

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 ( ) 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: \_\_\_\_\_ days Res.: Yes or No  
 Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

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

Date / Time	Action / Instruction
	MR-93K

Veh No: SMF 9862J Yr Regn: 30/4/18  
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or  
 Make: Subaru Forester c.c. 1995  
 Colour: Brown A/C: Insured / Std / Nil / NA  
 Sp. Reading: 43097 T/Radio: Insured / Std / Nil / NA  
 Eng/No: \_\_\_\_\_  
 C/No: JFISJSKCSJG119420  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or  
 Brake: In order / Jammed / Leaked / Burnt or  
 Modl: Nil / S/Rim / STD A/Rim or  
 Tyre Size: F: 225/60R17  
 R:    
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Lauren  
 Front  
 R/Bal. 4 mm  
 L/Bal. 4 mm  
 D.O.A. 5/7/22  
 Survey held at Shy fatt  
 Des. of Damages: Front RH / Rear / O/S / N/S / U/C / Rooftop or  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

☐ : Prell. Report  
☐ : Final Report

Date/Time, File Return to?

2)

Report Format:

Lump Sum / I.B.H. (%)

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

Resurvey No. of Trip: \_\_\_\_\_

Add Fee:

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

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL



# 樹發汽車修理廠 SHU FATT AUTO WORKS

BLOCK 1009 BUKIT MERAH LANE 3 #01-90 SINGAPORE 159723 TEL: 6273 0119 FAX: 6270 7065  
Co. Reg. No. 09062400M GST Reg. No. 09-062400-M

INSURER: Allianz Insurance Singapore Pte. Ltd. (HQ)

## PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	WSK/JW/SF-SMF9862J
Policy No:	SP2000035725-01	Date of Loss:	05/07/2022
Vehicle Reg. No.:	SMF9862J	Driveable?	
Driver Age/Info:	64 / MALE	Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	WEE CHEE WAI	Contact No:	+6596646608
Driver:	WEE CHEE WAI		
Make/Model:	SUBARU FORESTER, 2.0 I-L CVT AWD SR (A)	Vehicle Reg. Date:	30/11/2018
Vehicle Colour:	BROWN	Chassis No:	JF1SJ5KC5JG112420
Engine No:	FB20YE45561		
Odometer:	43097 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	20		
Remarks:	VEHICLE IS IN.		
Present Location:	SHU FATT AUTO WORKS (HQ)		

COST OF CLAIMS	Amount
Parts	13,067.40
Miscellaneous Items	1,380.00
Labour	3,200.00
Paintwork Labour	1,800.00
Towing	0.00
Calculated Gross Total (S\$)	19,447.40
- Excess (S\$)	600.00
(S\$)	18,847.40
+ GST 7.00% (S\$)	1,319.32
Nett Amount (S\$)	20,166.72

This claim is handled by: PATRICIA KOH

Generated using Merimen e-Claims Internet Estimation & Adjusting System

LKC to survey on 15/7/22

14/7/22

# REPAIR DETAILS

## Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 14 Jul 2022)

Parts: M1-SUV SUBARU FORESTER 2.0 I-L CVT AWD SR (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: Shu Fatt Auto Works/SMF9862J/14/07/2022 13:39

