

ASS. REC. BY:

REF:

A15/22004160/KV

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

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.

Bal. or Market Value:

IDAC Accident Rpt:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

Consistent? : Yes or No

Consistent? : Yes or No

Res.: Yes or No

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

☐

: Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Fees

Others

TOTAL

Veh No:

SCY 69883 Yr Regn: 11, 15

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

Truck / Trailer or

Make:

Toy Camry

c.c.

1998

Colour

M. Gray

A/C: Insured / Std / NI / NA

Sp. Reading

124541

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

MR 0530K 5100 104524

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

215/60R16

R:

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

Front

R/Bal.

mm

Rear

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

23/4/22

D.O.A.

6/5/2022

Survey held at

Des. of Damages: Fnt / Rear / O/S / N/S / UIC / Rooftop or

O/S Rear body

The UIC / Chassis frame / Body Structure affected due to collision.

Report Format :

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

# AH LIM MOTOR COMPANY

No. 10 Ang Mo Kio Road, Park 2A #01-40 AMK, Singapore 560047  
TEL: 6453 1244 (4 lines) FAX: 6453 6170 Email: ahlimmco@singnet.com.sg  
GST MPN 000005042 ROCB NO 004703008

**SURVEYOR COPY**

MS: TAY LING FONG  
110 SELETAR GREEN VIEW

SINGAPORE 805089

ATTN:

Your Ref No: SCY6968B  
Claim Type: Third Party → *Private*  
Accident Date: 25/04/2022  
TP Veh Reg No: SLT603SE

Estimate No: MC1902640  
Date: 27 Apr 2022  
Policy No: MT/00970642  
Veh Reg No: SCY6968B  
Make Model: TOYOTA CAMRY 2.0  
AUTO

*Not Notation*  
*Repair After Paint*  
*6/8up*

*2dgy*

## Estimate Repair Cost to Vehicle No :SCY6968B

Description	Quantity	List Price	Amount
		<u>S\$</u>	<u>S\$</u>
<b>SPARE PARTS</b>			
1 REAR DOOR RH	1 PC	1,597.40	X
2 REAR DOOR RUBBER (AT DOOR) RH	1 PC	217.30	X
3 REAR DOOR RUBBER (AT DOOR) BTM RH	1 PC	79.50	X
4 REAR DOOR RUBBER (AT BODY) RH	1 PC	310.60	X
5 REAR DOOR LOCK RH	1 PC	595.70	X
6 SIDE SKIRT RH	1 PC	633.30	X
7 SIDE SKIRT CLIPS	7 PC	80.50	X
8 REAR FENDER RH	1 PC	1,137.00	X
9 REAR FENDER COWLING RH	1 PC	202.20	X
10 REAR FENDER COWLING CLIPS	8 PC	36.00	X
11 REAR WINDSCREEN MLDG	1 PC	967.20	X
12 REAR WINDSCREEN MLDG BTM - CHECK PRICE	1 PC	0.00	X
13 REAR BUMPER	1 PC	695.80	✓
14 REAR BUMPER REFLECTOR RH	1 PC	63.40	X
15 REAR BUMPER SIDE RETAINER RH	1 PC	117.40	✓
16 REAR BUMPER CLIPS	8 PC	38.40	✓
17 REAR BUMPER REINFORCEMENT	1 PC	423.90	X
18 REAR AIR VENT RH	1 PC	144.90	X
		7,340.50	
	Less 25%	1,835.13	5,505.38
<b>Special Nett</b>			
19 INNER SEAL	1 PC	20.00	X
20 WINDSCREEN SEALANT	1 PC	40.00	✓
21 PARKIGN SENSOR 4-IN-1 SET	1 PC	400.00	X
		460.00	460.00
<b>LABOUR</b>			
22 TO CHECK AND RE-ADJUST WHEEL ALIGNMENT.	1 PC	80.00	X
23 TO REMOVE AND REINSTALL/REPLACE FRONT/REAR WINDSCREEN.	1 PC	120.00	X
24 TO DISMANTLE AND TRANSFER DOOR FITTINGS AND MECHANISM SUCH AS POWER WINDOW MOTOR AND REGULATOR TO NEW DOOR/FACILITATE REPAIR.	1 PC	120.00	X
25 TO REMOVE AND REINSTALL/REPLACE QUARTER GLASS.	1 PC	60.00	X
26 TO REMOVE AND REINSTALL CUSHIONS, SEATS, BACKREST, INNER TRIM, GARNISH, ROOF LINING OR UPHOLSTERY TO FACILITATE REPAIRS.	1 PC	180.00	X

*Zila*  
Ah Lim Motor Company



# AH LIM MOTOR COMPANY

No. 10 Ang Mo Kio Ind. Park 2A #01-09 AMK Autopoint Singapore 568047  
TEL: 6483 1244 ( 4 lines ) FAX: 6483 6170 Email: ahlimmc@singnet.com.sg  
GST:M9-0009639-E RCB NO:06470300B

