

ASS. REC. BY:

REF: 072 / 22007245/KV

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s MBN

of 77211

Insured: _____

Policy No. _____

Claims No. _____

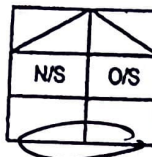
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 3-6 days Res.: Yes or No

Lum Sum: 1.3.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SMN 7560B Yr Regn: 08, 19

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

Truck / Trailer or Wagon

Make: Toy Ponto c.c. 1496

Colour: M. Blue A/C: Insured / Std / NI / NA

Sp. Reading: 86568 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: NSP170 7200866

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/60R15

R: _____

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

TOYO / YOKO or Tabikad

Front

R/Bal. 4 mm

L/Bal. 4 mm

D.O.A. 28/7/22

Survey held at

Rear

R/Bal. 4 mm

L/Bal. 4 mm

D.O.I. 1/8/2022

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

1 Tyre jammed

Date/Time, File Pass to?

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S - RS. \$

Fines

Others

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech Invs (\$

☐ : Weekend (\$

Report Format :

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

TOTAL

MBM WHEELPOWER PTE LTD

Your Ref: CB8592J
Our Ref: SMN7560B

To: CHINA TAIPING

CC

Fax

*NOT Authorized
Penny Bepain
5-6 day*

Date: 28/7/2022
From: Danny
Fax: 64525333
Contact: 93288668
Make / Model: TOYOTA SIENTA 1.5G
Chassis No.: NSP1707200866
Engine No.: 2NR8924823
Year of Make: 2019
Accident Date: 28 July 2022



ESTIMATE FOR VEHICLE NO. : SMN7560B

| DESCRIPTION | QTY | | List Price | |
|-------------------------------|-----|----|-------------------------|---|
| REAR WINDSCREEN WITH MOULDING | 1 | \$ | <i>Md only</i> 1,279.50 | ✓ |
| TAIL GATE | 1 | \$ | <i>B</i> 1,445.70 | ✓ |
| TAIL GATE WEATHERSTRIP | 1 | \$ | 372.50 | 7 |
| TAIL GATE HINGE LH | 1 | \$ | <i>A</i> 75.00 | X |
| TAIL GATE HINGE RH | 1 | \$ | <i>R</i> 75.00 | X |
| TAIL GATE ABSORBER LH | 1 | \$ | <i>Sm</i> 262.00 | X |
| TAIL GATE ABSORBER RH | 1 | \$ | <i>Sm</i> 262.00 | X |
| TAIL GATE LOCK | 1 | \$ | <i>Ja</i> 480.00 | ✓ |
| TAIL GATE STRIKER | 1 | \$ | 45.00 | 7 |
| TAIL GATE LAMP LH | 1 | \$ | <i>cm</i> 395.70 | ✓ |
| TAIL GATE LAMP RH | 1 | \$ | <i>cm</i> 395.70 | ✓ |
| TAIL LAMP LH | 1 | \$ | <i>Sm</i> 497.50 | X |
| TAIL LAMP RH | 1 | \$ | <i>Sm</i> 497.50 | ✓ |
| REAR BUMPER | 1 | \$ | 850.50 | 7 |
| REAR BUMPER RH SIDE BRACKET | 1 | \$ | <i>Sm</i> 100.40 | X |
| REAR BUMPER LH SIDE BRACKET | 1 | \$ | <i>Sm</i> 100.40 | X |
| REAR BUMPER RH SIDE RETAINER | 1 | \$ | <i>Sm</i> 89.00 | X |
| REAR BUMPER LH SIDE RETAINER | 1 | \$ | <i>Sm</i> 89.00 | X |
| REAR BUMPER EXTENTION CENTER | 1 | \$ | <i>add bn</i> 285.00 | ✓ |
| REAR BUMPER EXTENTION RH | 1 | \$ | <i>Sm</i> 196.00 | X |
| REAR BUMPER EXTENTION LH | 1 | \$ | <i>Sm</i> 196.00 | X |
| BUMPER CLIPS | 10 | \$ | 60.00 | 7 |
| END PANEL | 1 | \$ | 488.70 | ? |
| END PANEL TOP GARNISH | 1 | \$ | 175.00 | 7 |
| Total: | | \$ | 8,713.10 | |
| LESS 25% | | \$ | (2,178.28) | |
| Parts Total: | | \$ | 6,534.83 | |

S/NETT:

| | | | |
|----------------------------|----|-------|------|
| WINDSCREEN SEALANT | \$ | 80.00 | 4000 |
| REAR NUMBER PLATE & HOLDER | \$ | 50.00 | X |
| BODY SEALANT | \$ | 80.00 | 7 |

LABOUR

| | | | |
|--|----|-----------|------|
| TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS. INCLUDING TO KNOCK-OUT, WELD & STRAIGHTEN ON THE AFFECTED PARTS. | \$ | 1,200.00 | 7 |
| TO RESET ENGINE WARNING LIGHT (ABS, SRS, ECU MEMORY & ETC) | \$ | 300.00 | 7 |
| TO APPLY ANTI RUST COATING | \$ | 150.00 | 300 |
| TO REMOVE & REPLACE REAR WINDSCREEN | \$ | 150.00 | 1200 |
| TO REMOVE, REFIT & UPHOLSTERY TO FACILITATE REPAIRS | \$ | 150.00 | 600 |
| TO REMOVE & REPLACE BUMPER SENSORS | \$ | 60.00 | 300 |
| TO CHECK & RECONNECT ALL NECESSARY WIRING | \$ | 80.00 | 200 |
| TO SPRAY PAINT ON THE AFFECTED AREAS | \$ | 1,200.00 | 7800 |
| Total: | \$ | 10,034.83 | |
| 7% GST: | \$ | 702.44 | |
| Grand Total: | \$ | 10,737.26 | |

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 Actual 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 | 28/07/2022 13:26 (SGT) |
| Reported by | Both |
| Date of Accident | 28/07/2022 06:45 (SGT) |
| Exact Location of Accident | Bedok North Ave 1, Singapore |
| Additional Location Information | - |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMN7560B

INSURED/POLICYHOLDER

| | |
|--------------------------|------------------------------|
| Is company? | No |
| Name Of Registered Owner | TANG SIAK WANG (CHEN XIWANG) |
| NRIC No | SXXXX772H |
| Email Address | anthony.tang2013@gmail.com |
| Mobile Phone No | (Phone) +65-93364796 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Toyota |
| Model | Sienta |
| 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 | 1500 |

INSURANCE COMPANY

| | |
|-----------------------------------|--|
| Name of Insurance Company | NTUC Income Insurance Co-operative Ltd |
| Policy Number / Cover Note Number | 5112049327-02 |

DRIVER


| | |
|----------------|------------------------------|
| Name of Driver | TANG SIAK WANG (CHEN XIWANG) |
| NRIC No | SXXXX772H |
| Date Of Birth | 20/11/1982 |
| Occupation | Indoor |

SKETCH PLAN

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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.
 - (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

A: SMN 7560 B
B: CB 8592 J
C: CB 181A T



BEDOK NORTH AVE 2