

ASS. REC. BY:

TGM

REF:

CS/INC22004384/Buy 3

Veron

ASSIGNMENT

From:

Date:

11/5/2022

Estimated Cost:

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

To Inspect Vehicle No:

SKV 5128L

at Workshop m/s

Bifrost Auto

of

8 Kaki Bt Ave 4 Premier # 01-49

Insured:

SLG X634

Policy No.

Claims No.

MT/1153949-002

Sum Insured:

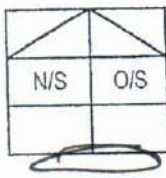
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value:

\$50K

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

3

days

Res.:

Yes or No

Lum Sum:

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS WP

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SKV 5128L

Yr Regn:

21/9/2015

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

Truck / Trailer or

Make:

Mazda 3

C.C

1496

Colour

Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

87898

T/Radio:

Insured / Std / NI / NA

Eng/No:

P52 0314431

C/No:

JM6BM42A840318270

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

205/60/16

R:

205/60/16

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

8/12/2021

D.O.I.

11/5/2022

Survey held at

Bifrost Auto

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

Range:

23/5/23

Recommended cap: LS \$1250 (red 8198.40, 86%)

MV

50,000

PV

25,448/r

NV

24,552

TGM

11/5/2022

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 23/5/23-typist

Days Of Repair:

3

Resurvey No. of Trip:

1

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Report Format: TP

Lump Sum / Est. (\$ \$1250)

D.O.A. : 8/12/2021
Bal. : 3 yrs 9.4 months.
M.V. : \$50,000

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	511F
Vehicle Details	
Vehicle No.:	SKV5128L
Vehicle to be Exported:	Yes
Intended Deregistration Date:	09 May 2022
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 4-DOOR SEDAN 1.5L SP6EAT
Primary Colour:	Blue
Manufacturing Year:	2015
Engine No.:	P520314431
Chassis No.:	JM6BM42A8G0318270
Maximum Power Output:	88.0kW (118 bhp)
Open Market Value:	\$15,062.00
Original Registration Date:	21 Sep 2015
First Registration Date:	21 Sep 2015
Transfer Count:	①
Actual ARF Paid:	\$10,062.00 ✓
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Sep 2025 //
PARF Rebate Amount:	\$6,540.00
Intended COE Rebate Details	
COE Expiry Date:	20 Sep 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$56,209.00
COE Rebate Amount:	\$18,908.00
Total Rebate Amount:	\$25,448.00

The information contained herein is correct as at 09 May 2022

OK

14,250
13,980
13,610
12,360

MV
PV 25,448/✓
NV

Termin Min
11/5/2022

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	09/12/2021 13:49 (SGT)
Date of Accident	08/12/2021 19:34 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	LAVENDER STREET TWDS KALLANG MRT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV5128L
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GOH ZHANG WEI
NRIC No	SXXXX511F
Email Address	ARCHYW229@GMAIL.COM
Mobile Phone No	(Phone) +65-87199695
Alternative Phone No	+65-87199695

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	3
Variant	-
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	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5100669686-03
Cover Note Number	-

DRIVER

Name of Driver	GOH ZHANG WEI
NRIC No	SXXXX511F

Date Of Birth	26/02/1994
Occupation	Indoor
Date Of Driving Pass	11/04/2016
Driving experience	5 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87199695
Alt. Phone Number	+65-87199695
Email Address	ARCHYW229@GMAIL.COM
Address	27 BOON TECK ROAD #03-02
Address complement	-
Postcode	329599
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	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Dry

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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	DIONG MEI SHI
Gender	Female

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 POLICE REPORT AND SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLG2663U
Vehicle Manufacturer	Mazda
Vehicle Model	3
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown

SKETCH PLAN

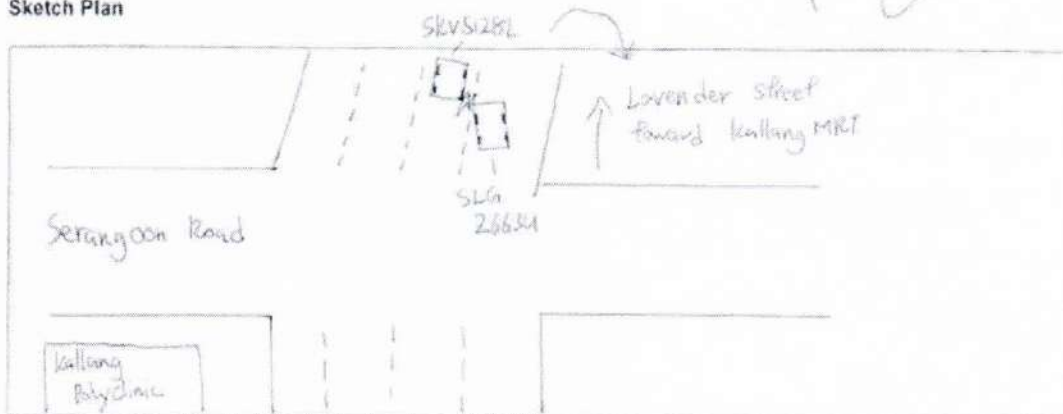
VEHICLE NO. SKV 5128L
DATE OF ACCIDENT: 8/12/2021

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

Policyholder's Signature / Date & Time: An 9/12/21
 Driver's Signature (If driver is not the policyholder) / Date & Time: An 9/12/21
 Witnessed by Reporting Centre Personnel: CHARN'S CUSTOMCRAFT

Sketch Plan



Describe Circumstances of the Accident VEHICLE NO. SKV 5128L DATE OF ACCIDENT 8/12/2021

On 8/12/21, 19:54pm I was driving on ~~Lavender~~ Lavender Street after killing polychaite toward killing MRT I was on right second lane & notice the Mazda 3 was approaching to ~~the~~ lane. My car's right rear get hit by the Mazda 3 after I just pass by it. My

I stop my car & get to take photo of the damage. The driver was trying to clear out the damage on his car while I'm about to take more photo of his front-left bumper. The driver seem like not focus & can't remember what happened. It's a old uncle.


