

ASS. REC. BY:

TGLim

REF:

CS/NC2004511/BVC

## ASSIGNMENT

From:

Date: 11/5/2022

Estimated Cost:

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

To Inspect Vehicle No: SKV 5128L

at Workshop m/s Bifrost Auto  
of 8 Raki Bt Ave 4 Premier #01-49Insured: GIG 707J

Policy No.

Claims No. MT/1171555-01

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: 7 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS WP

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

SKV 5128L Yr Regn: 21/9/2015

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

Truck / Trailer or

Make:

Mazda 3 1.5L c.c. 1496

Colour:

Blue

A/C: Insured / Std / NI / NA

Sp. Reading:

87898

T/Radio: Insured / Std / NI / NA

Eng/No:

P520314431

C/No:

JM6BM42ABCO318270

Gen. Cond: Good / ☒ Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt orModi: Nil / ☒ S/Rim / STD A/Rim or

Tyre Size:

F: 205/60/16

R: 205/60/16

BS / DUN / EXNOVA / GY / FS / LIZA / ☒ MO / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 7/5/2022D.O.I. 11/5/2022

Survey held at

Bifrost Auto

Des. of Damages: ☒ Front / ☒ 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:  
12/5 & 5500

Recommended COR:

1-11 - No resurvey photo.

13/5/23 Lump Sum \$5500 confirmed by email (Red 9063.58, 62%)

MV

PV 25,448/2

NV

TGLim  
11/5/2022

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 15/5/23-typist

Report Format: TP

Lump Sum / H.P.: (\$ 5500)

Days Of Repair: 7

Resurvey No. of Trip: 1

Add Fee:

☐ : Site Insp (\$ )☐ : Interview (\$ )☐ : Tech. Invs (\$ )☐ : Weekend (\$ )

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

> 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 SP.6EAT
Primary Colour:	Blue
Manufacturing Year:	2015
Engine No.:	P520314431
Chassis No.:	JM6BM42A8G0318270
Maximum Power Output:	88.0 kW (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
<b>Total Rebate Amount:</b>	<b>\$25,448.00</b>

The information contained herein is correct as at 09 May 2022

OK

MV  
PV  
NV  
25,448/2

TGrim Kim  
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	09/05/2022 17:08 (SGT)
Date of Accident	07/05/2022 19:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	KIM KEAT FLYOVER TOA PAYOH
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	S9477511F
Email Address	meishidiong@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	1600

#### 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	DIONG MEI SHI
NRIC No	G2121179L

Date Of Birth	26/07/1994
Occupation	Indoor
Date Of Driving Pass	26/05/2018
Driving experience	4 YEARS
Gender	Female
Mobile Number	(Phone) +65-88263926
Alt. Phone Number	-
Email Address	meishidiong@gmail.com
Address	27 BOON TECK ROAD #03-02
Address complement	-
Postcode	329599
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Collision - Change/cross lane
Weather Conditions	Raining
Road Surface	Wet

#### 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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20220507/7037.

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	NOT AVAILABLE. WITH TP WORKSHOP
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBG707J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person	DIONG MEI SHI
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKV5128L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No



## 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.
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' 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.

