

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. 8523698542SG

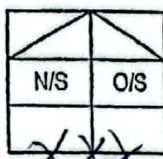
Sum Insured: _____ Excess: 0/-

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____

IDAC Accident Report _____ Consistent? : Yes or No

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

Est. Repairs: 7 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SFN 6047G

Yr Regn: 26/19/17

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

Truck / Trailer or

Make: Mitsubishi ASX c.c. 1998

Colour: Silver A/C: Insured / Std / NI / NA

Sp. Reading: 42135 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JMP XTGA 2WJ2000.270

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 225/55R18

R: _____

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. 7/3/22 D.O.I. 31/3/22

Survey held at Cycle & Carriage

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

MV-70K

01/04/22@11.32am revert to AIG via Merimen.

01/04/22@5.24pm Kok Chong informed C/A via Merimen.

01/04/22@5.49pm Informed Edwin C/A & ex:\$0/- by email.

29/04/22 Submit Prel. report as owner convert to claim TP.

Date/Time, File Pass to?



Prel. Report

Days Of Repair: 7

1) 29/04 Typist



Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2) _____

Add Fee:



Site Insp (\$ _____)



Interview (\$ _____)



Tech. Invs (\$ _____)



Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Report Format: _____

Lump Sum / L.B.F. (\$ _____)



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED

PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



ESTIMATE

Co Reg No : 1977014696

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Lim Guat Liu Ruby	Cust No/Name /LIM GUAT LIU RUBY
Block 415	Reg No/Reg Date SFN6047G / 26/10/201
Serangoon Central	Date In/Mileage / 0
#03-488	Chassis No JMFXTGA2WJZ000270
Singapore 550415	Engine No 4B11TR7086
Contact No Mobile: 96603885	Make/Model MIT/ASX 2.0 CVT 2WD (N06)
	Colour/Trim U02 STERLING SILVER/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
CSM00041	Cash	30/03/2022/ 15:09	BLE	261 / Edwin Caina	21386		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000							4500.00
RENEW TAILGATE , RR BUMPER & RR END PNL							1800
REPAIR RR FLR PNL , LHR FENDER & RHR FENDER				4 x	450		
E PNT98000							3300.00
RESPRAY TAILGATE , RR BUMPER , RR END PNL				4 x	350		
RR FLR PNL , LHR FENDER & RHR FENDER							
E PNT88000							300.00
REMOVE & REFIT TAILGATE COMPONENT							?
A 15900099							640.00
REMOVE & REFIT RR EXHUAUST MUFFLER				275			?
E PNT88000							300.00
REMOVE & REFIT RR FLR BOARD, TRIM & CARPET				120			
A 54900099							80.00
CHECK WIRING ELECTRICAL SYSTEM							120
A 10028901							280.00
TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM							
E PNT88000							240.00
REMOVE & REFIT RR WINDSCREEN GLASS							80.00
M SUNDRY							
SUPPLY WINDSCREEN SEALANT							50
M SUNDRY							80.00
SUPPLY RR NUMBER PLATE WITH CASING				cut			80
E PNT88000							100.00
REMOVE & REFIT REVERSE SENSOR							
M SUNDRY							250.00
SUPPLY REVERSE SENSOR				spark d			40
M SUNDRY							120.00
APPLY ANTI CORROSION ON AFFECTED AREAS							
M SUNDRY							80.00
SUPPLY BODY PNL SEALANT							
M SUNDRY							50.00
SUPPLY C&C BADGE				1"			
M SUNDRY							80.00