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 bonnet X R	0.00	0.00	*600.00 F
2	1		*Front bonnet chrome / CAT	0.00	0.00	*100.00 F
3	8		*Front bonnet chrome clips - MC	0.00	0.00	*20.00 F
4	1		*Front bonnet insulator X	0.00	0.00	*60.00 F
5	12		*Front bonnet insulator clips X	0.00	0.00	*30.00 F
6	2		*Front bonnet hinges X	0.00	0.00	*60.00 F
7	1		*Front bonnet lock X	0.00	0.00	*75.00 F
8	1		*Left front headlight ?	0.00	0.00	*1,650.00 F
9	1		*Right front headlight / BR ?	0.00	0.00	*1,650.00 F
10	1		*Left front headlight holder ?	0.00	0.00	*35.00 F
11	1		*Right front headlight holder - MIS	0.00	0.00	*35.00 F
12	1		*Front top grille / BR	0.00	0.00	*130.00 F
13	6		*Front top grille clips - MC	0.00	0.00	*15.00 F
14	1		*Front lower grille - CAT	0.00	0.00	*230.00 F
15	12		*Front grille clips - MC	0.00	0.00	*30.00 F
16	1		*Front grille emblem - MC	0.00	0.00	*55.00 F
17	1		*Front bumper / BR	0.00	0.00	*340.00 F
18	1		*Front bumper reinforcement - ON	0.00	0.00	*220.00 F
19	1		*Left front bumper bracket - BR	0.00	0.00	*18.00 F
20	1		*Right front bumper bracket - BR	0.00	0.00	*18.00 F
21	1		*Front bumper foam ?	0.00	0.00	*90.00 F
22	16		*Front bumper clips ?	0.00	0.00	*40.00 F
23	1		*Left front bumper retainers - BR	0.00	0.00	*12.00 F
24	1		*Right front bumper retainer - BR	0.00	0.00	*12.00 F
25	1		*Right front headlight washer nozzle - BR	0.00	0.00	*60.00 F
26	1		*Right front headlight washer nozzle cover - MIS	0.00	0.00	*40.00 F
27	1		*Right front headlight washer pipes - TN	0.00	0.00	*55.00 F
28	1		*Right front fog light / BR	0.00	0.00	*180.00 F
29	1		*Right front fog light chrome garnish - MIS	0.00	0.00	*40.00 F
30	1		*Right front fender / ON	0.00	0.00	*170.00 F
31	1		*Right front fender cowling - TN	0.00	0.00	*96.00 F
32	12		*Right front fender cowling clips - MC	0.00	0.00	*30.00 F
33	1		*Front air resonator - MIS	0.00	0.00	*40.00 F
34	1		*Front lower engine cover - BR	0.00	0.00	*120.00 F
35	12		*Front lower engine cover clips - MC	0.00	0.00	*30.00 F
36	1		*Right air bag sensor ?	0.00	0.00	*135.00 F
37	1		*Front support panel - ON	0.00	0.00	*280.00 F
38	1		*Front support lower member - ON	0.00	0.00	*120.00 F
39	1		*Front mud flap - MIS	0.00	0.00	*180.00 F
40	1		*Front air intake hose ? - RY	0.00	0.00	*281.00 F
41	4		*Front air intake hose clips 2 X MS	0.00	0.00	*14.00 F
42	1		*Front top air box ? - BR (FM)	0.00	0.00	*60.00 F
43	1		*Front lower air box ? - BR (R)	0.00	0.00	*120.00 F
44	1		*Front radiator ?	0.00	0.00	*900.00 F
45	1		*Front aircon condenser ?	0.00	0.00	*400.00 F

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No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
46	1		*Right front shock absorber / BT	0.00	0.00	*210.00 F
47	1		*Right front shock absorber top mounting - PR	0.00	0.00	*95.00 F
48	1		*Right front shock absorber top bearing - PR	0.00	0.00	*95.00 F
49	1		*Right front shock absorber bush - PR	0.00	0.00	*18.00 F
50	1		*Right front lower arm - BT	0.00	0.00	*310.00 F
51	1		*Right front knuckle arm - BT	0.00	0.00	*160.00 F
52	1		*Right front lower arm bush (1) - PR	0.00	0.00	*35.00 F
53	1		*Right front lower arm bush (2) - PR	0.00	0.00	*45.00 F
54	1		*Right front wheel hub - PR	0.00	0.00	*105.00 F
55	1		*Right front wheel bearing - PR	0.00	0.00	*90.00 F
56	1		*Front anti roll bar - BT	0.00	0.00	*190.00 F
57	2		*Front anti roll bar bushes - PR CR4	0.00	0.00	*20.00 F
58	1		*Right front drive shaft ?	0.00	0.00	*600.00 F
59	1		*Right tie rod - BT	0.00	0.00	*45.00 F
60	1		*Right front rack end - BT	0.00	0.00	*50.00 F
61	1		*Right front linkage - BT ?	0.00	0.00	*50.00 F
62	1		*Right front brake disc cover	0.00	0.00	*65.00 F
63	1		*Right front brake sensor - Th	0.00	0.00	*145.00 F
64	1		*Right frt rim - CR4	0.00	0.00	*600.00 F
65	1		*Front number plate X	0	0.00	*55.00 FS
66	1		*Coolant ?	0	0.00	*28.00 FS

F=Franchise part. S=SpcNett.

Sub Total (\$\$)	11,887.00
+ Margin on L,N Items 10.00% (\$\$)	1,180.40
<b>Total Parts (\$\$)</b>	<b>13,067.40</b>

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## Estimates on Miscellaneous Items

No Qty Particulars

Amount

### Miscellaneous Items

- | No | Qty | Particulars   | Amount       |
|----|-----|---|--------------|
| 1  | 1   | To check & repair wiring.                                       | 50 80 120.00 |
| 2  | 1   | To check under carriage, replace damage parts & assembly.       | 200 680.00   |
| 3  | 1   | To check, adjust 4 wheel alignment.                             | 80 120.00    |
| 4  | 1   | To remove, radiator, condenser, fill coolant, air con freon.    | 100 250.00   |
| 5  | 1   | To remove, replace rt frt tyre rim, tyre, balance and assembly. | 30 60.00     |
| 6  | 1   | To reset ECU.   | 100 150.00   |

