	966M
Vehicle Details	
Vehicle No.:	SLF6011E
Vehicle to be Exported:	Yes
Intended Deregistration Date:	23 Mar 2022
Vehicle Make:	TOYOTA
Vehicle Model:	ALPHARD 2.5S A
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	2ARH642507
Chassis No.:	AGH300043200
Maximum Power Output:	134.0 kW (179 bhp)
Open Market Value:	\$34,422.00
Original Registration Date:	31 Aug 2016
First Registration Date:	31 Aug 2016
Transfer Count:	1
Actual ARF Paid:	\$40,191.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 Aug 2026
PARF Rebate Amount:	\$28,133.00
Intended COE Rebate Details	
COE Expiry Date:	30 Aug 2026
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$56,956.00
COE Rebate Amount:	\$25,060.00
<b>Total Rebate Amount:</b>	<b>\$53,193.00</b>

The information contained herein is correct as at 21 Mar 2022

OK



## 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	21/03/2022 11:56 (SGT)
Date of Accident	19/03/2022 17:00 (SGT)
Exact Location of Accident	Near 450 Clementi Ave 3, Singapore 120450
Additional Location Information	BLK 450, CLEMENTI AVE 3 OPEN SPACE CARPARK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SLF6011E

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	AKK RENTAL PTE LTD
Company Reg No	2XXXXX966M
Email Address	sg.akkrental@gmail.com
Mobile Phone No	(Phone) +65-94888238
Alternative Phone No	+65-94888238

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Alphard
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	2493

#### INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	SP2000444932
Cover Note Number	-

#### DRIVER

Name of Driver	TEOH HOON YAO
NRIC No	SXXXX080Z

Date Of Birth	13/10/1983
Occupation	Outdoor
Date Of Driving Pass	16/04/2007
Driving experience	14 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92319910
Alt. Phone Number	
Email Address	hoonyao@yahoo.com.sg
Address	BLK 606D, TAMPINES ST 61
Address complement	#11-364
Postcode	524606
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	KYLE TEOH
Gender	Male

#### 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

On 19/03/2022 At about 1700hrs, I was driving my vehicle SLF6011E along Blk 450, Clementi Ave 3 Open space Car-park towards Exit. There was a big lorry YP6501B stopped along the right side of the carpark with the hazard light on. So I proceed slowly on the left side lane. While Proceeding, Suddenly, YP6501B put his hand out do some hand signal so I stopped immediately. YP6501B started to move off without checking on the blind spot and collided on my vehicle front left portion. The Whole incident was captured on my car camera.

#### 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	YP6501B
Vehicle Manufacturer	Hino
Vehicle Model	-

Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
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) .....	-



**Describe Circumstances of the Accident**

On 19.3.2022, at about 1700hrs, I was driving my vehicle SLF6011E along BIK 1150, Clementi Ave 3 open space car-park towards exit.

There was a big lorry YP6501B stopped along the right side of the carpark with the hazard light On. So I proceed slowly on the left <sup>Side</sup> ~~Side~~ hand. while proceeding, Suddenly, YP6501B put his hand out do some hand signal so I stopped immediately. YP6501B started to move Off without checking on the blind spot and collided on my vehicle front left portion. The whole incident was captured on my car camera.

**Declaration**

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

*[Signature]*

Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel



## SKETCH PLAN

## 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. The 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.

## 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



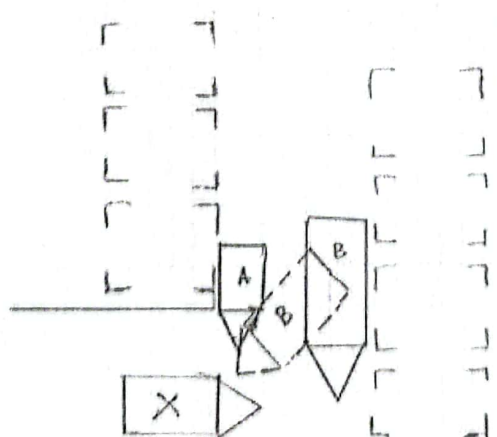
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

## Sketch Plan



open space carpark  
BIK 450 Clementi Ave 3

A: SLF6011E

B: YP6501B

BIK 450