

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No. \_\_\_\_\_  
 Claims No. **CDMPG22001216**  
 Sum Insured: \_\_\_\_\_ Excess: **0/-**  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

Veh No: **SJE 9385K** Yr Regn: **6/14/20**  
 Type:  M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: **Skoda Octavia** c.c. **1395**  
 Colour: **Green** A/C: **Insured / Std / Nil / NA**  
 Sp. Reading **36584** T/Radio: **Insured / Std / Nil / NA**  
 Eng/No: \_\_\_\_\_  
 C/No: **1M RBCTNKGL007131**  
 Gen. Cond: **Good** / Fair / Poor / Burnt  
 Steering: **In order** / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: **In order** / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Mod: **Nil** / **SDM** / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: **175/40R18**  
 R: **1)**

(Policy Condition)  
 Remark: The veh had commenced its repair at the time of inspection.

X	X
N/S	O/S

Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Rpt: \_\_\_\_\_ 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

BS / DUN / EXNOVA /  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. **22/6/22** D.O.I. **28/6/22**  
 Survey held at **Volkswagen**  
 Des. of Damages:  Fry / Rear / O/S / N/S / U/C / Rooftop or \_\_\_\_\_  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<b>MV-99K</b>
<b>29/06/22 @ 11.44am</b>	<b>revert to EGRO via Merimen.</b>
<b>01/07/22 @ 1.30pm</b>	<b>Han Yang informed C/A via Merimen.</b>
<b>01/07/22 @ 4.57pm</b>	<b>Informed Germaine C/A &amp; ex: \$0/- by email.</b>

Date/Time, File Pass to?  : Prel. Report  
 : Final Report  
 1) \_\_\_\_\_  
 Date/Time, File Return to? \_\_\_\_\_  
 2) \_\_\_\_\_  
 Report Format: \_\_\_\_\_  
 Lump Sum / I.B.F. (\$) \_\_\_\_\_

Days Of Repair: \_\_\_\_\_  
 Resurvey No. of Trip: \_\_\_\_\_  
 Add Fee:  : Site Insp (\$) \_\_\_\_\_  
 : Interview (\$) \_\_\_\_\_  
 : Tech. Invs (\$) \_\_\_\_\_  
 : Weekend (\$) \_\_\_\_\_  
 Survey Fee: \_\_\_\_\_  
 Transportation: \_\_\_\_\_ \$ + RS. \$ \_\_\_\_\_  
 Photos \_\_\_\_\_  
 Others \_\_\_\_\_  
 TOTAL \_\_\_\_\_

# ŠKODA Centre Singapore

26 Leng Kee Rd  
Singapore 159104  
B.z. Reg. No.: 199101494Z  
GST No.: M200985052



## Quotation

Non binding - Preview

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Company  
ERGO INSURANCE PTE. LTD  
5 TEMASEK BOULEVARD  
#04-01 SUNTEC TOWER FIVE  
Singapore 038985

Customer Details:  
Mr  
TAN  
WEE TAR, WESLEY  
(CHEN WEIDA)  
BLK 177 LOMPANG ROAD  
#24-02  
SINGAPORE 670177

Document no.  
Document date 24-06-2022  
Customer no. 5211001034  
Customer GST-ID 199305211H  
Dealer 30001  
Job order number 2022018334/ 1  
Job order date 23-06-2022  
Service Advisor SHU SHI TANG