Sub Total (S\$) 1,380.00

## Estimates on Labour

No Particulars

Lab.Type

Amount

### Paintwork Labour

- | No | Particulars               | Lab.Type | Amount        |
|----|---------------------------|----------|---------------|
| 1  | To respray damaged parts. | New      | 1200 1,800.00 |

### Labour Items

- |   |  |     |               |
|---|--|-----|---------------|
| 2 | To knock, straighten frt inner, lower, side panels, rt frt wheel hse, rt frt inner wheel hse, rt frt chassis, frt lower member, left frt wheel hse, rt frt dr, renew frt bonnet, frt support panel, frt lights, frt fender, frt grille, frt bumper & assembly. | New | 1800 3,200.00 |
|---|--|-----|---------------|

Gross Labour Cost (S\$) 5,000.00

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< END OF ESTIMATES >

Steve (LKK)

15/7/22, 10.00

00- M HL

EXCII - ?

P/P

L7 BL y

18 1/2 yr

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	05/07/2022 15:52 (SGT)
Reported by	Both
Date of Accident	05/07/2022 11:15 (SGT)
Exact Location of Accident	Lower Delta Rd, Singapore
Additional Location Information	junction of Lower Delta Road and Delta Road
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF9862J
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Woo Chee Wai
NRIC No	SXXXX687H
Email Address	john6646608@yahoo.com.sg
Mobile Phone No	(Phone) +65-96646608
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Forester
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	2000

#### INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2000035725-01

#### DRIVER

Name of Driver	Woo Chee Wai
NRIC No	SXXXX687H
Date Of Birth	05/04/1958
Occupation	Indoor

Date Of Driving Pass 03/10/1975  
 Driving experience 46 YEARS AND 9 MONTHS  
 Gender Male  
 Mobile Number (Phone) +65-96646608  
 Alt. Phone Number -  
 Email Address john6646608@yahoo.com.sg  
 Address Blk 1 Delta Avenue, #16-41  
 Address complement -  
 Postcode 160001  
 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 - Cross Junction  
 Weather Conditions Clear  
 Road Surface Wet

#### 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? Yes  
 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

See accident statement

#### 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 SMA293L  
 Vehicle Manufacturer Toyota  
 Vehicle Model C-hr  
 Vehicle Variant -  
 Vehicle Colour -  
 Vehicle Category Private hire  
 Name of Driver Ng Lye Heng  
 NRIC No SXXXX827A

Contact Number	(Phone) +65-91122044
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

## SKETCH PLAN

Insurer: Allianz  
 Veh No: SMF 9862 J  
 DOA: 25/04/2022

## 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' 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

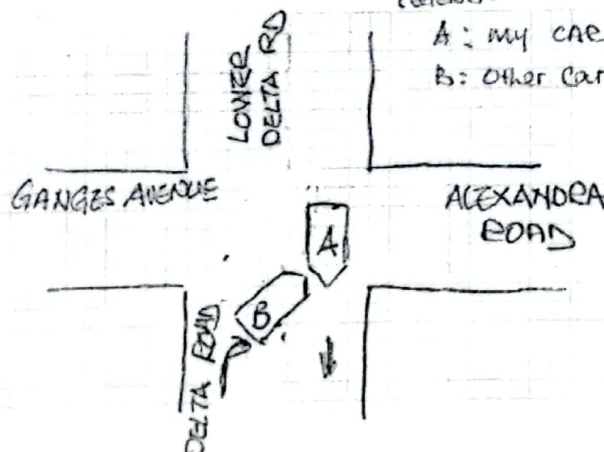
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

## Sketch Plan

LEGEND:

A: MY CAR SMF 9862 J  
 B: OTHER CAR SMA 2232



Describe Circumstances of the Accident

TIME : 1115 HRS  
 DATE : 5 JULY 2022  
 LOCATION : AS SHOWN IN DRAWING


I was driving straight from Lower Delta Road towards Delta Road while crossing the traffic junction, a white toyota C-HR (SUA 2934) turning right from Delta Road towards Alexander Road hit me at my car's right corner.  
 Both me and the other was conscious and the other driver had a small cut on his hand. An ambulance was present to check both our condition and nobody is conveyed by the ambulance.

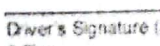
MY PARTICULAR : WOO CHEE WAI, DRIVER AND POLICY HOLDER  
 (S1284687H)


OTHER DRIVER : MR NG LYE HENG  
 (S1743827A)

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