

Store

HLA

CS/HLA22005895/Eqy3

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. MPC03503/JG

Sum Insured: _____ Excess: 775

(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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SMW1937R Yr Regn: 10/11/16

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

Truck / Trailer or

Make: Toyota Harrier

c.c 1986

Colour: White

A/C: Insured / Std / NI / NA

Sp. Reading: 54855

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 2546009744P3

Gen. Cond: Good (Fai) / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 235/55R18

R: 1

ES / DUN / EXNOVA / GY / FS / LIZA / MIC / 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. 20/6/22

D.O.I. 21/6/22

Survey held at

Wah Hong

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

MV-90K

22/06/22 @ 10.55am revert to Joel Goh via Merimen.

24/06/22 @ 11.21am Joel Goh informed C/A via Merimen.

24/06/22 @ 11.30am Informed Wksp C/A on LS basis & ex:\$775 by email.

Date/Time, File Pass to?

☐ : Prel. Report☐ : Final Report

1)

Date/Time, File Return to?

2)

Report Format: _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Survey Fee:

Transportation:

Photos

Others

TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	240C
Vehicle Details	
Vehicle No.:	SMW1937R
Vehicle to be Exported:	No
Intended Deregistration Date:	20 Jun 2022
Vehicle Make:	TOYOTA
Vehicle Model:	HARRIER ELEGANCE 2.0 A
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	3ZRB744856
Chassis No.:	ZSU600074403
Maximum Power Output:	111.0 kW (148 bhp)
Open Market Value:	\$29,157.00
Original Registration Date:	10 Nov 2016
First Registration Date:	10 Nov 2016
Transfer Count:	1
Actual ARF Paid:	\$27,820.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	09 Nov 2026
PARF Rebate Amount:	\$19,474.00
Intended COE Rebate Details	
COE Expiry Date:	09 Nov 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$53,001.00
COE Rebate Amount:	\$23,256.00
Total Rebate Amount:	\$42,730.00

The information contained herein is correct as at 20 Jun 2022

OK

Wah Hong Motors & Credit Pte Ltd (Co.Reg.No:199806235M)
38 Toh Guan Road East, #01-57, Enterprise Hub
Singapore 608581
Tel: +65 6773 7377 Email: motor@wahhong.sg

INSURER: **HL Assurance Pte Ltd (HQ)**

PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	SMW1937R
Policy No:	MP319092	Date of Loss:	20/06/2022
Vehicle Reg. No.:	SMW1937R	Driveable?	
Driver Age/Info:	/ FEMALE	Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	SAN KO KO WIN		
Driver:	NAING NAING KYAW		

Make/Model:	TOYOTA HARRIER, 2.0 ELEGANCE (A)	Vehicle Reg. Date:	10/11/2016
Vehicle Colour:	WHITE		
Engine No:	3ZRB744856	Chassis No:	ZSU600074403
Odometer:	54842 KM		

Paint Type:	
Total Loss?	NO
Est. Duration of Repair (day)	7

Present Location: **WAH HONG MOTORS & CREDIT PTE LTD (HQ)**

COST OF CLAIMS

	Amount
Parts	2,068.50
Miscellaneous Items	115.00
Labour	2,360.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	4,543.50
+ GST 7.00% (S\$)	318.05
Nett Amount (S\$)	4,861.55

This claim is handled by: **THONG ZHONGMING**

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 20 Jun 2022)
 Parts: M1-SUV TOYOTA HARRIER 2.0 Elegance (A) (Catalogue:Merimen Singapore 1.0)
 Labour: Repairer's (Price-denominated Standard List)
 Print Code: Wah Hong Motors & Credit Pte Ltd/SMW1937R/20/06/2022 15:19
 Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
 Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*Front bumper / BR	0.00	0.00	*280.00 F
2	1		*Front bumper side retainer LH/RH @2*\$50 ?	0.00	0.00	*100.00 F
3	1		*Center grille assy / CUT	0.00	0.00	*200.00 F
4	1		*Rear door RH / ON	0.00	0.00	*580.00 F
5	1		*Rear fender RH / ON	0.00	0.00	*580.00 F
6	1		*Rear windscreen moulding / NEP	0.00	0.00	*60.00 F
7	1		*Front bumper lower skirt / CUT	0.00	0.00	*170.00 F
8	1		*Rear bumper (Repair refer to labor) X R	0.00	0.00	*- F
9	1		*Support panel (Repair refer to labor) X	0.00	0.00	*- F
Sub Total (\$\$)						1,970.00
+ Margin on L,N Items 5.00% (\$\$)						98.50
Total Parts (\$\$)						2,068.50

F=Franchise part.

