

Steve

CS/AIS22005169/93

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: SNB 2203S

Policy No. _____

Claims No. 2022 22005033FR

Sum Insured: _____

Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Report: _____ 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: SLH 7038L Yr Regn: 15/11/16

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

Truck / Trailer or

Make: Volkswagen Jetta c.c. 1390

Colour: Silver A/C: Insured / Std / NI / NA

Sp. Reading: 99736 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WYW22216 ZFM 048601

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: 225/452RTT

R: _____

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

TOYO / YOKO or _____

Front

Rear

R/Bal. 4 mm

R/Bal. 4 mm

L/Bal. 4 mm

L/Bal. 4 mm

D.O.A. 27/5/22

D.O.I. 28/2/22

Survey held at Volkswagen

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear RH

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	MR-63K
14/7/22	Submit preli report-revised fig \$4001.70 check items \$2159.47 The vehicle has not send in for repair
4/8/22	Steve informed final fig \$4001.70 (Red 5542.09, 58%)
5/8/22	To re-open and submit final report

Date/Time, File Pass to?

☐

: Preli. Report

☐

: Final Report

Date/Time, File Return to?

2)

Report Format: _____

Lump Sum / L.B.E. (\$) _____

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee:

☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech. Invs (\$ _____)

☐

: Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS. \$ _____

Photos

Others

TOTAL

VOLKSWAGEN CENTRE SINGAPORE

247 Alexandra Road
Singapore 159934
Biz. Reg. No.: 199101494Z
GST No.: M200985052



Quotation

Non binding - Preview

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Document no.
Document date 28-05-2022
Customer no. 5211042669
Customer GST-ID T11FC0131K
Dealer 30001
Job order number 2022015474/ 1
Job order date 28-05-2022
Service Advisor SHU SHI TANG

Company
ALLIANZ GLOBAL
CORPORATE & SPECIALTY SE
SINGAPORE
12 MARINA VIEW
#14-01 ASIA SQUARE TOWER 2
Singapore 018961

Customer Details:
Ms.
LIM
CHEE MEI
70 HOUGANG AVENUE 7
#14-06
Singapore 538804

License plate	Model code	First registration	VIN	Model	Mileage
SLH7038L	1633G5	15-11-2016	WVWZZZ16ZFM048601	JETTA TSI Comfo 90 D7F	97,985

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
9801B004	B&P CHECK SHORT CIRCUIT / HARNESS REPAIR				#1	280.00	299.60
9801B005	B&P DIAGNOSIS AND PROGRAMMING				#1	480.00	513.60
5C6807421H GRU	Cover For Bumper Primed	1	pcs.	1,368.71	#1	1,368.71	1,464.52
5Q0919275B GRU	Sensor Primed	4	pcs.	190.18	#1	760.72	813.97
5Q0919133 9B9	Seal Ring Satin Black	4	pcs.	1.46	#1	5.84	6.25
5C6919491D	Sensor Bracket	1	pcs.	18.09	#1	18.09	19.36
5C6919491E	Sensor Bracket	2	pcs.	18.09	#1	36.18	38.71
5C6919492D	Sensor Bracket	1	pcs.	18.09	#1	18.09	19.36
D 180KU2A1	2k-Plastic Adhesive	1	pcs.	85.94	#1	85.94	91.96
D 822150A1	Bonding Agent For Plastic	1	pcs.	68.85	#1	68.85	73.67
5C6807433J	Spoiler	1	pcs.	507.74	#1	507.74	543.28
5C6807251E	Foam Inset	1	pcs.	56.00	#1	56.00	59.92
5C6807305	Bumper	1	pcs.	732.39	#1	732.39	783.66
5C6807375	REINFORCEMENT Guide Piece	1	pcs.	102.62	#1	102.62	109.80
5C6807376	LHR BUMPER BRACKET Guide Piece	1	pcs.	102.62	#1	102.62	109.80
	RHR BUMPER BRACKET						
	LABOUR	31	pcs.	840.00	#1	2,520.00	2,696.40
	Spray Painting	31	pcs.	800.00	#1	2,400.00	2,568.00
	ALLIANZ DIRECT SETTLEMENT DOA: 27/05/2022 TP VEH: SNB2203S SURVEY BY:						

Quotation valid till 04-06-2022

Tax Code	Labour	Material	GST %	GST	Total amount excl. GST	Total amount incl. GST
#1	760.00	8,783.79	7%	668.07	9,543.79	10,211.86
Total	760.00	8,783.79		668.07	9,543.79	10,211.86

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:

