

ASS. REC. BY:

REF: C12 / 22006531/KC

E

Kenneth

## 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: 05 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: STQ 304E Yr Regn: 04, 09Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toy Altis c.c. 1598Colour: h. Green A/C: Insured / Std / NI / NASp. Reading: 398287 T/Radio: Insured / Std / NI / NA

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

C/No: MR0537EE 106143145Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: NII / S/Rim / STD A/Rim orTyre Size: F: 195/65R15  
R: \_\_\_\_\_BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or IntertracFront: 7 mm Rear: 7 mmR/Bal. 7 mmL/Bal. 7 mmD.O.A. 6/7/22 D.O.I. 13/7/2022

Survey held at \_\_\_\_\_

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

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

Date / Time Action / Instruction

22/8 11pm @ 34501. Car @ 05 days (Red \$2,810.25 / 45%)

Date/Time, File Pass to?

☐ : Prell. Report☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trlp: \_\_\_\_\_

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

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

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

Fees \_\_\_\_\_

Others \_\_\_\_\_

TOTAL

Report Format: \_\_\_\_\_

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

Date: 07/07/2022

Vehicle No: SJQ504E

Model: TOYOTA COROLLA ALTIS 1.6

Chassis: MR053ZEE106143145-2009

Reg.Year: 2009

Third Party Insurer: CHINA TAIPING

Third Party Veh No: GBF4313R

Date of Accident: 06/07/2022

Estimator: TING AN

Surveyor: LKK-Auto Kenneth Kong

*Not Withheld*  
*61 Pmp 83450/1*  
*5 days*  
*Pharmacy After Pain*

## ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	FRONT WINDSCREEN GLASS <i>1208</i>	1	<i>CM</i>	\$1,319.00
2	FRONT WINDSCREEN MOULDING	1	<i>ru</i>	\$120.00
3	FRONT WIPER AIR GRILLE LH <i>366.10</i>	1	<i>my CM</i>	\$477.00
4	FRONT BONNET <i>739.10</i>	1	<i>RU</i>	\$901.00
5	FRONT BONNET HINGE LH	1	<i>DIY</i>	\$60.00
6	FRONT BONNET HINGE RH	1	<i>R</i>	\$60.00
7	FRONT HEADLAMP LH	1	<i>my CM</i>	\$713.00
8	FRONT BUMPER	1	<i>CM</i>	\$436.00
9	FRONT BUMPER SIDE BRACKET LH	1	<i>DIY</i>	\$55.00
10	FRONT BUMPER REINFORCEMENT	1	<i>R</i>	\$345.00
11	FRONT BUMPER LOWER GRILLE	1	<i>ru</i>	\$138.00
12	FRONT BUMPER FOG LAMP LH	1	<i>ru</i>	\$283.00
13	FRONT BUMPER FOG LAMP COVER LH	1	<i>ru</i>	\$60.00
14	FRONT FENDER LH	1	<i>R</i>	\$610.00
15	FRONT FENDER "VVTI" EMBLEM LH	1	<i>ru</i>	\$45.00
16	FRONT FENDER INNER SHIELD LH	1	<i>CM</i>	\$165.00
17	FRONT DOOR LH	1		REPAIR
SUB TOTAL				\$5,787.00
LESS 25%				-\$1,446.75
PARTS TOTAL				\$4,340.25

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	FRONT WINDSCREEN GLASS SEALANT	1		<i>ru</i> \$80.00
2	FRONT BUMPER CLIPS	1		<i>ru</i> \$50.00
3	FRONT FENDER INNER SHIELD CLIPS LH	1		<i>ru</i> \$40.00
S/N TOTAL				\$170.00

### Head office

6 Kung Chong Road Singapore 159143  
Tel: (+65) 6472 1313 | Fax: (+65) 6472 2112

### Branch

9A Serangoon North Ave 5 Singapore 554500  
Tel: (+65) 6484 9919 | Fax: (+65) 6481 1993

### Branch (Motor Insurance Claims)

Blk 10 Ang Mo Kio Ind Park 2A #01-05 Singapore 568047  
Tel: (+65) 6481 1522 | Fax: (+65) 6481 1011



Date: 07/07/2022  
Vehicle No: SJQ504E  
Model: TOYOTA COROLLA ALTIS 1.6  
Chassis: MR053ZEE106143145-2009  
Reg.Year: 2009

Third Party Insurer: CHINA TAIPING  
Third Party Veh No: GBF4313R  
Date of Accident: 06/07/2022  
Estimator: TING AN  
Surveyor:

## LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST FRONT ACCIDENT AREAS & ETC.

500  
\$700.00

LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT FRONT BONNET, FRONT BUMPER, FRONT FENDER LH & ETC.

600  
\$700.00

LABOUR CHARGES TO REMOVE & REPLACE FRONT WINDSCREEN GLASS, FRONT WINDSCREEN MOULDING, FRONT WINDSCREEN SEALANT & ETC.