Wah Hong Motors & Credit Pte Ltd/SMW1937R/20/06/2022 15:19. Not valid without Reference section.
 Generated using Merimen e-Claims IEAS

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:

Estimates on Miscellaneous Items

No Qty Particulars

Amount

Miscellaneous Items

1	1	center grille clips	n/c	15	30.00
2	1	Front bumper clips	n/c	30	35.00
3	1	Rear fender sealant	n/c	40	50.00
Sub Total (S\$)					115.00

Estimates on Labour

No Particulars

Lab.Type

Amount

Labour Items

1	To remove the affected parts & fittings to commence repairs; panel beat & reshape the affected areas and replace the damaged parts and components	New	900	1,000.00
2	To supply paint materials, expandable items & putty, respray paint on parts replaced & repaired	New	800	1,000.00
3	To remove and refix wiring system at accident damaged area and check for all electrical proper function	New	30	60.00
4	To remove and refit/replace Front door RH fitting, trimmings, garnish, window glass and lock mechanism	New	30	100.00
5	To remove and refit rear seat in order to repair	New	30	100.00
6	To remove and refit/replace roots lining & upholster garnish	New	50	100.00
Gross Labour Cost (S\$)				2,360.00

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< END OF ESTIMATES >

Steve (LKK)
21/6/22, 3:00pm

L/S
7 AL 17
7 d/s
OD - Not L
EXCERR - ?

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	20/06/2022 12:20 (SGT)
Date of Accident	20/06/2022 09:00 (SGT)
Exact Location of Accident	95 W Coast Dr, Singapore 128002
Additional Location Information	95 WESTCOAST DRIVE (BASEMENT CARPARK)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMW1937R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SAN KO KO WIN
NRIC No	SXXXX240C
Email Address	NAINAIKYAW@GMAIL.COM
Mobile Phone No	(Phone) +65-97665649
Alternative Phone No	+65-97665649

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Harrier
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	HL Assurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MP319092
Cover Note Number	-

DRIVER

Name of Driver	NAING NAING KYAW
NRIC No	SXXXX846E

Date Of Birth	20/11/1968
Occupation	Indoor
Date Of Driving Pass	04/07/2009
Driving experience	12 YEARS AND 11 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97665649
Alt. Phone Number	-
Email Address	NAINAIKYAW@GMAIL.COM
Address	95 WESTCOAST DRIVE #01-31
Address complement	-
Postcode	128002
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	Collided into Property
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
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 SKETCH PLAN

ATTACHMENT(S)

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

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**.
3. Information provided must be as **truthful and accurate as possible**. Any willful 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

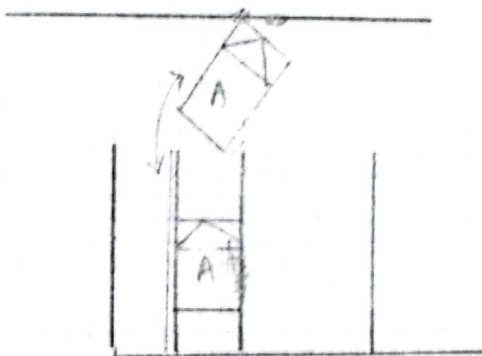
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



CAR PARK @ Basement 95 WESTCOAST DRIVE

VEH A SMW 1937 R

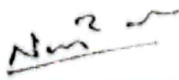
Describe Circumstances of the Accident

On 20/06/2022, about 9 am. I tried to park my vehicle SMW 1937R at
basement carpark. As the parking lot is too small, I hit the pillar. I tried
to adjust my vehicle; I hit the wall on my right side of my car.
Nobody is injured.

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

ct