

ASS. REC. BY:

REF: AG2/ 22008747/K vy3

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: SNA 2183X

Policy No.

Claims No. C10016318/CD

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 Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

03

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

865 5789E

Yr Regn:

12, 16

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

Truck / Trailer or

Make:

Toy Harrier

c.c

1986

Colour:

h. Silver

A/C:

Insured / Std / NI / NA

Sp. Reading:

181455

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

Z Su 60

0088068

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 / R/Rim or

Tyre Size:

F: Hankook

235/55R18

R:

B.S

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Hankook

Front

R/Bal.

9

mm

Rear

R/Bal.

8

mm

L/Bal.

9

mm

L/Bal.

8

mm

D.O.A.

11/7/22

D.O.I.

29/7/2022

Survey held at

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

C/S Rn

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

Date / Time

Action / Instruction

10/8/22

Kenneth informed LS \$1550 (Red 747.40, 32%)

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 7/9/22-typist

Days Of Repair: 3

Resurvey No. of Trip: 1

Survey Fee:

Transportation

S + RS. \$

Fees

Others

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

TOTAL

Report Format: TP

Lump Sum / t.B.t: (\$ 1550)

Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761
TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg
GST:201001158E RCB NO:201001158E

SLJ5789E

TP/BD

M/S : AUTO & GENERAL INSURANCE (S) PTE LTD
190 CLEMENCEAU AVENUE
#03-01 SINGAPORE SHOPPING CENTRE
SINGAPORE 239924

TEL: 62212111

FAX: 67250853

ATTN: Motor Claim Department

Estimate No: ES2290752/WS

Date: 29 Jul 2022

Policy No: 5096444419-04

Veh Reg No: SLJ5789E

Make/Model: TOYOTA TOYOTA
HARRIER PREMIUM
2.0A

Chassis No: ZSU600088068

Engine No: 3ZRB871979

Reg. Date: 16/12/2016

WS Ref: TP/BD

Claim Type: Third Party

Accident Date: 11/07/2022

TP Veh Reg No: SNA2183X

Not Notaire
1/1 Rep &

Running After Repair
3 days

Estimate Repair Cost to Vehicle No :SLJ5789E

Description	U/Price	Quantity	List Price	Amount
			S\$	S\$
List Price				
1 FRONT BUMPER	663.90	1 PC	663.90	✓
2 FRONT BUMPER RH SIDE RETAINER	115.20	1 PC	SVC 115.20	? X
3 FRONT BUMPER CLIPS	3.50	6 PCS	21.00	✓
4 FRONT RH FENDER	863.10	1 PC	863.10	✓
			1,663.20	
		Less 25%	415.80	1,247.40
Labour				
5 REMOVE & REFIX FRT BUMPER ASSY, HEADLAMP, FRT RH FENDER, CHECK HEADLAMP AND REALIGN THE SAME	500.00	1 LA	500.00	400
6 PUTTY & RESPRAY ON FRT BUMPER, FRT RH FENDER	550.00	1 LA	550.00	400
			1,050.00	1,050.00

Total S\$ 2,297.40

Add GST @ 7% 160.82

Total Amount Payable S\$ 2,458.22

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:

For Cheng Hoe Motor Pte Ltd

AUTHORISED SIGNATURE

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 12/07/2022 19:21 (SGT)
Reported by Driver
Date of Accident 11/07/2022 12:55 (SGT)
Exact Location of Accident Singapore
Additional Location Information 17 SEMBAWANG CRES CONDO B1 CAR PARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLJ5789E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner MAGTECH GENERAL CONSTRUCTION & TRADING PTE LTD
Company Reg No 1XXXXX150M
Email Address magtechgeneral@gmail.com
Mobile Phone No (Phone) +65-96665935
Alternative Phone No (Office) +65-63657728

VEHICLE PARTICULARS

Manufacturer Toyota
Model HARRIER PREMIUM 2.0 A
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 1986

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number 5096444419-04

DRIVER

Name of Driver SEAH HOE CHOON
NRIC No SXXXX512H
Date Of Birth 01/11/1957
Occupation Indoor

Describe Circumstance of the Accident

NOTE: PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14 DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

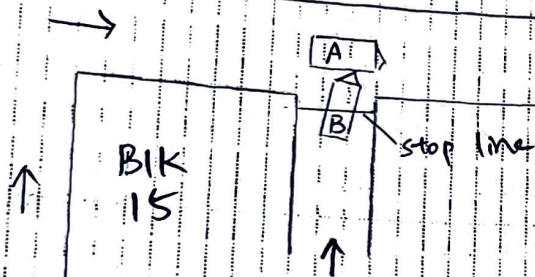
() Claim Own Policy

(☒) Claim Third party

() Reporting Only

Sketch Plan

17 Sembawang Cres Condo B1
Car Park



A: SLJ 5789 E
B: SNA 2183 X
Ho Beng Wee
(He Ming Wei)
S8101960 F
HP-90677533
(Not sure how many passengers)

It was a one way traffic and I was moving towards the exit when suddenly car B exit at my right and hit onto the right portion of my car. No one was injured.

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
(Name as in NRIC/ID card)

12/7/22