

ASS. REC. BY:

REF:

ASM 220056571KV

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

Veh No:

SIP 8158A

Yr Regn:

04, 21

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

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

To Inspect Vehicle No:

Truck / Trailer or

at Workshop m/s

EM

Make:

Lexus UX 250h c.c. 1987

of

Colour

M. P. Grey

A/C: Insured / Std / NI / NA

Insured:

Sp. Reading

23867

T/Radio: Insured / Std / NI / NA

Policy No.

Eng/No:

Claims No.

C/No:

JTHY65BH002094563

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

225/50R18

R:

(Policy Condition)

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

N/S	O/S

Bal. or Market Value:

8174k

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

04

days

Res.: Yes or No

Lum Sum:

1-B.1

%

3 Val.: Yes or No

Front

R/Bal.

7

mm

Rear

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

13/6/12

D.O.I.

20/6/2022

Survey held at

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

CLSM

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

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

) \$ - RS - SI

) Fuel

) Other

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Report Format :

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

TOTAL

EM Solution Pte Ltd

160 Sin Ming Drive #03-18/19, Sin Ming Autocity
Singapore 575722
Tel: 64560226 Fax: 64584500
GST Reg. No: 201016308K

ESTIMATE

Date : 20th June 2022

Ms **Ong Hwee Yan**
Blk 712 Hougang Ave 2 #04-273
Singapore 530712

Veh No : **SLP 8158A**
Make/Model : **Lexus UX250H**
Chassis No : JTHY65BH002094563
Date of Acc : 13.06.22
TP Veh No : GBF 5221R

S/No	Qty	Description	Unit Price	Amount
<u>Materials</u>				
1	1 pc	Bonnet	\$	2,603.90
2	1 pc	Frt Fender RH	\$	1,285.90
3	1 pc	Headlamp RH	\$	4,131.60
4	1 pc	Frt Side Bumper RH	\$	434.80
5	1 pc	Frt Bumper Side Retainer RH	\$	83.00
6	1pc	Frt Bumper Bracket RH	\$	249.60
			\$	8,788.80
			Less 10%	\$ 878.88
			\$	7,909.92
7	1 set	Frt Bumper Clips	\$	55.00
			Parts Total	\$ 7,964.92
<u>Labour</u>				
1	To remove & rearrange electrical wirings, check lightings		\$	80.00
2	To remove, repair & replace damaged bodyparts and where consistent to the accident.		\$	800.00
3	Putty and respray painting on affected portions.		\$	800.00
4	To remove & refit PDC sensor.		\$	80.00
5	Rust proofing on affected portions.		\$	100.00
			Labour Total	\$ 1,860.00
			Total Parts & Labour	\$ 9,824.92



for EM Solution Pte Ltd

Not Authorised
Resurvey BY painting
4 days

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:

For Surveyor

SV0S226E0001 / Vin's Motor Pte Ltd [575722]
ENTRY DATE & TIME: 14/06/2022 13:16 (SGT)
SUBMITTED BY: Raymond Teo Yun Loong
VERSION: 1 (14/06/2022 13:16 (SGT))

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	14/06/2022 13:16 (SGT)
Date of Accident	13/06/2022 13:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLOCK 3 DEFU LANE 10 CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP8158A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ONG HWEE YAN
NRIC No	S8202417D
Email Address	jennisong82@gmail.com
Mobile Phone No	(Phone) +65-90900845
Alternative Phone No	(Home) +65-90900845

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	LEXUS UX250H 5DR SUV (AT) (2WD) LUXURY
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	1987

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SP2001601578-01
Cover Note Number	-

DRIVER

Name of Driver	ONG HWEE YAN
NRIC No	S8202417D

SKETCH PLAN

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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

