

ASS. REC. BY:

REF:

LPC/220042201KV

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop n/s Car Times

Insured: GBJ 2151H

Policy No. _____

Claims No. 22/22/22/NC05/025760

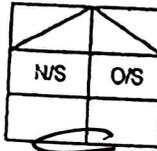
Sum Insured: _____ Excess: _____

(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: _____ Consistent?: Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: CRBD 7681H Yr Regn: 03, 17

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

Truck / Trailer or

Make: Opel Combo c.c. 1598

Colour: White AC: Insured / Std / NI / NA

Sp. Reading: 81723 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WOL 6WY111G 9593832

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/60R16

R: _____

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

TOYO / YOKO or

Front

R/Bal. 3 mm

L/Bal. 3 mm

D.O.A. 30/4/22

Survey held at

Rear

R/Bal. 4 mm

L/Bal. 4 mm

D.O.I. 9/5/2022

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

7/9/22 Kenneth informed LS \$3050 (Red 9459, 75%)

Date/Time, File Pass to?

: Prell. Report

Days Of Repair: 4

1)

: Final Report

Resurvey No. of Trip: 2

Date/Time, File Return to?

Survey Fee:

7) 7/9/22-typist

Add Fee: : Site Insp (\$

Transportation:

: Interview (\$

S + RS \$

: Tech Invs (\$

Fees

: Weekend (\$

Others

Report Format : TP

Lump Sum / L.B.I: (\$ 3050

TOTAL

*Not Authorized
 1/By S
 Resurvey After Painting
 4 days*

VEHICLE NO: GBF7681H
CHASSIS NO: W0L6WYL11G9593832

DESCRIPTION	REPAIRER'S ESTIMATE(S\$)	
<u>PARTS (LIST ITEMS)</u>		
TAILGATE DOOR LHS	<i>R</i> \$ 1,600.00	✓
TAILGATE DOOR RHS	<i>(R)</i> \$ 1,600.00	X
TAILGATE DOOR LOCK ASSY	\$ 240.00	?
TAILGATE DOOR UPPER HINGE LHS	\$ <i>R</i> 100.00	X
TAILGATE DOOR LOWER HINGE LHS	\$ <i>R</i> 100.00	X
TAILGATE DOOR WINDSCREEN MOULDING LHS	\$ <i>R</i> 160.00	✓
TAILGATE DOOR WINDSCREEN MOULDING RHS	\$ <i>R</i> 160.00	X
TAILGATE DOOR INNER TRIM LHS	\$ <i>R</i> 600.00	X
REAR BUMPER	<i>R</i> \$ 560.00	✓
REAR BUMPER RETAINER LHS	\$ <i>R</i> 70.00	X
REAR BUMPER RETAINER RHS	\$ <i>R</i> 70.00	X
REAR BUMPER LOWER COVER	\$ <i>R</i> 200.00	✓
"COMBO" EMBLEM	\$ <i>R</i> 60.00	✓
TAIL LAMP LHS	\$ <i>R</i> 200.00	X
END PANEL	\$ <i>R</i> 240.00	X
END PANEL TOP GARNISH	\$ <i>R</i> 160.00	✓
FLOOR BOARD	\$ <i>R</i> 1,200.00	X
TAILGATE DOOR WEATHERSTRIP	\$ <i>R</i> 200.00	X
REAR REINFORCEMENT	\$ 440.00	?
TAIL LAMP LHS	\$ <i>R</i> 350.00	X
	\$ 8,310.00	
10%	\$ 831.00	
	\$ 7,479.00	

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:

SPECIAL NETT ITEMS

REAR BUMPER CLIPS 1 SET

REAR SENSORS

70KM/HR STICKER

Ac \$ 100.00 *50.00*
\$ 200.00 *7*
Ac \$ 30.00 *(2.00)*

\$ 330.00

\$ 7,809.00

	DESCRIPTION	REPAIRER'S ESTIMATE (\$\$)	
LABOUR			
1	To remove the affected parts & fittings to commence repairs; replace damaged parts and components	\$ 1,800.00	500
2	To supply paint materials, expandable items & putty, respray paint on parts replaced & repaired	\$ 1,800.00	400
3	To remove and re-fix wiring and check all electrical components at damaged areas for proper functions	\$ 100.00	20
4	To provide anti-rust treatment on affected areas	\$ 100.00	30
5	Transfer front door parts LHS & RHS	\$ 300.00	200 X
6	Transfer tailgate door parts LHS & RHS	\$ 300.00	200
7	Remove and refit rear windscreen LHS & RHS	\$ 300.00	600
Labour Total :		\$ 4,700.00	
TOTAL (PARTS & LABOUR):		\$ 12,509.00	

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	05/05/2022 16:06 (SGT)
Date of Accident	30/04/2022 15:52 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	NEAR STEVEN EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF7681H
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	C & P RENT-A-CAR PTE LTD
Company Reg No	1XXXXX477H
Email Address	claims@cartimes.com.sg
Mobile Phone No	(Phone) +65-94524820
Alternative Phone No	+65-94524820

VEHICLE PARTICULARS

Manufacturer	Opel
Model	Combo
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1598

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	SD22V01367/VZ/R09
Cover Note Number	-

DRIVER

Name of Driver	ANG BEE YEN
NRIC No	SXXXX089H

