ASS. REC. BY: Kenneth | REF: SMR/22003524/Kty

CS/SMR22003524/Kty3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Yee Auto

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR 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: SMP 5828 Yr Regn: 03, 15

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Toy Altis c.c 1598

Colour M.P.White A/C: Insured / Std / NI / NA

Sp.Reading 347797 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR053REH104527448

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

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

Tyre Size: F: 205/55R16

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	4 mm	R/Bal.	8 mm
L/Bal.	4 mm	L/Bal.	8 mm
D.O.A.	12/4/22	D.O.I.	20/4/2022

Survey held at ✓

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

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

Date / Time	Action / Instruction
/	9862.00
	LUMP SUM $2100, 5DAYS
	RED: 7762 ;78%

Date/Time, File Pass to? 1) _____ : Prell. Report

Date/Time, File Return to? 2) _____ : Final Report

Days Of Repair: 5

Resurvey No. of Trip: _____

Add Fee: : Site Insp ($) : Interview ($) Tech Invs ($) Weekend ($)

Survey Fee: _____

Transportation: S + RS S

Parking

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (S

YEE AUTO PTE LTD

160 Sin Ming Drive #02-17/#07-12 Sin Ming AutoCity Singapore 575722
Tel: 6457 5768 Fax: 6252 8459 Mobile: 9687 4031
Email: yeeautopteltd@gmail.com
Registration No.: 201719251W GST No: 201719251W

M/S : First Capital Insurance Ltd
36 Robinson Road
#16-01 City House
Singapore 068877

ATTN: Motor Claim Department

Not Authorised U/Surg & Recovery After Repair 5days

Estimate No:	ES2200003
Date:	19 Apr 2022
Policy No:	
Veh Reg No:	SMP582Z
Make/Model:	TOYOTA TOYOTA COROLLA ALTIS 1.6L CVT
Chassis No:	MR053REH104527448
Engine No:	1ZRX492179
Reg. Date:	12/03/2015

Your Ref No:	-
Claim Type:	Third Party
Accident Date:	12/04/2022
TP Veh Reg No:	SHB5795B

Estimate Repair Cost to Vehicle No :SMP582Z

	Description	U/Price	Quantity	List Price S$	Amount S$
	Net Price				
1	REAR TYRE - RH	300.00	1 PC	300.00	
2	REAR WHEEL RIM - RH	800.00	1 PC	800.00	
				1,100.00	1,100.00
	Spare Parts				
3	FRONT DOOR - RH	955.00	1 PC	955.00	
4	FRONT DOOR STICKER - RH	75.00	1 PC	75.00	
5	FRONT DOOR WEATHERSTRIP - RH	135.00	1 PC	135.00	
6	REAR AXLE	980.00	1 PC	980.00	
7	REAR BUMPER	842.90	1 PC	842.90	
8	REAR BUMPER SIDE RETAINER - LH	80.00	1 PC	80.00	
9	REAR BUMPER SIDE RETAINER - RH	80.00	1 PC	80.00	
10	REAR DOOR - RH	969.30	1 PC	969.30	
11	REAR DOOR HINGE - RH (TOP)	71.50	1 PC	71.50	
12	REAR DOOR HINGE - RH (LOWER)	71.50	1 PC	71.50	
13	REAR DOOR LOCK - RH	361.20	1 PC	361.20	
14	REAR DOOR OUTER HANDLE - RH	183.90	1 PC	183.90	
15	REAR DOOR REGULATOR GEAR - RH	261.20	1 PC	261.20	
16	REAR DOOR STICKER -RH	75.00	1 PC	75.00	
17	REAR DOOR TRIMBOARD CLIPS - RH	50.00	1 SET	50.00	
18	REAR DOOR TRIM BOARD -RH	568.20	1 PC	568.20	
19	REAR DOOR WEATHERSTRIP - RH	135.60	1 PC	135.60	
20	REAR SHOCK ABSORBER - RH	335.50	1 PC	335.50	
21	REAR STEP GARNISH - RH	261.20	1 PC	261.20	
22	REAR WHEEL BEARING - RH	220.00	1 PC	220.00	
				6,712.00	6,712.00
	Labour				
23	TO DISMANTLE & REPLACE DAMAGED PARTS, PANEL BEAT WHERE NECESSARY.	1,400.00	1 JOB	1,400.00	50d
24	TO PUTTY, APPLY PRIMER & SPRAY-PAINT ON THE AFFECTED PORTION.	1,400.00	1 JOB	1,400.00	66d
25	TO REMOVE/TRANSFER RH FRONT AND REAR DOOR MECHANISMS.	150.00	1 JOB	150.00	60d
26	TO CHECK WIRING FUNCTIONS.	80.00	1 JOB	80.00	2d
27	WHEEL ALIGNMENT	120.00	1 T	120.00	60d

25%

SMP582Z

Toyota (USA) : Corolla : 2014-19 : Sedan : with 205/55R16 Tire (except Mexico)
4-Wheel Total Alignment

Front : Left

Actual	Before	Specified Range
-0°53'	-0°53'	-1°20' 0°10'
2°39'	2°39'	2°15' 3°45'
-0°36'	-0°36'	-0°06' 0°06'
13°13'	13°13'	
12°20'	12°20'	

Camber	
Caster	
Toe	
SAI	
Included Angle	
Turning Angle Diff.	

Front : Right

Actual	Before	Specified Range
-0°22'	-0°22'	-1°20' 0°10'
2°22'	2°22'	2°15' 3°45'
-0°14'	-0°14'	-0°06' 0°06'
12°35'	12°35'	
12°14'	12°14'	

Front

	Actual	Before	Specified Range
Cross Camber	-0°32'	-0°32'	-0°45' 0°45'
Cross Caster	0°17'	0°17'	-0°45' 0°45'
Cross SAI	0°38'	0°38'	
Total Toe	-0°50'	-0°50'	-0°12' 0°12'
Cross Turn Diff.			

Rear : Left

Actual	Before	Specified Range
-1°50'	-1°50'	-1°59' -0°59'
0°17'	0°17'	0°00' 0°18'

Camber	
Toe	

Rear : Right

Actual	Before	Specified Range
-2°49'	-2°49'	-1°59' -0°59'
-0°31'	-0°31'	0°00' 0°18'

Rear

	Actual	Before	Specified Range
Cross Camber	0°58'	0°58'	-0°45' 0°45'
Total Toe	-0°14'	-0°14'	0°01' 0°35'
Thrust Angle	0°24'	0°24'	

SS02224D0001 / S & H Motor Pte Ltd
ENTRY DATE & TIME: 13/04/2022 11:15 (SGT)
SUBMITTED BY: Cynthia Myint Myint Than
VERSION: 1 (13/04/2022 11:15 (SGT))

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 witholding 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	13/04/2022 11:15 (SGT)
Date of Accident	12/04/2022 14:04 (SGT)
Exact Location of Accident	Changi South Ave 4, Singapore
Additional Location Information	Changi South Ave 4 LP 6 & 7
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP582Z

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Ang Ser Juay (Hong SiRui)
NRIC No	S7122335C
Email Address	srwood88@yahoo.com
Mobile Phone No	(Phone) +65-92225908
Alternative Phone No	(Home) +65-92225908

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Altis
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	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5112892999-02
Cover Note Number	-

DRIVER

Name of Driver	Ang Ser Khim
NRIC No	S1642497H

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**.
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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 01/4/22 5:18pm	Driver's Signature (if driver is not the policyholder) / Date & Time 01/4/22 5:18pm	Witnessed by Reporting Centre Personnel

Sketch Plan

(A) SMP582E (B) SHB1795B