

ASS. REC. BY:

REF:

CS/ED 22005240/AN43

## 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.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 5 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: SMV7541P Yr Regn: 2020, OctType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mazda 3 c.c. 1496Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 10279 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JM6BP2SAAK4\*0268.2Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/45R18R: 215/45R18

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

TOYO / YOKO or

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. \_\_\_\_\_ D.O.I. 03/06/22Survey held at TransEuro

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

Front N/S

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

Date / Time	Action / Instruction
	<u>TP EQ</u>
	<u>1/11/22</u> Adrian confirmed final figure: \$ 9937.10 and 5 days (Red. 1739.50, 15%)
	<u>MV :</u>
	<u>PV :</u>
	<u>Nett :</u>

Date/Time, File Pass to?



: Preli. Report

1) 1/11/22

: Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 5Resurvey No. of Trip: 1

Survey Fee:

Transportation:

\_\_\_\_ S + RS. \_\_\_\_ SI

Photos

Others

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : \_\_\_\_\_

Report Format:

Lump Sum / L.B. 10 9937.10



## 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	30/05/2022 16:34 (SGT)
Date of Accident	29/05/2022 13:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BASEMENT CARPARK OF AQUARIUS BY THE PARK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV7541P
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEOW KEE YOU
NRIC No	S0005868H
Email Address	keeyou.leow@gmail.com
Mobile Phone No	(Phone) +65-98169072
Alternative Phone No	+65-98169072

#### 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	Etiga Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	MA015517
Cover Note Number	-

#### DRIVER

Name of Driver	LEOW KEE YOU
NRIC No	S0005868H



Date Of Birth	09/11/1950
Occupation	Indoor
Date Of Driving Pass	18/04/1975
Driving experience	47 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-98169072
Alt. Phone Number	+65-98169072
Email Address	keeyou.leow@gmail.com
Address	BLK 7 BEDOK RESERVOIR VIEW #13-02
Address complement	-
Postcode	478929
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)	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

VEHICLE B FROM PARKING LOT COME OUT AND REVERSE HIT MY VEHICLE FRONT LH PORTION.

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLU3702K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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) .....	-

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;

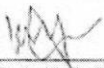
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(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

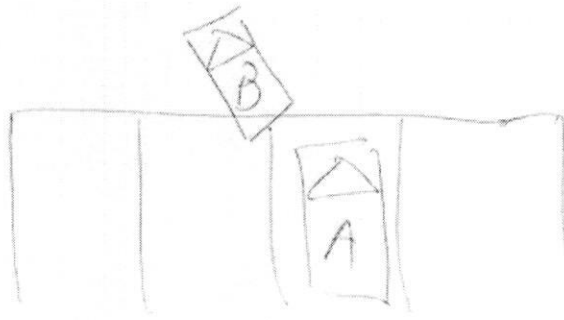
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



## Describe Circumstances of the Accident

Veh B from parking lot come out & reseller hit  
my veh front LH portion

my

## Declaration

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

Witnessed by Reporting Centre  
Personnel



# ESTIMATE COST OF REPAIRS

EQ INSURANCE COMPANY LTD		NAME :		WIP :		25021	
5 Maxwell Road		ADDRESS :		DATE:		31-May-22	
#17-00 Tower Block							
MND Complex, Singapore 069110							
ATTN : MOTOR CLAIMS		TEL :					

VEH NO :	SMV7541P	DATE IN :		CONTACT PERSON :	JESS
CHASSIS NO :	JM6BP2SAAK1102682	MILEAGE :		TYPE OF CLAIM :	THIRD PARTY CLAIM
MODEL :	M3 M-HYBRID	DATE REG.:	19-Oct-20		

