

(08/1/13) wef

ASS. REC. BY: *Marcus*

REF:

*CS/CT122002784/493***ASSIGNMENT**

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: *SMK 8725C*
at Workshop m/s: *Trans Eurocars.*
of: *10.30*Insured: *PC 3934E*

Policy No. _____

Claims No. *SNM220201817/002*

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: *£105k.*

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: *3* days Res.: Yes or NoLum Sum: *1.3.1* % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

9432

Vehicle: IN / OUT

Date: _____ Person Contacted: *LA 56874*Veh No: *SMK 8725C* Yr Regn: *26/04/19*Type: *M. Car* / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /Truck / Trailer or *CA*Make: *W26* *CX-5* c.c. *1998*Colour: *Grey* A/C: Insured / Std / NI / NASp. Reading: *37917* T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: *JM6KF2W7AK0314874*Gen. Cond: *Good* / Fair / Poor / BurntSteering: *In order* / Jammed / Leaked / Burnt orBrake: *In order* / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: *225/65-R17*
R: _____

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

TOYO / YOKO or

Front

R/Bal. *6* mm R/Bal. *6* mmL/Bal. *6* mm L/Bal. *6* mmD.O.A. *15/03/22* D.O.I. *31/03/22*

Survey held at _____

Des. 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 *Rep 13k.**27/4/22 P17 87296.90 informed Jess (Red £2648.40, 29%)*

Date/Time, File Pass to?

☐ : Preli. Report☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: *3*Resurvey No. of Trip: *1*

Survey Fee:

Transportation:

____ S + RS, ____ SI

Photos

Others

TOTAL

Report Format: *NER-TP*Lump Sum / I.B.I. (\$) *7296.90*Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)



TRANS EUROKARS PTE LTD
27A TANJONG PENJURU, SINGAPORE 609042
ESTIMATE COST OF REPAIRS

Not Admit
here new 9009660f
take hls bekn partay.
3 days.
31/3/22

EUROKARS SERVICES

CHINA TAIPING INSURANCE P/L 3 ANSON ROAD #16-00 SPRINGLEAF TOWER SINGAPORE 079909 ATTN.: MOTOR CLAIMS FAX :		NAME : ADDRESS : TEL :		WIP : 20941 EXCESS : DATE: 31-Mar-22	
VEH NO :	SMK8725C	DATE IN :		CONTACT PERSON :	RONALD
CHASSIS NO :	JM6KF2W7AK0314874	MILEAGE :		TYPE OF CLAIM :	THIRD PARTY CLAIM
MODEL :	CX-5	DATE REG.:	26-Apr-19	POLICY NO. :	

