

ASS. REC. BY:

REF:

CT2 / 22004917/Keny3

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:

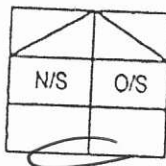
Excess:

(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:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

02 days

Res.: Yes or No

Lum Sum:

1-B. / %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLX 2907C

Yr Regn:

02 17

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

Truck / Traller or

Make:

M. E2200

C.C

1950

Colour

M. Silver

A/C:

Insured / Std / NI / NA

Sp. Reading

89891

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WDD 2130042A 06 9648

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

245/45R18

R:

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

Front

R/Bal.

S

mm

Rear

R/Bal.

S

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

19/5/22

D.O.I.

30/5/2022

Survey held at

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

23/9

2559.50

Caden

(Red, 3401.60, 57%)

Date/Time, File Pass to?

1) 27/9/22

Date/Time, File Return to?

2)

Report Format:

Lump Sum / I.B.I: (\$ 2559.50

Days Of Repair:

2

Resurvey No. of Trlp:

1

Add Fee:



Site Insp (\$



Interview (\$



Tech Invs (\$



Weekend (\$

Survey Fee:

Transportation

S + RS. SI

Fees

Others

TOTAL

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	20/05/2022 14:59 (SGT)
Date of Accident	19/05/2022 18:15 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	TPE TO PUNGGOL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX2907C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM HANG TIONG
NRIC No	SXXXX842H
Email Address	LIMWEIYI89@GMAIL.COM
Mobile Phone No	(Phone) +65-97354850
Alternative Phone No	+65-93887134

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E220d
Variant	E220D 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	1950

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA336616/1
Cover Note Number	13/08/2021 - 12/08/2022

DRIVER

Name of Driver	LIM WEI YI
NRIC No	SXXXX331H

Date Of Birth	22/09/1989
Occupation	Indoor
Date Of Driving Pass	01/07/2008
Driving experience	13 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93887134
Alt. Phone Number	-
Email Address	LIMWEIYI89@GMAIL.COM
Address	74 SELETAR GREEN WALK
Address complement	-
Postcode	805278
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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 - Head to Rear
Weather Conditions	Clear
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?	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	DERSERRI CHEE
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

PLS REFER TO THE SKETCH PLAN BY DRIVER

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	SBU64G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	ALAN TAN YEAH LUEN
NRIC No	SXXXX469I
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

COMPLETED BY 202

Date of accident: 16/15/22 Time: 6:15pm Location: TPE to Punggol
 My Vehicle A: SLX2907C Vehicle B: SBU64G Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I, Lim Wei Yi (S8933331H), driver of SLX2907C, was driving on TPE towards Punggol on 19th May 2022 when a car from behind, SBU64G, driver by name Mr. Alan Tan Yeah Luen (S7316469I) bump into my car on Lane 1 at approximately 18:15 - 18:25 hrs.

☒ 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 your 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:

NRIC/PIN No:

Zila
 Ah Lim Motor Comp

COMPLETED 1 MAY 2022

To Whom It May Concern,

Accident involving my vehicle no. SL22907C on 19/05/22 (date) with
SB0646 (other vehicle no) along TPE to Lunggoi

I, LIM HANH TIONG Nric No. S0068842H

Owner of vehicle no. SL22907C am aware of the accident of my vehicle on
19/5/22 (Date) while car was driven by LIM WEI YI

Nric No. S8933331H. I hereby, authorise him / her to make the report.

X

Name

Date:

To fill in if there is a OD claim

I am aware of the circumstances and agreeable to claim my own insurance for the
above accident.

X

Name

Date:



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 20 MAY 2022

To: Owner of Vehicle Number:

SLX 2907C

The following has been advised to you via your workshop, AH LIM MOTOR COMPANY through their staff, Eileen Zila Mui Hong, Wei Jie. Please tick the applicable box if you had been advised on any of the following:

- ☒ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☐ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☐ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- ☒ if fire damage and you claim under your own insurance, any applicable excess will be waived. However, there will be no recovery prospect and NCD will be affected.
 - ☒ if fire damage and you are claiming against the Third Party, your NCD will not be affected. However, the recovery is not guaranteed, and AXA will not be held responsible.
- ☐ You have agreed to let AXA assign a workshop for your vehicle repairs. In the process, your vehicle might be towed out to another workshop assigned by AXA. In return, you will get:
- ☒ \$200 off on your Basic Own Damage Excess or
 - ☒ \$200 as a benefit if your policy has \$0 excess and no Loss of Use benefit or
 - ☒ Additional \$200 on top of existing Loss of Use Benefit if your policy has \$0 excess and existing Loss of Use benefit
- ☐ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- ☐ There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☐ The estimated waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- ☐ You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.
- ☐ For vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle.
- ☐ For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using any combination of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- ☐ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.

☒ Others Claim Third Party.