1200  
\$150.00

TO TUFF KOTE & UNDERSEAL MATERIALS.

300  
\$120.00

TO CHECK WIRING & ELECTRICAL SYSTEM & ETC.

200  
\$80.00

LABOUR TOTAL \$1,750.00

TING AN

TOTAL

\$6,260.25

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:

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# 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	07/07/2022 15:02 (SGT)
Reported by	Driver
Date of Accident	06/07/2022 12:35 (SGT)
Exact Location of Accident	12 Tampines Central 1, Singapore 529537
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ504E
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	VIKING LEASING
Company Reg No	5XXXX840B
Email Address	vikingleasing@gmail.com
Mobile Phone No	(Phone) +65-81389001
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1598

### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5117334143-02

### DRIVER

Name of Driver	LIM HOCK BOON
NRIC No	SXXXX995C
Date Of Birth	26/11/1972
Occupation	Outdoor

Date Of Driving Pass .....	07/07/2014
Driving experience .....	8 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-89020520
Alt. Phone Number .....	-
Email Address .....	hblim1126@yahoo.com.sg
Address .....	BLK 222 SERANGOON AVENUE 4 #06-248
Address complement .....	-
Postcode .....	550222
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 to Rear
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

PLEASE REFER TO ACCIDENT STATEMENT AS ATTACHED.

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBF4313R
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Dyna
Vehicle Variant .....	-
Vehicle Colour .....	White
Vehicle Category .....	Commercial vehicle
Name of Driver .....	MAHMUD BIN MOHALAS
NRIC No .....	SXXXX804I

Contact Number .....	(Phone) +65-90884224
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 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.



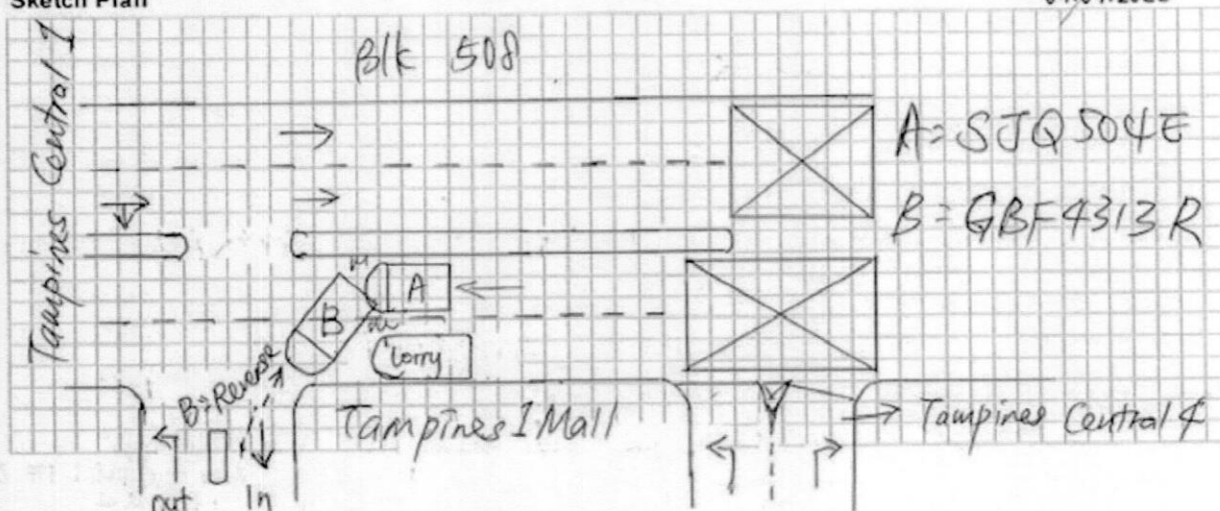
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

JOELLE TAN  
AMK AUTOPoint PE 40  
07.07.2022

## Sketch Plan



Describe Circumstances of the Accident

On 06/07/2022 @ 12:35 hours: I was driving at Tampines Central 1. Suddenly vehicle B: GBF4313R reverse and collided into my vehicle A: SJD504E front portion caused badly damage. We alighted and exchanged particular. The driver unhear my horned.

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  
Joelle Tan  
AMK Autopoint Pte Ltd  
07.07.2022

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Business
Owner ID:	840B
<b>Vehicle Details</b>	
Vehicle No.:	SJQ504E
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Jul 2022
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	3ZZ4879575
Chassis No.:	MR053ZEE106143145
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$16,990.00
Original Registration Date:	23 Apr 2009
First Registration Date:	23 Apr 2009
Transfer Count:	2
Actual ARF Paid:	\$16,990.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	22 Apr 2024
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$13,088.00
COE Rebate Amount:	\$4,689.00
<b>Total Rebate Amount:</b>	<b>\$4,689.00</b>
<b>Message</b>	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 07 Jul 2022

OK