

ASS. REC BY:

REF:

012/ 220029141Kv

Herath

ASSIGNMENT

From:

Date:

Estimated Cost:

OO/TP/WS/TP RES/OO RES/EVA/INV/MV

To inspect Vehicle No:

at Workshop no:

of

Insured:

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.

Est. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GIA / FR Seen:

Consistent? : Yes or No

Est. Repairs:

05

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLW 3239X Yr Regn: 02, 18

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Peugeot 3008 c.c. 1199

Colour:

M. Green

A/C: Insured / Std / NI / NA

Sp. Reading:

48210

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

VF 3M RH NY WMS 325029

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rlm / STD A/Rlm or

Tyre Size:

F:

R:

215/65R15

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

TOYO / YOKO or

Hapsen

Front

Rear

R/Bal.

9

mm

R/Bal.

9

mm

L/Bal.

9

mm

L/Bal.

9

mm

D.O.A.

10/2/22

D.O.I.

30/3/2022

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

N/S body

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

\$ - RS. SI

Fines

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Report Format :

Lump Sum / I.B.I: (\$

Date: 29/03/2022

Vehicle No: SLW3239X

Model: PEUGEOT 3008 ACTIVE PURETECH 1.2

Chassis: VF3MRHNYWHS325029-2017

Reg.Year: 2018

Third Party Insurer: CHINA TAIPING

Third Party Veh No: SJS1375T

Date of Accident: 10/02/2022

Estimator: TING AN

Surveyor:

ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	FRONT DOOR LH	1		<i>Ry</i> \$2,258.48
2	FRONT DOOR LOWER GARNISH COVER LH	1		<i>Ry</i> \$333.25
3	FRONT DOOR WEATHERSTRIP LH	1		\$151.77
4	FRONT DOOR OUTER MOULDING LH	1		<i>Ry</i> \$205.20
5	REAR DOOR LH	1		<i>Ry</i> \$2,258.48
6	REAR DOOR LOWER GARNISH COVER LH	1		<i>not</i> \$333.25
7	REAR DOOR WEATHERSTRIP LH	1		\$151.77
8	REAR DOOR OUTER MOULDING LH	1		<i>Ry</i> \$205.20
9	REAR DOOR UPPER HINGE LH	1		<i>Ry</i> \$126.50
10	REAR DOOR LOWER HINGE LH	1		<i>Ry</i> \$126.50
11	REAR DOOR CHECKER LH	1		<i>Ry</i> \$138.60
12	REAR DOOR WINDOW MOTOR WITH REGULATOR LH	1		\$689.60
13	REAR DOOR INNER TRIM BOARD LH	1		\$2,164.78
14	ROCKER PANEL LH	1		<i>Ry</i> \$2,050.90
15	B-PILLAR LH	1		REPAIR
SUB TOTAL				\$11,194.28
LESS 10%				-\$1,119.43
PARTS TOTAL				\$10,074.85

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	FRONT DOOR INNER TRIM BOARD CLIPS LH	1		<i>Ry</i> \$50.00
2	REAR DOOR INNER TRIM BOARD CLIPS RH	1		<i>Ry</i> \$50.00
3	FRONT DOOR LOWER GARNISH COVER CLIPS LH	1		<i>Ry</i> \$40.00
4	REAR DOOR LOWER GARNISH COVER CLIPS LH	1		<i>Ry</i> \$40.00
S/N TOTAL				\$180.00

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

Head office

6 Kung Chong Road Singapore 159143

Tel: (+65) 6472 1313 | Fax: (+65) 6472 2112

Branch

9A Serangoon North Ave 5 Singapore 554500

Tel: (+65) 6484 6410 | Fax: (+65) 6481 1993

Acknowledged by Repairer

Signature

Date:

Branch (Motor Insurance Claims)

Blk 10 Ang Mo Kio Ind. Park 2A #01-05 Singapore 568047

Tel: (+65) 6481 1522 | Fax: (+65) 6481 1011



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Third Party Insurer: CHINA TAIPING
Third Party Veh No: SJS1375T
Date of Accident: 10/02/2022
Estimator: TING AN
Surveyor:

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST ACCIDENT AREAS
& ETC.

5001
\$1,000.00

LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT
FRONT DOOR LH, REAR DOOR LH, ROCKER PANEL LH, B-PILLAR LH & ETC.

6001
\$1,000.00

LABOUR CHARGES TO REMOVE & REINSTALLED FRONT & REAR DOOR INNER
MECHANISM. BACK TO ORIGINAL OPERATIONS.

\$250.00 1201

TO CHECK WIRING & CENTRAL LOCKING SYSTEM.

\$120.00 201

TO TUFF KOTE & UNDERSEAL MATERIALS.

\$150.00 601

LABOUR TOTAL \$2,520.00

TING AN

TOTAL

\$12,774.85

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 05/03/2022 14:52 (SGT)
Date of Accident 10/02/2022 16:00 (SGT)
Exact Location of Accident 238 Thomson Rd, Singapore 307683
Additional Location Information NOVENA SQUARE MSCP (THOMSON RD)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLW3239X

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner PUN SHAW LIENG
NRIC No SXXXX007B
Email Address MATHPUN@GMAIL.COM
Mobile Phone No (Phone) +65-81861988
Alternative Phone No +65-81861988

VEHICLE PARTICULARS

Manufacturer Peugeot
Model 3008
Variant 3008 ACTIVE PURETECH 1.2 EAT6
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 1199

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number MT/00833896/01
Cover Note Number -

DRIVER

Name of Driver PUN SHAW LIENG
NRIC No SXXXX007B

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 completion 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.

[Signature]

[Signature]



[Signature]

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel ARYCHUA

05/03/2022

Sketch Plan