*[Signature]*

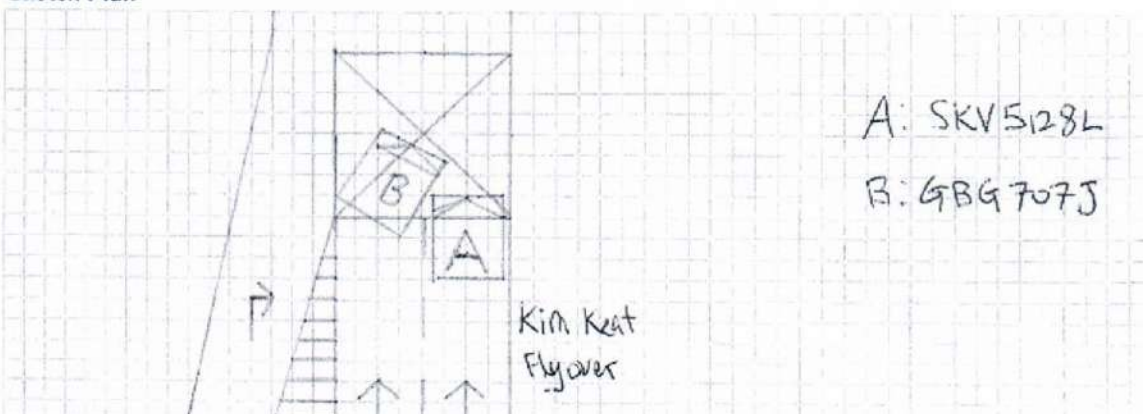
Policyholder's Signature / Date & Time

*[Signature]*

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

### Sketch Plan



Describe Circumstances of the Accident

Refer to Police Report

Declaration

I/We declare the foregoing particulars are true in every respect.

*AK*

Policyholder's Signature / Date & Time

*AK*

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

Witnessed by Reporting Centre Personnel



**SINGAPORE  
POLICE FORCE**



T/20220507/7037

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20220507/7037

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 07/05/2022 22:13		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: DIONG MEI SHI			Address: 27 BOON TECK ROAD #03-02 SINGAPORE 329599		
ID Type / ID No.: FIN NO / G2121179L			Contact No.: Home/Office: Mobile: 88263926		
Nationality: MALAYSIAN			Email: meishidiong@gmail.com		
Sex: Female	Age: 27	Date of Birth: 26/07/1994	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 2B,3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/05/2022 19:30	Type of Location: Straight Road
Location:  KIM KEAT LINK				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBG707J	Lorry				Seriously Damaged	0
SKV5128L	Car				Seriously Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20220507/7037

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20220507/7037

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	DIONG MEI SHI	ID No.	G2121179L
Related Vehicle	SKV5128L (Car)	Contact No.	88263926
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	03	Degree of	Serious

## Brief Details.

On the stated date and time, I was driving my car (SKV5128L) at Kim Keat Flyover on lane 1. Out of a sudden, i felt a huge impact from the front left portion of my car. A lorry (GBG707J) from lane 2 cut into my lane without check causing this accident to happen. I was in shock and alighted my car to check and exchange phone numbers. After the accident, I felt discomfort and went to seek for medical attention and was given 3days of MC.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20220507/7037

3 of 3

Report No. T/20220507/7037

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
MUHAMMAD NOOR BIN ABDUL RAHMAN  
Contact No.: 65476219

NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:  
07/05/2022 22:13

Classification Of Case:

**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

**Repair Estimate**

Vehicle number: SKV5128L

Make &amp; Model: Mazda 3

Chassis number: JM6BM42A8G0318270

Date of survey: \_\_\_\_\_

Name of surveyor: \_\_\_\_\_

Contacts: \_\_\_\_\_

No.	Description of spare parts	Qty	Amount S\$
1	Bonnet	1	\$ 1,067.80
	Bonnet RH hinge	1	\$ <del>61.40</del>
	Bonnet LH hinge	1	\$ 61.40
	Bonnet lock	1	\$ 197.10
	Bonnet lock cover	1	\$ <del>17.30</del>
	Bonnet lock cable	1	\$ <del>76.00</del>
	Bonnet RH rubber seal	1	\$ <del>64.50</del>
	Bonnet LH rubber seal	1	\$ <del>64.50</del>
	Front bumper	1	\$ 1,031.70
	Front bumper RH side retainer	1	\$ 18.70
	Front bumper LH side retainer	1	\$ 18.70
	Front bumper reinforcement	1	\$ <del>444.50</del> 484.70
	Front bumper reinforcement cover	1	\$ 104.00
	Front bumper LH towing cover	1	\$ <del>28.60</del>
	Front bumper LH side air guide	1	\$ 42.00
	Front bumper RH fog lamp cover	1	\$ <del>46.40</del>
	Front bumper RH fog lamp	1	\$ 285.80
	Front bumper RH signal lamp	1	\$ 167.80
	Front bumper LH fog lamp cover	1	\$ 46.40
	Front bumper LH fog lamp	1	\$ 285.00
	Front bumper LH signal lamp	1	\$ 167.80
	Front bumper RH bracket	1	\$ <del>15.10</del>
	Front bumper LH bracket	1	\$ <del>15.10</del>
	LH headlamp assy	1	\$ 1,039.50
	LH headlamp lock clips	1set	\$ 15.50
	RH headlamp assy	1	\$ <del>1,039.50</del>
	RH headlamp lock clips	1	\$ 15.50
	Front RH fender LH	1	\$ <del>333.80</del> 333.80
	Front LH fender splash shield	1	\$ <del>98</del> 98.00
	Front LH fender splash shield clips	1set	\$ <del>30.00</del> 60.00
	Front grille	1	\$ 581.60
	Front grille emblem	1	\$ <del>56.80</del> 56.80
	Front grille RH chrome moulding	1	\$ 176.60
	Front grille RH chrome moulding base	1	\$ 45.00
	Front grille LH chrome moulding	1	\$ 176.60
	Front grille LH chrome moulding base	1	\$ 45.00
	Front grille RH side bracket	1	\$ 28.00