Signed and acknowledged by:

Name and signature of policyholder/ authorized driver* and company stamp (where applicable)

*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured Vehicle.

WJ
Ah Lim Motor Company

Name and signature of workshop personnel including company stamp

COMPLETED 21 MAY 2022



redefining / insurance

AXA Insurance Pte Ltd
 1800 880 4888 (Within Singapore)
 (65) 6550 4888 (International)
 (65) 6550 4740
 customer.care@axa.com.sg
 www.axa.com.sg

Certificate of Insurance

account number
 04123

Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third Party Risks and Compensation) Rules, 1990 - Road Transport Act, 1987 (Malaysia)
 Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysia)

Policy details

Policyholder name	LIM HANG HONG	Certificate number	GA336616 / 1
Cover	Comprehensive	Chassis number	WDD2130042A069648
Plan name	Essential	Engine number	65492080035915
NCD applicable	40%		
Vehicle registration number	SUX2907C		
Period of Insurance	from 13/08/2021 to 12/08/2022 (both dates inclusive)		
Finance loan company	MAYBANK		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	S\$0 700.00
	Windscreen Excess	S\$0 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap. 189).
 The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

AXA Insurance Pte Ltd (199903512M)
 8 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 Customer Centre, #B1-01

1 of 2

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 : LIM HANG TIONG
 74 SELETAR GREEN WALK

SINGAPORE 805278

TEL: 93869136

ATTN:

Your Ref No: SLX2907C

Claim Type: Third Party

Accident Date: 19/05/2022

TP Veh Reg No: SBU64G

Estimate No: MC1902700

Date: 24 May 2022

Policy No: GA336616/1

Veh Reg No: SLX2907C

Make/Model: M.BENZ E220D AUTO

82559.50

Not Authorised
 Repairing B4Pain
 2 days

Estimate Repair Cost to Vehicle No :SLX2907C

Description	Quantity	List Price	Amount
		S\$	S\$
SPARE PARTS			
1 REAR BUMPER + TOW COVER	1 PC	1,950.00	✓
2 REAR BUMPER REFLECTOR RH	1 PC	33.00	X
3 REAR BUMPER LOWER GARNISH	1 PC	305.00	✓
4 REAR BUMPER LOWER GARNISH CHROME MLDG CTR	1 PC	330.00	X
5 REAR BUMPER LOWER GARNISH CHROME MLDG RH	1 PC	160.00	X
6 REAR BUMPER REINFORCEMENT	1 PC	890.00	X
7 REAR BUMPER BASIC CARRIER CTR	1 PC	128.00	X
8 REAR BUMPER BASIC CARRIER UPPER LH & RH	2 PC	66.00	X
9 REAR BUMPER BASIC CARRIER LOWER LH & RH	2 PC	150.00	X
10 REAR BUMPER SIDE RETAINER LH & RH	2 PC	184.00	X
11 REAR BUMPER RIVET	15 PC	105.00	X
12 REVERSE SENSOR CTR LH & RH	2 PC	560.00	X
13 REVERSE SENSOR RING	4 PC	28.00	X
14 REVERSE SENSOR WIRE HARNESS	1 PC	490.00	X
		5,379.00	
	Less 10%	537.90	4,841.10
LABOUR			
15 TO REMOVE AND REINSTALL/REPLACE FRONT/REAR BUMPER SENSORS.	1 PC	60.00	✓
16 TO SPRAY ANTI-RUST COATING ON AFFECTED AREAS.	1 PC	60.00	X
17 TO DISMANTLE ALL DAMAGED PARTS.TO CUT & WELD.TO KNOCK & REPAIR REAR END PANEL INNER PANELS AND AFFECTED AREAS. TO REFIT LISTED PARTS BACK SAME.	1 PC	500.00	2201
18 TO SPRAY REAR BUMPER,REAR END PANEL.	1 PC	500.00	2501
		1,120.00	1,120.10

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:

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 : LIM HANG TIONG
74 SELETAR GREEN WALK

SINGAPORE 805278

TEL: 93869136

ATTN:

Your Ref No: SLX2907C

Claim Type: Third Party

Accident Date: 19/05/2022

TP Veh Reg No: SBU64G

Estimate No: MC1902700

Date: 24 May 2022

Policy No: GA336616/1

Veh Reg No: SLX2907C

Make/Model: M.BENZ E220D AUTO

Estimate Repair Cost to Vehicle No :SLX2907C

Description	Quantity	List Price	Amount
		S\$	S\$
		Total	S\$ 5,961.10
		Add GST @ 7%	417.28
		Total Amount Payable	S\$ 6,378.38

TOTAL: SINGAPORE DOLLAR SIX THOUSAND THREE HUNDRED SEVENTY EIGHT AND CENTS THIRTY EIGHT ONLY

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

For AH LIM MOTOR COMPANY

Zila
Ah Lim Motor Company

AUTHORISED SIGNATURE