Confirm & accepted by

Authorized signatory and company stamp

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ESTIMATE

GST Reg No : MR-8500111-X

Co Reg No : 197701469G

Invoice Name & Address	Owner Name & Vehicle Info
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Block 415	Reg No/Reg Date SFN6047G / 26/10/201
Serangoon Central	Date In/Mileage / 0
#03-488	Chassis No JMFXTGA2WJZ000270
Singapore 550415	Engine No 4B11TR7086
Contact No Mobile: 96603885	Make/Model MIT/ASX 2.0 CVT 2WD (N06)
	Colour/Trim U02 STERLING SILVER/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
CSM00041	Cash	30/03/2022/ 15:09	BLE	261 / Edwin Caina	21386			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
Sundries								
S SPECIALISTJOB								
WO:1282729 ACCIDENT TOWED BY KING DOLLEY FROM UPP SERANGOON RD TO CNC								
M	FACE,RR BUMPER	BR	1.00	745.00	00.00	745.00		
M	BRKT,R/BMPR FACE SUPT,LH	?	1.00	22.00	00.00	22.00		
M	BRKT,R/BMPR FACE SUPT,RH	BR	1.00	22.00	00.00	22.00		
M	BRACKET,RR BUMPER	?	2.00	17.00	00.00	34.00		
M	REINFORCEMENT,RR BUMPER	DD	1.00	234.00	00.00	234.00		
M	CLIP,ENG ROOM COVER	nec	8.00	2.00	00.00	16.00		
M	GARNISH,RR BUMPER,CTR	mis	1.00	18.00	00.00	18.00		
M	REFLECTOR,LH	NN	1.00	104.00	00.00	104.00		
M	REFLECTOR,RH	BR	1.00	104.00	00.00	104.00		
M	TRIM,RR END	CR4	1.00	123.00	00.00	123.00		
M	PANEL,RR END	DD	1.00	261.00	00.00	261.00		
M	W/STRIP,TAILGATE OPENING	CR4	1.00	194.00	00.00	194.00		
M	HINGE,TAILGATE	NN	2.00	28.00	00.00	56.00		
M	LATCH,TAILGATE	?	1.00	385.00	00.00	385.00		
M	STRIKER,TAILGATE LATCH	NN	1.00	19.00	00.00	19.00		
M	GARNISH,TAILGATE	CR4	1.00	129.00	00.00	129.00		
M	STOPPER,WINDSHIELD GLASS	nec	2.00	3.00	00.00	6.00		
M	SPACER,TAILGATE	nec	2.00	3.00	00.00	6.00		
M	FASTENER,WINDSHIELD	nec	4.00	6.00	00.00	24.00		
M	GAS SPRING,TAILGATE,LH	NN	1.00	148.00	00.00	148.00		
M	GAS SPRING,TAILGATE,RH	NN	1.00	148.00	00.00	148.00		
M	MARK,THREE-DIA	nec	1.00	61.00	00.00	61.00		
M	MARK,ASX	nec	1.00	56.00	00.00	56.00		
M	LAMP ASSY,COMB,RR LH	NN	1.00	560.00	00.00	560.00		
M	LAMP ASSY,COMB,RR RH	BR	1.00	560.00	00.00	560.00		
M	LAMP ASSY,TAIL,LH	CR4	1.00	177.00	00.00	177.00		
M	LAMP ASSY,TAIL,RH	BR	1.00	177.00	00.00	177.00		
M	LAMP ASSY,LICENSE PLATE	?	2.00	34.00	00.00	68.00		
M	MOTOR,RR WINDOW WIPER	?	1.00	454.00	00.00	454.00		
M	MOULDING,RR WHEEL ARCH,LH	?	1.00	132.00	00.00	132.00		

Confirm & accepted by

Authorized signatory and company stamp

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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
CSM00041	Cash	30/03/2022/ 15:09	BLE	261 / Edwin Caina	21386			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
M	MOULDING,RR WHEEL ARCH,RH				1.00	132.00	00.00	132.00
M	PROT,UNDER RR FLOOR HEAT				1.00	81.00	00.00	81.00
M	MUFFLER,EXHAUST MAIN				1.00	637.00	00.00	637.00
M	HANGER,EXHAUST MUFFLER				2.00	24.00	00.00	48.00
M	GASKET,CATALYTIC CONVERTER				1.00	11.00	00.00	11.00

Estimate

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:

Steve (LKK)

31/3/22, 10.00am

OD-11 ML

Excess - ?

P/P

17 Bk SM

7 days

Confirm & accepted by

	Nett	16,432.00
7% GST on	16432.00	1150.24
Total Payable		17,582.24

Authorized signatory and company stamp

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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	07/03/2022 13:41 (SGT)
Date of Accident	07/03/2022 09:25 (SGT)
Exact Location of Accident	Potong Pasir Ave 1, Singapore
Additional Location Information	POTONG PASIR AVE 1/ALONG UPPER SERANGOON ROAD JUNCTION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFN6047G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM GUAT LIU RUBY
NRIC No	SXXXX355C
Email Address	RUBYLIM@REDBEAN.COM.SG
Mobile Phone No	(Phone) +65-96603885
Alternative Phone No	+65-96603885