I want to exchange driver particular but he told me to settle it on road side. He go to his car & quickly drive off from the area. There are heavy traffic on road and I not able to catch him as he run away.


I went to Kumpang Jawa HPC to make police report on 21:02pm.

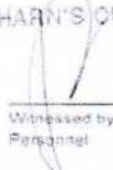
REPORTING ONLY () OWN DAMAGE () THIRD PARTY (X) OWN WORKSHOP ()

Declaration NOTE: DO NOTE THAT YOU MAY HAVE 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION

We declare the foregoing particulars are true in every respect

 8/12/21
Policyholder's Signature / Date & Time

 8/12/21
Driver's Signature (if driver is not the policyholder) / Date & Time

CHARN'S CUSTOMCRAFT

Witnessed by Reporting Centre Personnel

BIFROST AUTO PTE LTD

8 KAKI BUKIT AVE 4, PREMIER @ KAKI BUKIT

#01-49 SINGAPORE 415875

Tel: +65 64524457

Fax: +65 64524584

Company Reg No: 201929175W

1/5 \$ 1250
3 days**Repair Estimate**

Vehicle number: SKV5128L

Make & Model: Mazda 3

Chassis number: JM6BM42A8G0318270

Date of survey: _____

Name of surveyor: _____

Contacts: _____

No.	Description of spare parts	Qty	Amount S\$
1	Rear bumper <i>104730</i>	1	\$ 1,128.60
2	Rear bumper clips	1set	\$ 30.00 50.00
3	Rear bumper RH side retainer	1	\$ 36.50
4	Rear bumper LH side retainer	1	\$ 26.50 11
5	Rear bumper RH reflector	1	\$ 46.00
6	Rear bumper RH splash shield	1	\$ 87.00
7	Rear bumper RH reverse sensor	1	\$ 180.50
8	Rear bumper RH reverse sensor retainer	1	\$ 18.50
9	Rear bumper RH reverse sensor tape	1	\$ 12.90
10	Rear bumper LH reverse sensor retainer	1	\$ 18.50
11	Rear bumper LH reverse sensor tape	1	\$ 12.90
12	Rear bumper rivets	4	\$ 23.60
13	Rear bumper RH side bracket	1	\$ 21.00
14	RH taillamp assy	1	\$ 565.40
15	RH taillamp gasket	2	\$ 22.00
16	Rear windscreen glass rubber moulding	1	\$ 113.00
17	Rear fender RH	1	\$ 1,174.20
18	Rear fender RH inner trim	1	\$ 235.70
19	Rear RH sport rim	1	\$ 873.60
20	Rear RH shock absorber	1	\$ 314.00
21	Rear RH lower arm	1	\$ 233.80
22	Rear RH knuckle arm	1	\$ 679.30
23	Rear RH wheel bearing	1	\$ 414.50

BRV
NECV
X
NSX
BRV MX
NDX

\$ 6,298.00
Parts less 20% \$ 1,259.60
Total \$ 5,038.40

No.	Special Nett Items	Amount S\$
1	Rear windscreen glass sealant	\$ 70.00
2	Rear windscreen glass inner seal	\$ 50.00
3	Rear fender RH joint sealant	\$ 80.00

NNX

4	Brake fluid	1	\$ 80.00

NNX

Total: \$ 280.00

No.	Labour and painting	Amount S\$
1	Labour charges to remove, check, replace and reinstall damages bodyparts. To panel beating, cut/weld and realign all affected panels and areas	\$ 300.00 1500.00
2	Spray painting on affected areas and panels	\$ 110.00 200.00
3	Check wiring and lighting system on affected areas	\$ 80.00
4	Apply rust coating chemical on affected areas and panels	\$ 100.00
5	Remove and reinstall rear windscreen glass to assist repair	\$ 280.00
6	Remove and replace rear inner garnish and trims to assist repair	\$ 300.00
7	Remove and reinstall rear bumper reverse sensors to assist repair	\$ 100.00
8	Adjust and test drive wheel alignment system	\$ 120.00
9	Remove and replace rear undercarriage parts to assist repair	\$ 450.00

NNX

Total: \$ 4,130.00

Agreed Amount: _____ (Part by Part / Lump sum)

Working days: _____

Survey & Resurvey

11/5/2022

TGhim Lim

1430hrs

Lump sum repair

Repair days 3

Spare Parts: \$ 5,038.40

Special Nett: \$ 280.00

Labour: \$ 4,130.00

Total Amount: \$ 9,448.40

P-1083.80

202

867.04

700

1283.

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: