

(08/11/13) wef

ASS. REC. BY: *Marcus*

REF:

CS/EG1 22003324/4943

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: *SMG 98065*at Workshop m/s *Lp.*

of \_\_\_\_\_

Insured: *GBF 9817X*

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

CDMCG22000660

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: *\$68k.*

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: *4* days Res.: Yes or NoLum Sum: *20* % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

*440h*

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: *274 18615*Date / Time Action / Instruction *27/4/22*Veh No: *SMG 98065* Yr Regn: *08/10/19*Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /Truck / Trailer or *NA*Make: *Toyota Sienta* o/c c.c. *1496*Colour: *Silver* A/C: Insured / Std / NI / NASp. Reading: *13825* T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: *MHF228H3803 61597*Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: *185/60R15*

R: \_\_\_\_\_

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

TOYO / YOKO or

Front

R/Bal. *7* mmL/Bal. *7* mmD.O.A. *10/4/22*

Survey held at \_\_\_\_\_

Rear

R/Bal. *7* mmL/Bal. *7* mmD.O.I. *11/04/22*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, File Pass to?

☐

: Preli. Report

Days Of Repair: *4*Resurvey No. of Trip: *2*1) *21/4/22* *trans*☐

: Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech. Invs (\$)

☐

: Weekend (\$)

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

TOTAL

Report Format : *MER-TP*Lump Sum / I.B.I. (\$) *6300*

*19/4/22 4/5 @ 6300 in front Alan. Credit \$17866, 74%*

*21/4/22 @ 11:01am moved to ERGO via Meriman.*

submit to us

not Authorized  
den  
11/04/22  
2/s \$6300  
4 days

# FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063/ 67467158 Fax No: 67458520

Tax Reg No : 200006262D

VEHICLE No: SMG 9806S

1PC	REAR WINDSCREEN	11		\$1,488.10 X
1PC	REAR WINDSCREEN MOULDING	1pc	110.80	\$188.30 /
1PC	TAILGATE	body	1349.10	\$1,685.10 /
1PC	TAILGATE OUTER HANDLE	scr/cr		\$344.80 /
1PC	TAILGATE REAR LOGO	1pc		\$68.50 /
1PC	TAILGATE 'SIENTA' EMBLEM	1pc		\$66.80 /
1PC	TAILGATE 'G' EMBLEM	1pc		\$50.00 /
2PCS	TAILGATE REFLECTORS @\$650.00	11		\$1,300.00 X
1PC	TAILGATE REAR WIPER ARM	11		\$188.90 X
1PC	TAILGATE REAR WIPER MOTOR	11		\$620.00 X
1PC	TAILGATE WEATHERSTRIP	1pc		\$288.90 /
1PC	TAILGATE INNER LOCK	3ut/1w1		\$341.90 /
1PC	TAILGATE LOCK STIRKER	11		\$60.00 X
1PC	TAILGATE INNER TRIM	2e/1w1		\$311.60 /
1PC	REAR BUMPER	2e/1w1		\$1,315.10 /
1PC	REAR BUMPER CENTRE BLACK GARNISH	grozd	688.10	\$488.90 /
2PCS	REAR BUMPER SIDE BLACK GARNISHS @\$285.10	11	295.50	\$570.20 1pc
2PCS	REAR BUMPER REFLECTORS @\$85.00	11		\$170.00 X
2PCS	REAR BUMPER SIDE RETAINERS @\$65.00	11		\$130.00 X
1PC	REAR BUMPER SPONGE	11		\$199.80 X
2PCS	REAR BUMPER PDC SENSORS @\$285.00	11		\$570.00 /
1PC	REAR END PANEL OUTER	body	725.10	\$899.10 /
1PC	REAR END PANEL INNER	1w1		\$688.10 /
1PC	REAR END PANEL LOCK SENSOR	11		\$350.00 X
1PC	REAR END PANEL TOP GARNISH	1w1		\$168.90 /
2PCS	TAILLAMPS @\$850.50	11		\$1,701.00 X
2PCS	REAR FENDER INNER TRIM BOARDS @\$685.10	11		\$1,370.20 1pc
1PC	REAR FENDER OUTER TOP PROTECTOR N/S	11		\$655.50 X
1PC	REAR FLOOR PANEL	R		\$1,415.10 X
1PC	REAR FLOOR PANEL TOP BOARD	waped	610.50	\$622.30 /
1PC	REAR FLOOR PANEL TOP TRAY	11		\$588.10 X
1PC	REAR FLOOR PANEL TOOLS SPONGE	11		\$520.80 X
				\$19,426.00

