	22004158/k
Kenneth	ASSIGNMENT
From: Date:	
Estimated Cost:	Veh No: SUF FOSP Yr Regn: 09, 16
OD WP WS I TP RES I OD RES I EVA I INV I MY	Taxi / Prime Mover /
To Inspect Vehicle No:	Truck / Trailer or
at Workshop m/s /VTowar x	Make: Merus 3 c.c 1496
of	Colour M. Cray A/C: Insured / Std / NI / NA
Insured:	Sp.Reading 37/409 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	CANO: JM6BM42A8G0346707
Sum Insured: Excess:	Cond.   Sood / Fair / Poor / Burnt
(Client's Record)	Steering: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
	Modi: NII / S/Rim / STD/A/Rim or
(Policy Condition)	Tyre Size: F: /SPatos 205/80R16
Remark: The veh had commenced its	RTUNAND - 100K18
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Bal. or Market Value: \$ 60k	TOYO/YOKO or
IDAG 1	Front
IDAC Accident Rport: Consistent? : Yes or No	R/Bal C
GIA / PR Seen: Consistent?: Yes or No	L/Bal. R/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	nm L/Bal. 6 inm
Lum Sum: 20 % 3 Val.: Yes or No	0 / 1 / 4411
CA / REV / REP. / 24 HRS	Survey held at
Valida Wasan	Des. of Damages : Frt   Rear   O/S / N/S / U/C / Rooftop or
Person Contacts	
r craori contacted:	The III a
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
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Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction  Oate/Time, File Pass to?	
Date / Time   Action / Instruction    Oate/Time, File Pass to?   Prell. Report   Date/Time, File Pass to?   Date/Time   Pass to.   Date/Time   Date/Time   Pass to.   Date/Time   Pass	ays Of Repair:
Date / Time   Action / Instruction    Oate/Time, File Pass to?   Prell. Report   Date/Time, File Pass to?   Date/Time   Pass to.   Date/Time   Date/Time   Pass to.   Date/Time   Pass	ays Of Repair:
Date / Time   Action / Instruction    Date / Time   Action / Instructi	ays Of Repair: Survey No. of Trip: Survey Fee:
Date / Time   Action / Instruction    Oate/Time, File Pass to?   Prell. Report   Date/Time, File Pass to?   Date/Time   Pass to.   Date/Time   Date/Time   Pass to.   Date/Time   Pass	Bys Of Repair: Survey No. of Trip: Survey Fee: Transportative:
Date / Time   Action / Instruction  Date / Time   Action / Instruc	ays Of Repair: Survey No. of Trip: Survey Fee: Transporativi: Site Insp (\$ ) Interview (\$
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Date / Time   Action / Instruction    Date / Time   Action / Instructi	Survey No. of Trip:  Survey Fee:  Transportative:  Site Insp (\$ ) S * RS SI  Interview (\$ ) Furths  Tech Invs (\$ ) Others

# **AUTOWORX HOUSE**

176 SIN MING DRIVE #02-01 SINGAPORE 575721 TEL: 6452 8211 FAX: 6451 7420

## **ESTIMATE**

**MCQUEEN RENTALS PTE LTD** 

c/o 46 Lentor Plain Singapore 786548

NOT Mehorike

NOT Mehorike

Plenny & Flee Pains

leday,

Date: 17/5/2022

		Date.	17/5/2022
QUANTITY	PARTICULARS		AMOUNT (\$)
	RE: MAZDA 3 / SLF 7058 P		
1 pc 2 pcs 2 pcs 1 pc 1 pc 1 pc 2 pcs 1 pc	rear boot lid rear boot ' LOGO " rear boot emblem " MAZDA 3 " rear boot emblem "SKYACTIVE TECHNOLOG rear boot lock rear boot weatherstrip rear boot lamp rear tail lamp assy rear bumper reinforcement rear bumper rear bumper fow cover rear bumper reflector end panel	@ 496.80 @ 568.40 @ 213.90	986.30 Nex 82.60 Nex 63.80 Nex 75.60 Nex 291.30 Nex 326.80 Nex 326.80 Nex 326.80 Nex 326.80 Nex 328.60 Nex 63.70 Nex 328.60 Nex 63.80 Nex 328.60 Nex 63.80 Nex 328.60
	verse sensor	Sub-total Less 15% Sub-total s.nett	7,307.80 1,096.17 6,211.63
	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	Sub-total	6,461.63
	Signature:		

	balance brought forwards.	6,	461.63	
	To remove and replace all the parts mentioned above, knocking and straighten up the necessary affected areas.	5001	850.00	
	To install reverse sensor.		100.00	
	To check wiring system.	151	50.00	
-	To apply putty and spray painting on affected areas.	604	850.00	
7	To apply waterproof sealant on affected areas.	1	100.00	χ
7	o apply rust proofing on affected areas.	301	100.00	
	Tota	1 8	3,511.63	
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		,		4
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# **©** SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

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.

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 28/04/2022 17:27 (SGT) **Date of Accident** 28/04/2022 10:17 (SGT) **Exact Location of Accident** Shelford Rd, Singapore **Additional Location Information** Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number **SLF7058P** 

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner MCQUEEN RENTALS PTE LTD Company Reg No 2XXXXX605G **Email Address** ask@mcqueenrentals.com Mobile Phone No (Phone) +65-88585551 Alternative Phone No +65-88585551

**VEHICLE PARTICULARS** 

Manufacturer Mazda Model 3 4-DOOR SEDAN 1.5L SP.6EAT Variant Exact purpose for which vehicle was being used at time of Private use

Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private hire

Transmission Auto CC 1496

**INSURANCE COMPANY** 

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy Yes **Policy Number** 5115168776-02 Cover Note Number

DRIVER

Name of Driver SXXXX508H **NRIC No** 

XIAO LIANGHAI

#### **IMPORTANT NOTICE**

PI

- 1. Flease report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any waful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
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- 7. By the lodgement of this report to the insurers, you hereby consent to the erchiving 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)

lunderstand, 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;
- (ii) 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