NATURE OF WORKS

NO	DESCRIPTION	QTY	UNIT PRICE	1st	Supp	PARTS NO	REVISED	PRICES
1	FRONT BUMPER <i>de/Torn</i>	1	1,023.10	✓		MKB8B-50-031FBB		1,023.10
2	STIFF.'A',FRT BUMPER <i>11</i>	1	115.50	X		MKB7W-50-0S0B		115.50
3	FOAM,BUMPER KF <i>11</i>	1	47.80	X		MKB7W-50-111A		47.80
4	FASTENER FOAM <i>11</i>	2	6.20	X		MFD01-68-AC3		12.40
5	REINFORCEMENT FRT <i>R</i>	1	614.10	X		MKD53-50-070		614.10
6	PLATE,SET FRONT <i>Torn</i>	1	160.20	✓		MKB8A-50-1C0C		160.20
7	FASTENER <i>neu</i>	2	3.20	✓		MGD7A-50-EA1		6.40
8	FRONT GRILLE,RADIATOR <i>CNE</i>	1	1,566.40	✓		MK262-50-710A		1,566.40
9	BRACKET MASCOT FRT <i>CNE</i>	1	92.10	✓		MKB8C-50-721		92.10
10	MASCOT FRT <i>11</i>	1	95.10	X		MKA0G-51-730		95.10
11	BRACKET TOP FRT GRILLE <i>Doge</i>	1	109.00	✓		MKB8A-50-717D		109.00
12	FRONT GRILLE RAD TOP <i>DD</i>	1	299.30	✓		MKB8A-50-7E1BBB		299.30
13	COVER GRILLE TOP RH <i>11</i>	1	15.80	X		MKB8A-50-101A		15.80
14	COVER GRILLE TOP LH <i>11</i>	1	15.80	X		MKB8A-50-102A		15.80
15	FASTENER FOAM <i>neu</i>	14	4.00	✓		MS51S-51-833		56.00
16	RIVET <i>neu</i>	8	9.20	✓		MTK21-50-355		73.60
17	LABEL,CAUTION <i>11</i>	1	3.50	X		MPE01-15-031		3.50
18	LABEL,CAUTION <i>11</i>	1	3.50	X		MKF49-61-439		3.50
19	BONNET <i>DD</i>	1	1,076.30	✓		MKBY0-52-31XB		1,076.30
20	WEATHERSTRIP BONNET OUTER <i>su</i>	1	42.90	X		MKB7W-56-770A		42.90
21	FASTENER <i>neu</i>	5	2.40	✓		MJ001-56-741		12.00
22	WEATHERSTRIP BONNET INNER <i>11</i>	1	42.00	X		MKB7W-56-750A		42.00
23	FASTENER <i>neu</i>	5	3.40	✓		MBC1D-58-762		17.00

SUPPLEMENTARY

NO	DESCRIPTION	QTY	UNIT PRICE	1st	Supp	PARTS NO	REVISED	PRICES
1								
TOTAL PARTS								5,499.80
TOTAL PARTS COST								5,499.80

Labour Description				
			REVISED	PRICES
1		TO REPLACE FRONT BUMPER AND BONNET 660	990	1,500.00
2		TO RESPRAY FRONT BUMPER , FRONT GRILLE RAD TOP AND BONNET 630	1260	1,600.00
3	MZ-BR-FRTSEN	TO TRANSFER FRONT PEDESTRIAN SENSORS.	180	660.00
4	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.	120	250.00
5	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.	150	300.00
6	MZ-BR-SUNDRI	SUNDRIES. per 20		50.00
SUPPLEMENTARY LABOUR DESCRIPTION				
1		#N/A		
REMARKS: THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400 WILL BE APPLIED ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.			TOTAL LABOUR	- 4,360.00
			TOTAL PARTS	- 5,499.80
			TOTAL	- 9,859.80
			LESS EXCESS	- -
			TOTAL AFTER EXCESS	- -
			GST 7%	- -
			GRAND TOTAL	- -

TRANS EUOKARS PTE LTD

Authorised Signature

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 final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:



TRANS EUROKARS PTE LTD
27A TANJONG PENJURU, SINGAPORE 609042
ESTIMATE COST OF REPAIRS



CHINA TAIPING INSURANCE P/L 3 ANSON ROAD #16-00 SPRINGLEAF TOWER SINGAPORE 079909 ATTN : MOTOR CLAIMS FAX :		NAME : ADDRESS : TEL :		WIP : 20941 EXCESS : DATE: 5-Apr-22				
VEH NO :	SMK8725C	DATE IN :		CONTACT PERSON :	RONALD			
CHASSIS NO :	JM6KF2W7AK0314874	MILEAGE :		TYPE OF CLAIM :	THIRD PARTY CLAIM			
MODEL :	CX-5	DATE REG.:	26-Apr-19	POLICY NO. :				
NATURE OF WORKS								
SUPPLEMENTARY								
NO	DESCRIPTION	QTY	UNIT PRICE	1st Supp	PARTS NO	REVISED	PRICES	
1	CAP R <i>Ad</i>	<i>cut</i>	1	15.15	<i>/</i>	MKB8A-50-M32 <i>15.50</i>	15.15	
front number plate <i>sent to S/N</i>						TOTAL PARTS	4,506.55	5,499.80
						TOTAL PARTS COST	4,506.55	5,499.80

