ASS. REC. BY: Kenneth | REF: SPF / 2200611 8 / K

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s World 5 Kim Chuan Line

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 Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 02 days Res.: Yes or No

Lum Sum: 1.81 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SGF 70H Yr Regn: 11 / 17

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Toy ~~Vios~~ Altis c.c 1598

Colour M.R.White A/C: Insured / Std / NI / NA

Sp.Reading 130735 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR053REH604573249

Gen. Cond: Good / Fair / 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: 225/40R18

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	7 mm	R/Bal.	7 mm
L/Bal.	7 mm	L/Bal.	7 mm
D.O.A.	27/1/22	D.O.I.	29/6/2022

Survey held at _____

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

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

Date / Time	Action / Instruction
/	

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Report Format :

Lump Sum / I.B.I: ($ _____)

Survey Fee:	
Transportation:	$ + RS. ___ SI
Photos	
Others	
TOTAL	

WORLD AUTO PTE LTD

NO.5, KIM CHUAN LANE
S'pore 537070
Tel No. : 6451 3933 Fax No. : 6455 7576
E-Mail : worldaut@singnet.com.sg
Website : www.worldauto.com.sg
Tax Reg. No. : 200006765-H Buss. Reg. No. : 200006765H

SINGAPORE POLICE FORCE

Not Authorised
Pending Blocking
2 days

Attention : Motor Claim Department

Estimate : ES190197

Date : 29/06/2022
Vehicle Num. : SGF 70H
Make/Model : TOYOTA COROLLA ALTIS 1.6A
Chassis/Eng# :
Accident Date : 27/01/2022
Claim No. :
Reference :
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S$
		LIST ITEMS :		
1.	1	FRONT BUMPER	Rd/RM	551.00
2.	1	FRONT BUMPER SIDE RETAINER R/H		58.00
3.	1	FRONT BUMPER FOGLAMP COVER RH		65.00
4.	1	FRONT BUMPER LOWER GRILLE		108.00
5.	1	FRONT BUMPER INNER FOAM		95.00
6.	1	HEADLAMP ASSY RH		2,200.00
7.	1	HEADLAMP MOULDING RH		200.00
		List TotalS$:		3,277.00
		25.00% Discount S$:		819.25
				2,457.75
		SPECIAL NETT ITEMS :		
1.	1SET	FRONT BUMPER CLIP		40.00
		Special Nett Total S$:		40.00
		LABOUR :		
		REMOVE ACCIDENT DAMAGED PARTS IN ORDER TO FACILITATE REPAIRS INCLUDING PANEL BEAT, STRAIGHTEN FRONT PANELS WHERE NECESSARY AND REPLACE ABOVE PARTS	2.0	500.00
		PUTTY AND SPRAY PAINT ACCIDENT AFFECTED AREAS (PEARL WHITE)	2.0	500.00
		Labour Total S$:		1,000.00

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:

E. & O.E. **Total S$: 3,497.75**

for WORLD AUTO PTE LTD

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 GI- 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	27/01/2022 19:51 (SGT)
Date of Accident	27/01/2022 12:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	720 Ang Mo Kio Central 2 Carpark
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGF70H

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	RAYMOND LOH TOH YONG
NRIC No	S1469384Z
Email Address	Ray6363@singnet.com.sg
Mobile Phone No	(Phone) +65-81816363
Alternative Phone No	+65-81816363

VEHICLE PARTICULARS

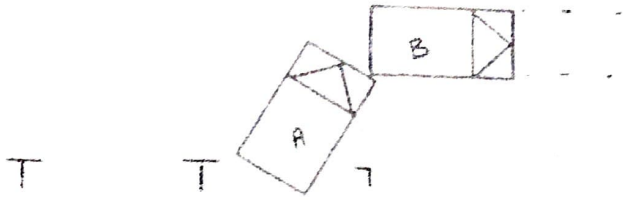
Manufacturer	Toyota
Model	Corolla
Variant	Altis
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5101136293-03
Cover Note Number	-

DRIVER

Name of Driver	LOH YU PING, ROBIN
NRIC No	S9129564D



A: SGF70H
B: QX1009S

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to POLICE Report

DECLARATION