**SURVEYOR COPY**

M/S : TAY LING FONG  
110 SELETAR GREEN VIEW

SINGAPORE 805089

ATTN:

Your Ref No: SCY6968B  
Claim Type: Third Party  
Accident Date: 25/04/2022  
TP Veh Reg No: SLT6038E

Estimate No: MC1902640  
Date: 27 Apr 2022  
Policy No: MT/00970642  
Veh Reg No: SCY6968B  
Make/Model: TOYOTA CAMRY 2.0  
AUTO

## Estimate Repair Cost to Vehicle No :SCY6968B

Description	Quantity	List Price	Amount
27 TO REMOVE AND REINSTALL/REPLACE FRONT/REAR BUMPER SENSORS.	1 PC	<del>S\$</del> 60.00	<del>S\$</del> 501
28 TO SPRAY ANTI-RUST COATING ON AFFECTED AREAS.	1 PC	60.00	X
29 TO DISMANTLE ALL DAMAGED PARTS.TO CUT & WELD REAR FENDER RH.TO KNOCK & REPAIR REAR WHEELHOUSE PANEL RH,REAR END PANEL INNER PANELS AND AFFECTED AREAS. TO REFIT LISTED PARTS BACK SAME.	1 PC	800.00	2001
30 TO SPRAY REAR DOOR RH,SIDE SKIRT RH,REAR FENDER RH,REAR BUMPER,REAR END PANEL.	1 PC	1,000.00	2001
		2,480.00	2,480.00
		Total	S\$ 8,445.38
		Add GST @ 7%	591.18
		Total Amount Payable	S\$ 9,036.56

TOTAL: SINGAPORE DOLLAR NINE THOUSAND THIRTY SIX AND CENTS FIFTY SIX ONLY

Please arrange this vehicle to be surveyed soonest possible.  
Thank You

For AH LIM MOTOR COMPANY

  
Ah Lim Motor Company  
AUTHORISED SIGNATURE

**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:

## 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	25/04/2022 12:48 (SGT)
Date of Accident	25/04/2022 07:33 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE TOWARDS BRADDELL
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCY6968B
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAY LING FONG
NRIC No	SXXXX017E
Email Address	LINGFONGTAY@GMAIL.COM
Mobile Phone No	(Phone) +65-96285689
Alternative Phone No	+65-96285689

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Camry
Variant	CAMRY 2.0 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	1998

#### INSURANCE COMPANY

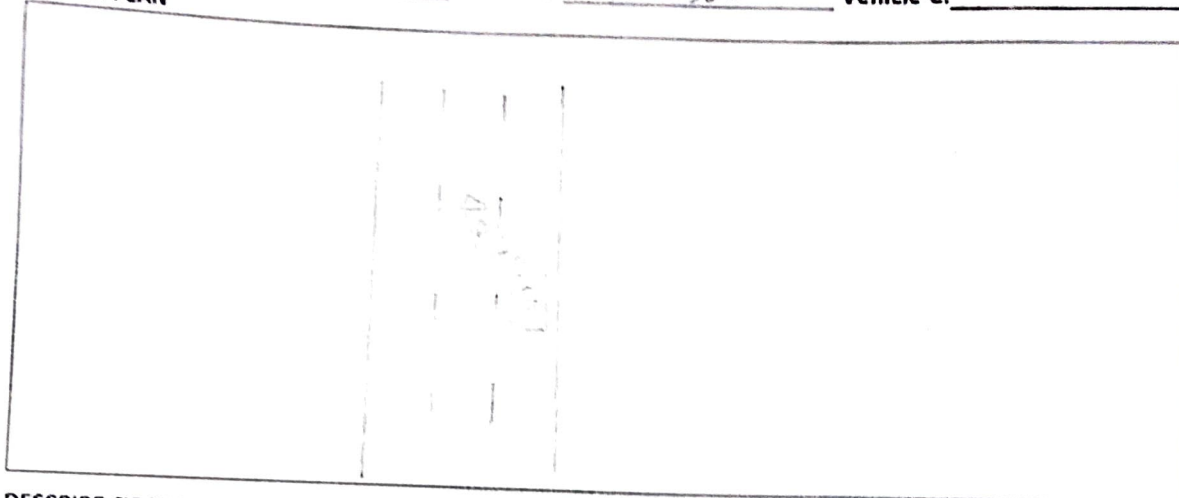
Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MT/00970642
Cover Note Number	05/11/2021 - 04/11/2022

#### DRIVER

Name of Driver	TAY LING FONG
NRIC No	SXXXX017E

Date of accident: 25 APR 2022 Time: 7:23am Location: CTE towards Bradell  
My Vehicle A: S1462969B Vehicle B: S176030E Vehicle C: \_\_\_\_\_

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along lane 1 trying to filter to lane 2 and I signalled left. While filtering, vehicle B didn't slow down and hit my vehicle from behind. No one is injured.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :

Email address :

& myself :

Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

I/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:

Reporting Centre Personnel's Signature

Name:

NR COMPLETED 25 APR 2022

Zila  
Ah Lim Motor Company