TRANS EUROKARS PTE LTD

Authorised Signature



TRANS EUROKARS PTE LTD
27A TANJONG PENJURU, SINGAPORE 609042
FINALIZE COST OF REPAIRS



CHINA TAIPING INSURANCE P/L 3 ANSON ROAD #16-00 SPRINGLEAF TOWER SINGAPORE 079909 ATTN : MOTOR CLAIMS FAX :			NAME : ADDRESS : TEL :			WIP : 20941 EXCESS : DATE: 9-Apr-22		
VEH NO :	SMK8725C	DATE IN :		CONTACT PERSON :	RONALD			
CHASSIS NO :	JM6KF2W7AK0314874	MILEAGE :		TYPE OF CLAIM :	THIRD PARTY CLAIM			
MODEL :	CX-5	DATE REG.:	26-Apr-19	POLICY NO. :				
NATURE OF WORKS								
NO	DESCRIPTION	QTY	UNIT PRICE	1st	Supp	PARTS NO	REVISED	PRICES
1	FRONT BUMPER	1	1,023.10	✓		MKB8B-50-031FBB	1,023.10	1,023.10
2	STIFF.'A',FRT BUMPER	1	115.50			MKB7W-50-0S0B		115.50
3	FOAM,BUMPER KF	1	47.80			MKB7W-50-111A		47.80
4	FASTENER FOAM	2	6.20			MFD01-68-AC3		12.40
5	REINFORCEMENT FRT	1	614.10			MKD53-50-070		614.10
6	PLATE,SET FRONT	1	160.20		✓	MKB8A-50-1C0C	160.20	160.20
7	FASTENER	2	3.20	✓		MGD7A-50-EA1	6.40	6.40
8	FRONT GRILLE,RADIATOR	1	1,566.40	✓		MK262-50-710A	1,566.40	1,566.40
9	BRACKET MASCOT FRT	1	92.10		✓	MKB8C-50-721	92.10	92.10
10	MASCOT FRT	1	95.10			MKA0G-51-730		95.10
11	BRACKET TOP FRT GRILLE	1	109.00		✓	MKB8A-50-717D	109.00	109.00
12	FRONT GRILLE RAD TOP	1	299.30	✓		MKB8A-50-7E1BBB	299.30	299.30
13	COVER GRILLE TOP RH	1	15.80			MKB8A-50-101A		15.80
14	COVER GRILLE TOP LH	1	15.80			MKB8A-50-102A		15.80
15	FASTENER FOAM	14	4.00	✓		MS51S-51-833	56.00	56.00
16	RIVET	8	9.20	✓		MTK21-50-355	73.60	73.60
17	LABEL,CAUTION	1	3.50			MPE01-15-031		3.50
18	LABEL,CAUTION	1	3.50			MKF49-61-439		3.50
19	BONNET	1	1,076.30	✓		MKBY0-52-31XB	1,076.30	1,076.30
20	WEATHERSTRIP BONNET OUTER	1	42.90			MKB7W-56-770A		42.90
21	FASTENER	5	2.40	✓		MJ001-56-741	12.00	12.00
22	WEATHERSTRIP BONNET INNER	1	42.00			MKB7W-56-750A		42.00
23	FASTENER	5	3.40	✓		MBC1D-58-762	17.00	17.00
SUPPLEMENTARY								
NO	DESCRIPTION	QTY	UNIT PRICE	1st	Supp	PARTS NO	REVISED	PRICES
1	CAP R ADD	1	15.50	✓		MKB8A-50-M32	15.50	✓

		TOTAL PARTS	4,506.90	5,499.80
		TOTAL PARTS COST	4,506.90	5,499.80

Labour Description

			REVISED	PRICES
1		REPLACE FRONT BUMPER, BONNET. 10463	990.00	1,500.00
2		SPRAY FRONT BUMPER, TOP GRILLE AND BONNET.	1,260.00	1,600.00
3	MZ-BR-FRTSEN	TO TRANSFER FRONT PEDESTRIAN SENSORS.	180.00	660.00
4	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.	120.00	250.00
5	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.	150.00	300.00
6	MZ-BR-SUNDRI	SUNDRIES.	20.00	50.00