DDV

N1 X

N1 X

NDX

NDX

NDX

BRV

NECV

NECV

BTU

BRV

NDX

BRV

NDX

NDX

MIS

BRV

NSX

NSX

BRV

NDX

NDX

NDX

DDV

BRV

NECV

BRV

NECV

NDX

NDX

BRV

NECV

NDX



Front grille RH side bracket white clip	1	\$	8.00	} NN X
Front grille RH side bracket white clip holder	1	\$	7.00	
Front grille LH side bracket	1	\$	28.00	} NEC V
Front grille LH side bracket white clip	1	\$	8.00	
Front grille LH side bracket white clip holder	1	\$	7.00	} BR V
Front grille upper outer garnish	1	\$	387.00	
Front grille upper outer garnish support	1	\$	108.00	} BR V
Front grille upper outer garnish rivets	4	\$	34.80	
Front grille upper outer garnish clips	1set	\$	10.00	} X NN
Front grille lock pins	2	\$	10.80	
Support panel	1	\$	469.80	} NEC V
Support panel top beam	1	\$	184.60	
Radiator assy	1	\$	1,089.40	} BR V
Radiator spare tank	1	\$	78.00	
Radiator fan assy	1	\$	136.78	} NDX
Front temperature sensor	1	\$	109.00	
Aircon condenser	1	\$	1,035.60	} NDX
Aircon fan assy	1	\$	136.70	
Aircon suction pipe	1	\$	249.00	} NDX
Aircon discharge pipe	1	\$	464.00	
Aircon pipe	1	\$	356.00	

\$ 13,004.48  
 Parts less 20% \$ 2,600.90  
 Total \$ 10,403.58

No.	Special Nett Items		Amount S\$
1	Radiator coolant	1	\$ 70.00
2	Front number plate	1	\$ 70.00
3	Front bumper distance sensor	1	\$ 320.00
Total:			\$ 460.00

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	\$ 600.00 1,500.00
2	Spray painting on affected areas and panels	\$ 600.00 1,400.00
3	Check wiring and lighting system on affected areas	\$ 100.00
4	Apply rust coating chemical on affected areas and panels	\$ 120.00
5	Remove and replace aircon condenser and pipes to assist repair. To refill aircon gas	\$ 240.00 240.00
6	Remove and replace radiator assy, pipes and hoses to assist repair. To refill coolant	\$ 240.00

7	Remove and replace front bumper distance sensors to assist repair	\$ <del>40.00</del> 100.00 ✓
Total:		\$ 3,700.00

Agreed Amount: \_\_\_\_\_ (Part by Part / Lump sum)

Working days: \_\_\_\_\_

Survey & Resurvey

15/5/2022

T Colin Mmi

1445

Spare Parts: \$ 10,403.58

Special Nett: \$ 460.00

Labour: \$ 3,700.00

**Total Amount: \$ 14,563.58**

Lump sum repair  
Repair days 7

4/5 \$5500

**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:

7-6616-5  
202  
5293.2  
200  
1420  
6913.2  
216  
5530