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Asx
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900260122-02
Cover Note Number	-

DRIVER

Birth	SXXXX355C
ation	25/03/1967
Of Driving Pass	Indoor
ing experience	05/12/1998
ender	23 YEARS AND 3 MONTHS
Mobile Number	Female
Alt. Phone Number	(Phone) +65-96603885
Email Address	+65-96603885
Address	RUBY LIM@REDBEAN.COM.SG
Address complement	BLK 415 SERANGOON CENTRAL #03-488
Postcode	-
Is the driver the policyholder?	550415
If No, Relationship of the Driver with the Insured	Yes
Does Driver Own Other Vehicles?	-
Vehicle Registration Number of Other Vehicle Owned by Driver	No
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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 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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBG4106S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	EDWIN LIM QING JIE
Contact Number	(Phone) +65 92220417

Complement
Company Name
Of Damage
of property damaged in accident
Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Gender
Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

LIM GUAT LIU RUBY

PAIN ON RIGHT SHOULDER
SFN6047G
Yes
No

SKETCH PLAN

URGENT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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:

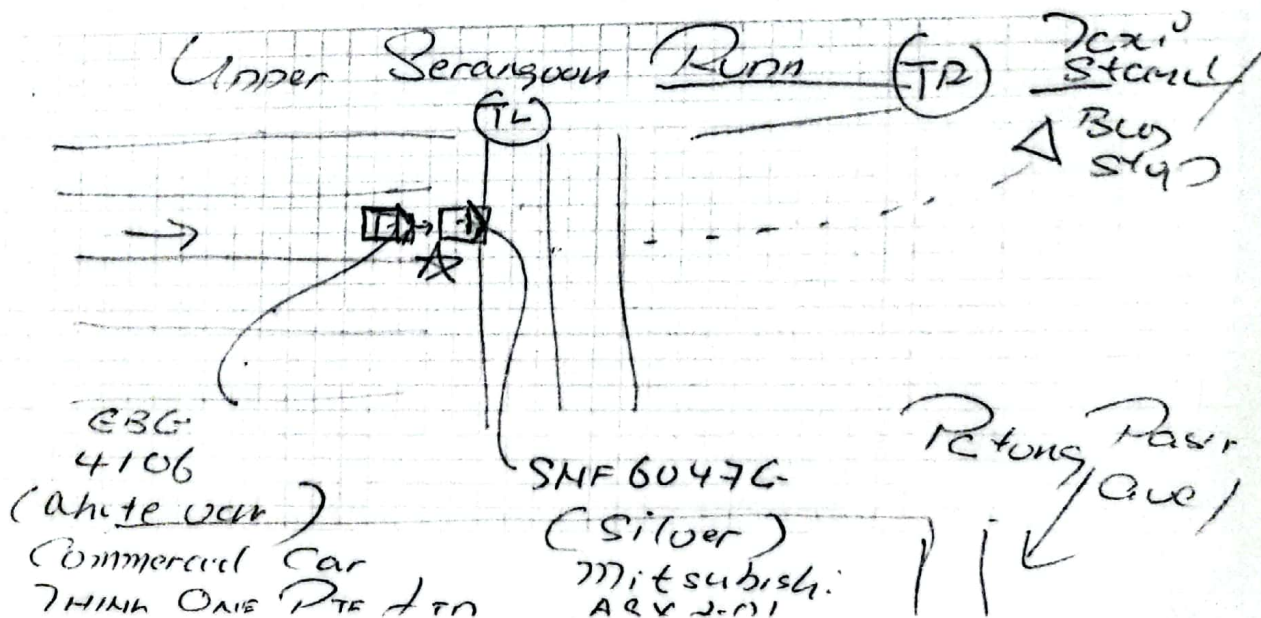
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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



Circumstances of the Accident

- 1) On 7 March, approx 9:25 am
- 2) GRG 4106 hit the back of SAN 6047 at the junction of
- 3) It was RED Traffic
- 4) Drove slowly to Taxi Stand not to obstruct traffic
- 5) Got driver's information and was advised to tow car to workshop. ~~WAS, WASH~~
- 6) SAN 6047 is not in good condition to drive further! ✓

Yppp Separation Point

GRG 4106
Think One Leasing Pte Ltd
20 Libi Road 4
#02-06
Singapore 408622
ROC 2011/56091A

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