## NATURE OF WORKS

NO	DESCRIPTION	QTY	UNIT PRICE	1st	Supp	PARTS NO	REVISED	PRICES
1	FRONT BUMPER <i>Del'd</i>	1	867.30			MBCKA-50-031EBB		✓ 867.30
2	TAPE SEAL <i>3/4"</i>	2	2.40			MBCKA-50-2G1A		✓ 4.80
3	TAPE SEAL	2	7.40			MBDWH-50-2G1		✓ 14.80
4	AIR GUIDE LH FRT <i>Re new</i>	1	68.20			MBCKB-50-A20B		✗ 68.20
5	RIVET <i>new</i>	4	9.20			MTK21-50-355		✓ 36.80
6	RETAINER GRILLE TOP LH <i>Re new</i>	1	10.10			MBDGF-50-0U6B		✗ 10.10
7	GROMMET, SCREW <i>new</i>	1	5.20			MN243-50-0Z1		✓ 5.20
8	RETAINER LH FRT <i>Re new</i>	1	19.50			MBCKA-50-0U0A		✗ 19.50
9	PLASE SET FRONT BUMPER LH <i>new</i>	1	15.50			MBCKA-50-1V1A		✗ 15.50
10	RETAINER S,S ULTRASONIC <i>new</i>	2	23.40			MB0J8-67-UC6		✓ 46.80
11	HOLDER S.S ULTRASONIC SIDE <i>new</i>	1	47.20			MB0L2-67-UC5 13		✓ 47.20
12	SENSOR ULTRASONIC SIDE <i>new</i>	1	190.00			MB0J8-67-UC1 E4		✗ 190.00
13	CHROME MOULD LH FRT <i>Crushed</i>	1	298.20			MBCKA-50-7K0C		✓ 298.20
14	CLIP <i>new</i>	1	9.10			MGSH7-50-EB1		✓ 9.10
15	FRONT FENDER LH <i>Buckled</i>	1	415.90			MBCJH-52-210		✓ 415.90
16	STAY FENDER LH <i> Bent</i>	1	46.10			MBCJH-52-240		✓ 46.10
17	MUD GUARD LH FRT <i>Del'd + Del'd new</i>	1	73.20			MBCKA-56-140		✗ 73.20
18	MUD GUARD LOWER LH FRT <i>new Del'd</i>	1	201.10			MBFWM-56-115		✓ 201.10
19	FASTENER <i>new</i>	10	3.00			MB45A-56-146A		✓ 30.00
20	FRONT GRILLE RAD TOP <i>Del'd</i>	1	690.80			MBCKB-50-7E0D2M		✓ 690.80
21	RIVET <i>new</i>	10	9.20			MTK21-50-355		✓ 92.00
22	HEADLAMP LH <i>Crushed</i>	1	3,645.80			MBCKV-51-040B		✓ 3,645.80
23	BRACKET HEADLAMP LH <i>Crushed</i>	1	56.20			MBCKA-50-160A		✓ 56.20
24	CLIP <i>new</i>	5	6.40			MBCKA-56-145A		✓ 32.00

## SUPPLEMENTARY

NO	DESCRIPTION	QTY	UNIT PRICE	1st	Supp	PARTS NO	REVISED	PRICES
1								
						TOTAL PARTS		6,916.60
						TOTAL PARTS COST		6,916.60

Labour Description				REVISED	PRICES
1		TO REPLACE FRONT BUMPER AND FRONT FENDER LH.	1320		1,500.00
2		TO RESPRAY FRONT BUMPER, FRONT GRILLE RAD TOP AND FRONT FENDER LH.	1590		2,000.00
3	MZ-BR-FRTSEN	TO TRANSFER FRONT PEDESTRIAN SENSORS.		150	660.00
4	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		150	250.00
5	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.		180	300.00
6	MZ-BR-SUNDRI	SUNDRIES.			X 50.00
SUPPLEMENTARY LABOUR DESCRIPTION					
1		#N/A			
REMARKS: THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A <b>QUOTATION FEE OF \$400</b> WILL BE APPLIED ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.			TOTAL LABOUR	-	4,760.00
			TOTAL PARTS	-	6,916.60
			TOTAL	-	11,676.60
			LESS EXCESS	-	-
			TOTAL AFTER EXCESS	-	-
			GST 7%	-	-
			GRAND TOTAL	-	-