SUPPLEMENTARY LABOUR DESCRIPTION

1	MZ-BR-PLATE1	TO SUPPLY NUMBER PLATE. <i>Adp</i>	<i>sent</i> 70.00	70.00
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REMARKS:

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TOTAL LABOUR	2,790.00	4,430.00
TOTAL PARTS	4,506.90	5,499.80
TOTAL	7,296.90	9,929.80
LESS EXCESS	-	-
TOTAL AFTER EXCESS	7,296.90	-
GST 7%	510.78	-
GRAND TOTAL	7,807.68	-
REPAIR DAYS	3.00	

TRANS EUOKARS PTE LTD

Authorised Signature

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	15/03/2022 10:00 (SGT)
Date of Accident	15/03/2022 00:05 (SGT)
Exact Location of Accident	206 Bedok South Ave 1, Singapore 469334
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK8725C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Yong Chieh lu
NRIC No	SXXXX943Z
Email Address	yongchiehlu@gmail.com
Mobile Phone No	(Phone) +65-90601597
Alternative Phone No	+65-96851485

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	Cx-5
Variant	-
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	2499

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900099224-01
Cover Note Number	-

DRIVER

Name of Driver	Long Chay Tuang Nicholas
NRIC No	SXXXX341C

Date Of Birth	19/11/1970
Occupation	Indoor
Date Of Driving Pass	15/12/1995
Driving experience	26 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96851485
Alt. Phone Number	-
Email Address	nicholaslong88@yahoo.com.sg
Address	blk 530D Pasir ris Drive 1
Address complement	-
Postcode	514530
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	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
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?	No
Number of Passengers (Including Driver)	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

FOREIGN VEHICLE 1

Vehicle Registration Number	PC3934E
Vehicle Category	Commercial vehicle

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

attached in attachment

ATTACHMENT(S)

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

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 willful 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' law firms/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' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 15/3/22

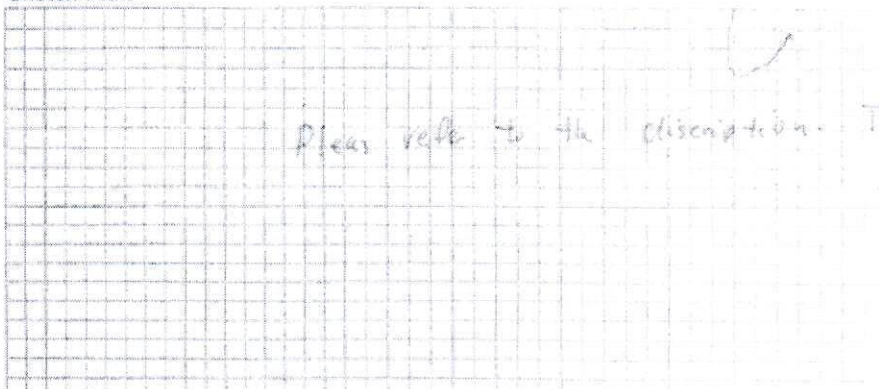
Policyholder's Signature / Date & Time



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


Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 15/3/22 Thursday, I parked my vehicle SAGE FIRST MULEX CX 5 at my workplace Open Air Carpark. When I came back to my car about 0312 hrs, I found a note on my windscreen to call a phone number (81313056). I called the number and spoke to Mr Arman Bin Masah, he informed me he had reversed his white Isuzu Hino van and hit my vehicle's front portion, he admitted to me he wasn't aware of his surrounding and did not noticed my parked stationary vehicle. I informed him I'll be consulting Agents on the insurance claim and repairs and also I'll be claiming against his insurance. Driver agreed.

Declaration

(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

Witnessed by Reporting Centre Personnel