

ASS. REG. BY:

REF:

AJS / 22 00 6713/ke

Kenneth

ASSIGNMENT

SEP 92994

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To inspect Vehicle No: _____

at Workshop m/s

Alan's

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____

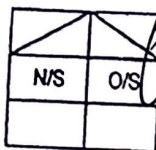
Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: \$ 76k

IDAC Accident Report: _____

Consistent?: Yes or No

GIA / PR Seen: _____

Consistent?: Yes or No

Est. Repairs: _____

06 days

Res.: Yes or No

Lum Sum: _____

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No: _____

Yr Regn: 06 17

Type: M/Gar / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mazda

C.C.

1998

Colour

M.D. Blue

A/C: Insured / Std / NI / NA

Sp. Reading

110175

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

JM6GL10714 0114699

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: _____

R: _____

225/55R17

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

Front

R/Bal. _____

mm

Rear

R/Bal. _____

mm

L/Bal. _____

mm

L/Bal. _____

mm

D.O.A. _____

9/7/22

D.O.I. _____

15/7/2022

Survey held at _____

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

O/S Frt body & u/c

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

Date/Time, File Pass to?

☐

: Prell. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: _____

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Survey Fee: _____

Transportation: _____

S + RS. SI

Fees

Others

TOTAL

Report Format :

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

Alan's United Auto Pte Ltd (Co.Reg.No:201113667N)

Blk 7 Sin Ming Industrial Estate, #01-76

Singapore 575642

Tel: 6453 8686 Fax: 6459 6550 Email: kennychan@alanutd.com; Janicechou@alanutd.com

TP INSURER: Allianz Insurance Singapore Pte. Ltd. (HQ)
FOYSAL MOHAMMAD BIN

Singapore

Claimant Insurer: Tokio Marine Insurance Singapore Ltd

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	022107
Policy No:		Date of Loss:	09/07/2022
Vehicle Reg. No.:	SLP9299U	Driveable?	
Party At Fault:	UNKNOWN		
Driver (TP):	LIM YEU FONG		

Make/Model:	MAZDA 6, 2.0 4-DOOR SEDAN 2.0L SP.6EAT (A)	Vehicle Reg. Date:	22/06/2017
Vehicle Colour:	BLUE		
Engine No:	PE20879640	Chassis No:	JM6GL1071H0114699
Odometer:	0 KM		

Paint Type:	
List Item Discount:	20.00 %
Total Loss?	NO
Est. Duration of Repair (day)	~ 6 days

*Not Authorized
11 Days &
Repair After Paint*

Present Location: ALAN'S UNITED AUTO PTE LTD (HQ)

COST OF CLAIMS

	Amount
Parts	15,515.36
Miscellaneous Items	0.00
Labour	2,850.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (\$\$)	18,365.36
+ GST 7.00% (\$\$)	1,285.58
Nett Amount (\$\$)	19,650.94

This claim is handled by: CHAN YEW SIAH

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

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

Parts: 143 MAZDA 6 2.0 4-DOOR SEDAN 2.0L SP.6EAT (A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: Alan's United Auto Pte Ltd/SLP9299U/14/07/2022 14:35

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 RH FENDER	20.00	0.00	<i>R</i> *383.00 FL	✓
2	1		*RH HEADLAMP	20.00	0.00	<i>R</i> *963.00 FL	✓
3	1		*RH PILLAR A	20.00	0.00	<i>R</i> *1,076.00 FL	X
4	1		*RH SIDE MIRROR ASSY	<i>R/L</i> 20.00	0.00	*794.00 FL	✓
5	1		*FRONT RH DOOR	20.00	0.00	<i>R</i> *982.00 FL	✓
6	2		*FRONT RH DOOR HINGE	20.00	0.00	<i>R</i> *152.00 FL	X
7	1		*AIR BAG SENSOR	20.00	0.00	<i>R</i> *187.00 FL	✓
8	1		*AIR BAG CONTROL UNIT	<i>R/R</i> 20.00	0.00	*1,548.00 FL	✓
9	1		*ROOF LINING	<i>Tn</i> 20.00	0.00	*1,340.00 FL	✓
10	1		*DRIVER ROOF TOP AIR BAG (RH)	<i>R/R</i> 20.00	0.00	*1,299.00 FL	✓
11	1		*CENTRE PILLAR INNER UPPER GARNISH	20.00	0.00	<i>cm</i> *186.00 FL	✓
12	1		*DRIVER SEAT AIR BAG	20.00	0.00	<i>R/R</i> *532.60 FL	✓
13	1		*DRIVER SEAT REST ASSY	20.00	0.00	<i>Tn</i> *5,324.00 FL	✓
14	1		*DRIVER SAFETY BELT	20.00	0.00	<i>Tn</i> *999.60 FL	✓
15	1		*FRONT RH ABSORBER	20.00	0.00	*392.00 FL	?
16	1		*FRONT RH LOWER ARM	20.00	0.00	*509.00 FL	?
17	1		*FRONT RH KNUCKLE ARM	20.00	0.00	*415.00 FL	?
18	1		*FRONT RH KNUCKLE BEARING HUP	20.00	0.00	*637.00 FL	?
19	1		*FRONT RH SPORT RIM	0	0.00	<i>R</i> *1,340.00 FS	✓

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$)	19,059.20
- List Item Discount on L Items (S\$)	3,543.84
Total Parts (S\$)	15,515.36

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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

There are no new miscellaneous items selected.

Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	TO REMOVE ROOF LINING,FRONT & REAR SEATS.TRIM BOARD & CARPET	New	300.00 <i>200</i>
2	TO DISMANTLE & LOWER FRONT UNDERCARRIAGE	New	250.00 <i>7</i>
3	TO CHECK & ADJUST WHEEL ALIGNMENT	New	80.00 <i>60</i>
4	TO PUTTY AND SPRAY REPLACED PARTS	New	<i>600</i> 1,000.00
5	TO REMOVE,CUT OUT DAMAGED PARTS,PANEL BEATING,WELDING,ALIGN,REFIX & TO RENEW ABOVE PARTS	New	<i>300</i> 900.00
6	TO REMOVE & RENEW ROOF TOP AIR BAG,SEAT AIR BAG,SAFTEY BELT,AIR BAG SENSOR,AIR BAG CONTROL UNIT,REWIRE ,DIAGNOS,PROGRAMME & RESET AIR BAG SYSTEM	New	<i>200</i> 320.00
Gross Labour Cost (\$\$)			2,850.00

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< END OF ESTIMATES >

Your NCD will be affected due to late reporting

SA1E227D0001 / ALAN'S UNITED AUTO PTE LTD
ENTRY DATE & TIME: 13/07/2022 10:49 (SGT)
SUBMITTED BY: KHONG SHI JIE
VERSION: 1 (13/07/2022 10:49 (SGT))

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 13/07/2022 10:49 (SGT)
Reported by Both
Date of Accident 09/07/2022 16:08 (SGT)
Exact Location of Accident 5058 Ang Mo Kio Ind Park 2, Singapore 569561
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLP9299U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LIM YEU FONG
NRIC No SXXXX218F
Email Address JACKYEUFONG@HOTMAIL.COM
Mobile Phone No (Phone) +65-81238305
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mazda
Model 6
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? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1998

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number 22-MU007437-R05

DRIVER

Name of Driver LIM YEU FONG
NRIC No SXXXX218F
Date Of Birth 06/01/1960
Occupation Indoor