TRANS EUROKARS PTE LTD

Authorised Signature

**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:

Adrian Lj  
P/P 03/06/22  
OS Pays





TRANS EUROKARS PTE LTD

27A TANJONG PENJURU, SINGAPORE 609042

FINALIZE COST OF REPAIRS

<b>EQ INSURANCE COMPANY LTD</b> 5 Maxwell Road #17-00 Tower Block MND Complex, Singapore 069110 <b>ATTN. :</b> MOTOR CLAIMS		<b>NAME :</b> <b>ADDRESS :</b> <b>TEL :</b>		<b>WIP :</b> 25021 <b>DATE:</b> 8-Aug-22			
<b>VEH NO :</b>	<b>SMV7541P</b>	<b>DATE IN :</b>		<b>CONTACT PERSON :</b>	JESS		
<b>CHASSIS NO :</b>	JM6BP2SAAK1102682	<b>MILEAGE :</b>		<b>TYPE OF CLAIM :</b>	THIRD PARTY CLAIM		
<b>MODEL :</b>	M3 M-HYBRID	<b>DATE REG.:</b>	19-Oct-20				
<b>NATURE OF WORKS</b>							
<u>NO</u>	<u>DESCRIPTION</u>	<u>QTY</u>	<u>UNIT PRICE</u>	<u>1st</u> <u>Supp</u>	<u>PARTS NO</u>	<u>REVISED</u>	<u>PRICES</u>
1	FRONT BUMPER	1	867.30	✓	MBCKA-50-031EBB	867.30	867.30
2	TAPE SEAL	2	2.40	✓	MBCKA-50-2G1A	4.80	4.80
3	TAPE SEAL	2	7.40	✓	MBDWH-50-2G1	14.80	14.80
4	AIR GUIDE LH FRT	1	68.20		MBCKB-50-A20B		68.20
5	RIVET	4	9.20	✓	MTK21-50-355	36.80	36.80
6	RETAINER GRILLE TOP LH	1	10.10		MBDGF-50-0U6B		10.10
7	GROMMET, SCREW	1	5.20	✓	MN243-50-0Z1	5.20	5.20
8	RETAINER LH FRT	1	19.50		MBCKA-50-0U0A		19.50
9	PLASE SET FRONT BUMPER LH	1	15.50		MBCKA-50-1V1A		15.50
10	RETAINER S,S ULTRASONIC	2	23.40	✓	MB0J8-67-UC6	46.80	46.80
11	HOLDER S.S ULTRASONIC SIDE	1	47.20	✓	MB0L2-67-UC5 13	47.20	47.20
12	SENSOR ULTRASONIC SIDE	1	190.00		MB0J8-67-UC1 E4		190.00
13	CHROME MOULD LH FRT	1	298.20	✓	MBCKA-50-7K0C	298.20	298.20
14	CLIP	1	9.10	✓	MGSH7-50-EB1	9.10	9.10
15	FRONT FENDER LH	1	415.90	✓	MBCJH-52-210	415.90	415.90
16	STAY FENDER LH	1	46.10	✓	MBCJH-52-240	46.10	46.10
17	MUD GUARD LH FRT	1	73.20		MBCKA-56-140		73.20
18	MUD GUARD LOWER LH FRT	1	201.10	✓	MBFWM-56-115	201.10	201.10
19	FASTENER	10	3.00	✓	MB45A-56-146A	30.00	30.00
20	FRONT GRILLE RAD TOP	1	690.80	✓	MBCKB-50-7E0D2M	690.80	690.80
21	RIVET	10	9.20	✓	MTK21-50-355	92.00	92.00
22	HEADLAMP LH	1	3,645.80	✓	MBCKV-51-040B	3,645.80	3,645.80
23	BRACKET HEADLAMP LH	1	56.20	✓	MBCKA-50-160A	56.20	56.20
24	CLIP	5	6.40	✓	MBCKA-56-145A	32.00	32.00
<b>SUPPLEMENTARY</b>							
<u>NO</u>	<u>DESCRIPTION</u>	<u>QTY</u>	<u>UNIT PRICE</u>	<u>1st</u> <u>Supp</u>	<u>PARTS NO</u>	<u>REVISED</u>	<u>PRICES</u>

1	LABEL, CAUTION	1	3.50	MPE01-15-031	3.50
2	LABEL, CAUTION	1	3.50	MKF49-61-439	3.50
TOTAL PARTS					6,547.10 6,916.60
					-
TOTAL PARTS COST					6,547.10 6,916.60

#### Labour Description

			REVISED	PRICES
1	REPLACE FRT BUMPER, LHF FENDER. 10811		1,320.00	1,500.00
2	SPRAY FRT BUMPER, LHF FENDER, TOP-GRILLE.		1,590.00	2,000.00
3	MZ-BR-FRTSEN TO TRANSFER FRONT PEDESTRIAN SENSORS.		150.00	660.00
4	MZ-BR-ELECTR TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		150.00	250.00
5	MZ-BR-REPROG TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.		180.00	300.00
6	MZ-BR-SUNDRI SUNDRIES.		-	50.00

#### SUPPLEMENTARY LABOUR DESCRIPTION

1	#N/A			
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TOTAL LABOUR	3,390.00	4,760.00
TOTAL PARTS	6,547.10	6,916.60
TOTAL	9,937.10	11,676.60
LESS EXCESS	-	-
TOTAL AFTER EXCESS	9,937.10	
GST 7%	695.60	-
GRAND TOTAL	10,632.70	-
REPAIR DAYS	5.00	

TRANS EUROKARS PTE LTD

\_\_\_\_\_  
Authorised Signature