

ASS. REC. BY: Sam

REF:

CU4/AIS22006804/Rga3

0382

COE XPI/RY = 2025/01

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: PC 494C

at Workshop m/s LEXBULL AUTO

of 74, SUNGAI KAGAH ST 1

Insured: AIS

Policy No. _____

Claim No. _____

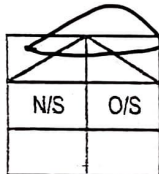
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: 25k

IDAC Accident Report Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

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

Lump Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: PC 494C Yr Regn: 2011 / JAN

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

Truck / Trailer or

Make: KINH LONG XMQ617K c.c. 6693

Colour: BLUE A/C: Insured / Std / NI / NA

Sp. Reading: 688248 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LABRIFSH4AB302297

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 275/70R22.5
R: 275/70R22.5

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

Front

R/Bal. 8 mm R/Bal. 8/8 mm

L/Bal. 8 mm L/Bal. 8/8 mm

D.O.A. 12/07/22 D.O.I. 19/07/22

Survey held at LEXBULL

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

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

Date/Time _____ Action / Instruction

REPAIR LIMIT - 16k

Date/Time, File Pass to?

☐ : Prell. Report

☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

) S + RS, SI

) Photos

) Others

Report Format : _____

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

TOTAL



LEXBUILD AUTO & TRADING PTE. LTD.

74 Sungei Kadut St 1, S 729374 Tel: 63623393 Fax: 63632262 Reg No: 200616456D Email : lexbuildauto@gmail.com

ALLIANZ INSURANCE SINGAPORE PTE. LTD.

Date: 18/07/2022

79 Robinson Road #09-01
Singapore 068897

Attn : Claim Dept

Dear Sir, Ma'am

RE: Estimate Repair Cost for Vehicle PC494C

Traffic Accident on 12.07.2022 Involving PC494C & GBC6282Z At PIE TO KJE(BKE)

S/N	Qty	Particular	Unit Price	Amount S\$
1	1	Front Windscreen <i>cm</i>	5,000.00	5,000.00
2	1	Front Windscreen Moulding <i>new</i>	450.00	450.00
3	2	Wiper Arm <i>X</i>	280.00	560.00
4	2	Wiper Blades <i>bl</i>	80.00	160.00
9	1	Wiper Linkage (Set) <i>X</i>	210.00	210.00
10	1	Wiper Linkage Support Bar <i>X</i>	150.00	150.00
11	1	Front Panel <i>cm</i>	2,200.00	2,200.00
12	1	Front Panel Structural Frame <i>3?</i>	1,800.00	1,800.00
13	1	Front Middle Panel <i>cm</i>	1,000.00	1,000.00
14	1	Front Bumper <i>cm</i>	2,600.00	2,600.00
15	1	Front RHS Headlamp <i>cm</i>	850.00	850.00
16	1	Rear View Mirror (RHS) <i>cm</i>	1,500.00	1,500.00
17	1	Logo 'KingLong' <i>X</i>	150.00	150.00
				16,630.00

Labour Charges :-

1)	To remove damaged front windscreen glass & refit new	800.00	800.00 300
2)	To check & fix front headlamp wiring	80.00	80.00 40
3)	To knock/straighten all necessary parts including repairing and changing of all damaged parts and align same.	1,000.00	800.00 600
4)	To putty and spray painting on front body panel, front bumper and all affected accident parts.	1,500.00	1,300.00 700

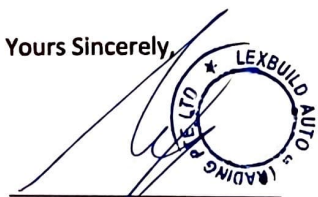
Total S\$: 19,610.00

GST 7% S\$: 1,372.70

Amount Due S\$: 20,982.70

Note : This estimate is based on visible damage. Repairs should pay hidden parts and/or labour charges required during works in progress.

Yours Sincerely,



Alvin Tey
Lexbuild Auto & Trading Pte Ltd

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:

RASUL
HP 90010068
6 days
L/S
19/07/22 @ 1425
Reay after repair

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 14:20 (SGT)
Reported by	Driver
Date of Accident	12/07/2022 12:42 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TO KJE (BKE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number - PC494C

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SUN-GEE TRAVEL PTE LTD
Company Reg No	1XXXXX038Z
Email Address	ALVIN.LEXBUILD AUTO@GMAIL.COM
Mobile Phone No	(Phone) +65-82420552
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	King Long
Model	XMQ6117K
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Bus
Transmission	Manual
CC	6693

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5114665481-02-000039

DRIVER

Name of Driver	MIAH AYAN
Passport No/FIN	GXXXX791Q
Date Of Birth	01/03/1989
Occupation	Outdoor

Valid Of Driving Pass	24/02/2022
Driving experience	5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84686764
Alt. Phone Number	-
Email Address	ALVIN.LEXBUILD AUTO@GMAIL.COM
Address	74 SUNGEI KADUT ST 1
Address complement	-
Postcode	729374
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Change/cross lane
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

REFER TO SKETCH PLAN 2.

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	GBC6282Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	PICHA IYAN KARUPPU IAH
Passport No/FIN	GXXXX470X

Accident Number
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

(Phone) +65-98993110

-
-
-
-
-
-



Describe Circumstances of the Accident

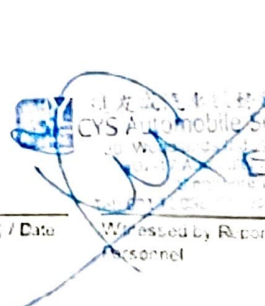

On the above written date & time I was driving vehicle PL4941 along PIE to KJE(BKE) at lane 3. All of a sudden, a lorry GSC6282 at lane 2 hit the metal on the road and lose control come into my lane 3. I immediately applied brakes however, it did not stop in time as a result, my vehicle front collided into the rear of the lorry.

Declaration

I/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 Officer / Personnel

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	038Z
Vehicle Details	
Vehicle No.:	PC494C
Vehicle to be Exported:	No
Intended Deregistration Date:	20 Jul 2022
Vehicle Make:	KING LONG
Vehicle Model:	XMQ6117K
Primary Colour:	Multicolor
Manufacturing Year:	2010
Engine No.:	ISBE428521850322
Chassis No.:	LA6R1FSH4AB302297
Maximum Power Output:	-
Open Market Value:	\$105,243.00
Original Registration Date:	20 Jan 2011
First Registration Date:	20 Jan 2011
Transfer Count:	0
Actual ARF Paid:	\$5,263.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Oct 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$12,728.00
COE Rebate Amount:	\$8,348.00
Total Rebate Amount:	\$8,348.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	