Steve (LKK)
2/6/22, 10:30

W L
3 L

Service Advisor

P/P

by BL

Amis

VOLKSWAGEN CENTRE SINGAPORE

Alexandra Road
Singapore 159934
Reg. No.: 199101494Z
ST No.: M200985052



Quotation

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Document date
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Customer GST-ID
Dealer
Job order number
Job order date
Service Advisor

28-05-2022
5211042669
T11FC0131K
30001
2022015474/ 1
28-05-2022
SHU SHI TANG

License plate	Model code	First registration	VIN	Model	Mileage
SLH7038L	1633G5	15-11-2016	WWWZZZ16ZFM048601	JETTA TSI Comfo 90 D7F	97,985

-----VISIT OUR WEBSITE: aftersales.vw.com.sg (for online service appointments) and volkswagen.com.sg and www.skoda.com.sg (for additional services, products and promotions).-----

All invoices are denominated in SGD, unless otherwise stated.

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	28/05/2022 17:14 (SGT)
Date of Accident	27/05/2022 19:06 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	EUNOS AVE 5 TOWARDS PAYA LEBAR RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH7038L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM CHEE MEI
NRIC No	S1499674E
Email Address	DIANACMLIM@GMAIL.COM
Mobile Phone No	(Phone) +65-96901275
Alternative Phone No	+65-96901275

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Jetta
Variant	JETTA 1.4 TSI 1633G5 HID SR NAV
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	1390

INSURANCE COMPANY

Name of Insurance Company	HL Assurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MP311115
Cover Note Number	-

DRIVER

Name of Driver	CHEONG CHOONG PAK
NRIC No	S1686306H

Birth	23/05/1965
Location	Indoor
Driving Pass	25/04/1984
Driving experience	38 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97451178
Phone Number	-
Email Address	DIANACMLIM@GMAIL.COM
Address	70 HOUGANG AVENUE 7
Address complement	#14-06
Postcode	538804
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 - Head to Rear
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)	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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE SKETCH PLAN

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	UNABLE ABLE TO UPLOAD, PLEASE INFORM WORKSHOP TO SEND TO THE INSURANCE DIRECTLY.
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNB2203S
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-93398258

complement
ode
ance Company Name
ure Of Damage
ails of property damaged in accident
Of Passenger (Including Driver)

-
-
-
Allianz Insurance Singapore Pte. Ltd.
-
-
-

IMPORTANT NOTICE

SKETCH PLAN

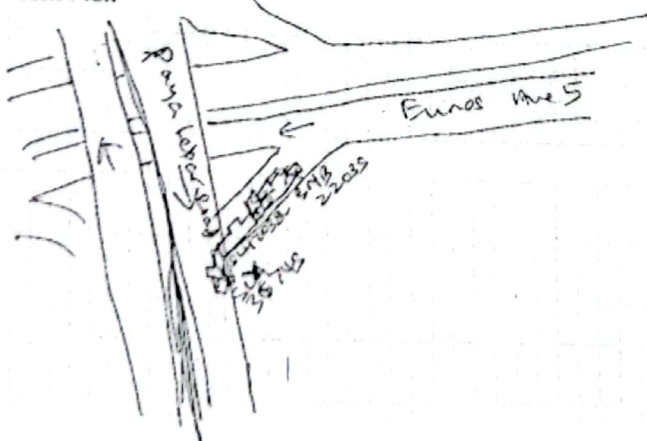
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving 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.

Policyholder's Signature / Date & Time
[Signature] 28 May 22 1pm

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

Witnessed by Reporting Centre Personnel
[Signature]

Sketch Plan



Describe Circumstances of the Accident

LICENSE PLATE: SLH7038L ACCIDENT DATE & TIME: 27 May 2022, 7:06 pm.
 CONTACT NUMBER: 96901275 E-MAIL ADDRESS: dianacmbm@gmail.com.
 LOCATION: Ennas Avenue 5 after towards Paya Lebar Road.

(Please see video of front and rear of SLH7038L.)

SLH7038L was filtering out from Ennas Ave 5 to Paya Lebar Road around 7:05pm. Traffic was heavy along Paya Lebar Road.

SNB 2203S was behind SLH7038L. Suddenly hit my car rear. Video show clearly SNB 2203S move and brake and suddenly surge forward and hit my rear.

(SLX3674S)
 SLH7038L front video show a car is in front. After SLH7038L was hit, the car in front SLX3674S drove off.

SNB 2203S driver and SLH7038L driver (Anthony Chay Pak) came down to take picture of the damages.

SNB 2203S has no damage. But SLH7038L rear bumper and reverse sensor were damaged.

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.

Please state:

☐ Claim Own Policy

☐ Claim Third Party

☐ Claim OD/TP at other workshop

☐ Reporting Only

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time
 28 May 2022
 12:57pm

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

Witnessed by Reporting Centre Personnel