## S.NETT

1SET	REAR BUMPER CLIPS	1pc	\$50.00 ✓
1PC	REAR BUMPER CENTRE LAMP	1pc	\$150.00 120
1PC	REAR WINDSCREEN SEALANT	1pc	\$50.00 40
1PC	REAR WINDSCREEN INNER SEAL	1pc	\$50.00 40
1PC	REAR END PANEL SEALANT	1pc	\$50.00 ✓



1SET	TAILGATE INNER TRIM INSULATOR	nf	\$300.00	X
1SET	REAR FENDER INNER TRIM BOARD CLIPS	nee	\$50.00	✓
1SET	REAR LICENCE PLATE WITH SEAL	nee	\$80.00	60
	TO CHECK WIRING		\$50.00	20
	TO DISMANTLE & REPLACED REAR PDC SENSOR		\$80.00	50
	TO DISMANTLE & REFIX REAR WINDSCREEN		\$150.00	120
	TO DISMANTLE & REFIX CUSHION UPHOLSTERY		\$120.00	80
	TO DISMANTLE & REFIX REAR FENDER GLASS	11	\$100.00	✓
	TO DISMANTLE & REFIX REAR EXHAUST	11	\$100.00	X
	TO TRANSFER TAILGATE MECHANISM		\$100.00	60
	TO SPRAY PROOFING		\$180.00	60
	TO MOUNT VEHICLE ON CAR O-LINER	11	\$380.00	X
	LABOUR FOR PANEL BEATING & REPLACED PARTS		\$1,200.00	600
	TO PUTTY & SPRAY PAINTING		\$1,500.00	900
TOTAL			\$24,166.00	

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

Acknowledged by Repairer  
Signature:  
Date:

2-7513.7  
252  
7-5635.27  
S.N-410  
L-1890  
7535.27  
203  
L.K.K.

## 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	11/04/2022 16:50 (SGT)
Date of Accident	10/04/2022 17:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	NICOLL HIGHWAY TWDS ESPLANADE DR
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG9806S
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KEE SEN CHEE
NRIC No	SXXXX440H
Email Address	archie.huh@gmail.com
Mobile Phone No	(Phone) +65-96575414
Alternative Phone No	+65-96575414

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
Variant	SIENTA STANDARD (AUTO)
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	1496

### INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

### DRIVER

Name of Driver	KEE SEN CHEE
NRIC No	SXXXX440H

Date Of Birth	15/12/1981
Occupation	Indoor
Date Of Driving Pass	27/11/2002
Driving experience	19 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96575414
Alt. Phone Number	+65-96575414
Email Address	archie.huh@gmail.com
Address	101 ALJUNIED CRESCENT #07-335 SPORE 380101
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

#### 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)	6
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	KEE SUN NEE
Gender	Male

#### PASSENGER 2

Name	KEE BEE WAH
Gender	Female

#### PASSENGER 3

Name	LIM HUI TING
Gender	Female

#### PASSENGER 4

Name	KEE HUI JING
Gender	Female

#### PASSENGER 5

Name	KEE RUI JIN
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

#### REFER TO SKETCH PLAN



## 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	GBF9817X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods 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)	-

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)**

(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 :

(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

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

Witnessed by Reporting Centre  
Personnel

A. SMG 9806S

B. ABF 9817X



**Describe Circumstances of the Accident**

On 10/04/2022 at about 17:20PM. I was travelling along  
 Nicoll Highways towards Esplanade Dr. I was travelling straight.  
 Suddenly, the vehicle in front of me stopped, I followed. Then,  
 I felt an impact. Vehicle B hit the rear portion of my vehicle.

**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