License plate SJE9385K	Model code 5E33MDP1	First registration 06-04-2020	VIN TMBBC7NE6L0074234	Model Octavia Ambition + 1.4 I TSI 110kW MY20	Mileage 34,597
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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
9801B001	TO ALIGN LED HEADLIGHT				#1	100.00	107.00
5E0823031B	Hood	1	pcs.	1,768.46	#1	1,768.46	1,892.25
	FRT BONNET						
3V0853621A FOD	Skoda Embl	1	pcs.	68.57	#1	68.57	73.37
5E0807221P	Cover For	1	pcs.	1,352.70	#1	1,352.70	1,447.39
	FRT BUMPER						
5E0807184A	Guide Piec	1	pcs.	46.22	#1	46.22	49.46
	BUMPER SIDE BRACKET RH						
5E0807183A	Guide Piec	1	pcs.	46.22	#1	46.22	49.46
	BUMPER SIDE BRACKET LH						
5E0807723A	Support Pa	1	pcs.	55.31	#1	55.31	59.18
	LHS RADIATOR GRILLE INNER BRACKET						
5E0807724A	Support Pa	1	pcs.	55.31	#1	55.31	59.18
	RHS RADIATOR GRILLE INNER BRACKET						
5E0919485G	Sensor bracket	1	pcs.	13.00	#1	13.00	13.91
5E0919486G	Sensor bracket	1	pcs.	13.00	#1	13.00	13.91
5E0919485F	Sensor bracket	1	pcs.	13.00	#1	13.00	13.91
5E0919486F	Sensor bracket	1	pcs.	13.00	#1	13.00	13.91
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
5Q0919275B GRU	Sensor Primed	1	pcs.	190.18	#1	190.18	203.49
5Q0919133 9B9	Seal Ring Satin Black	1	pcs.	1.46	#1	1.46	1.56
5E0853653A 9B9	Unbekannt	1	pcs.	253.64	#1	253.64	271.39
	RADIATOR GRILLE						
701010002AA	Sticker *Overfilled Engin	1	pcs.	16.43	#1	16.43	17.58
701010043B	Sticker *Oil Comply With	1	pcs.	26.52	#1	26.52	28.38
5Q0010008D	Sticker *Ac **Refrigeran	1	pcs.	18.87	#1	18.87	20.19
5E0853761C ZZZ	Cover Stri	1	pcs.	271.87	#1	271.87	290.90
	RADIATOR GRILLE CHROM						
5E0853677J 9B9	Cooling Ai	1	pcs.	119.29	#1	119.29	127.64
	BUMPER CTR LOWER GRILLE						
5E0807681F 9B9	Cover For	1	pcs.	41.04	#1	41.04	43.91
	LHS FOG LAMP GRILLE						
5E0807682F 9B9	Cover For	1	pcs.	41.04	#1	41.04	43.91
	RHS FOG LAMP GRILLE						
5E0807248D	Buffer	1	pcs.	59.44	#1	59.44	63.60
	REINFORCEMENT FOAM						
5E0807109F	Reinforcem	1	pcs.	777.93	#1	777.93	832.39
5E2941015E	Unbekannt	1	pcs.	2,189.09	#1	2,189.09	2,342.33
	LHS H/LAMP						
5E2941016E	Unbekannt	1	pcs.	2,189.08	#1	2,189.08	2,342.32
	RHS H/LAMP						

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SJE9385K	5E33MDP1	06-04-2020	TMBBC7NE6L0074234	Octavia Ambition + 1.4 I TSI 110kW MY20	34,597

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
5E0941699F	Halogen Fo X LHS FOG LAMP	1	pcs.	351.74	#1	351.74	376.36
	LABOUR	42	pcs.	840.00	#1	3,360.00	3,595.20
	SPRAY PAINT	42	pcs.	800.00	#1	3,200.00	3,424.00
	FRT NUMBER PLATE	1	pcs.	80.00	#1	80.00	85.60
	ERGO OD CLAIM DOA: 22/06/2022 EXCESS: SURVEY BY:						

Quotation valid till 30-06-2022

Tax Code	Labour	Material	GST %	GST	Total amount excl. GST	Total amount incl. GST
#1	860.00	16,787.20	7%	1,235.30	17,647.20	18,882.50
Total	860.00	16,787.20		1,235.30	17,647.20	18,882.50

*Steve (LKK)  
28/6/22, 11am*

*OD- M/L  
Excess?  
8 days  
M RL Y*

Customer \_\_\_\_\_ Service Advisor \_\_\_\_\_

---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.

**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:

# 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 ..... 23/06/2022 11:19 (SGT)  
Reported by ..... Both  
Date of Accident ..... 22/06/2022 18:00 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... BLK 109 BUKIT BATOK WEST AVE 6 CAR PARK  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SJE9385K

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... TAN WEE TAR, WESLEY  
NRIC No ..... S9027397C  
Email Address ..... WESLEY.TANWT@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-90051648  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Skoda  
Model ..... OCTAVIA 1.4 AMBITION PLUS TSI  
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 ..... 1395

### INSURANCE COMPANY

Name of Insurance Company ..... ERGO Insurance Pte. Ltd.  
Policy Number / Cover Note Number ..... DMPG21013795

### DRIVER

Name of Driver ..... TAN WEE TAR, WESLEY  
NRIC No ..... S9027397C  
Date Of Birth ..... 30/07/1990  
Occupation ..... Indoor

Date Of Driving Pass	06/08/2012
Driving experience	9 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90051648
Alt. Phone Number	-
Email Address	WESLEY.TANWT@GMAIL.COM
Address	BLK 177 LOMPANG ROAD
Address complement	#24-02
Postcode	670177
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	Collision - Head on collision
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

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

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SLG1563G
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 ..... -  
No. Of Passenger (Including Driver) ..... 1

**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 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:

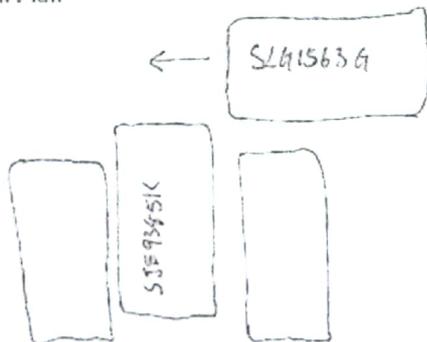
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

*[Signature]*  
 23-JUN-2022  
 Policyholder's Signature / Date & Time

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

*[Signature]*  
 Witnessed by Reporting Centre Personnel

**Sketch Plan**



Clear/Dry

