

ASS. REC. BY:

REF: 0721

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:

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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

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:

SLC 9421B

Yr Regn:

05.16

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

Truck / Trailer or

Make:

Honda Vezel

c.c.

1496

Colour:

M. Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

121306

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

R41

1117506

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / SRIM / STD A/Rim or

Tyre Size:

F:

225/55R18

R:

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

TOYO / YOKO or

Rotalla

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

26/7/22

D.O.I.

29/7/2022

Survey held at

Des. of Damages: Frt / 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?

☐

: Prel. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S - RS - SI

Fees

Others

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

TOTAL

Report Format :

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

REPAIR DETAILS

Reference

Part Source: MRM-SG

Parts: M1-SUV

Labour: Repairer's

Print Code: (Unsubmitted, no print-code for SLC9421B)

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 *.

Version: 1.0 (Last Synchronised: 29 Jul 2022)

HONDA VEZEL 1.5 1.5X CVT (A) (Catalogue:Merimen Singapore 1.0)

(Price-denominated Standard List)

SLC9421 B

TP/CHINA

Estimates on Parts

No. Qty Part No. Particulars

%Disc %Depr Amount

1	1	*1 PC REAR BUMPER	Bu	0.00	0.00	*180.00 F	✓
2	1	*1 PC REAR BUMPER LOWER UNDER COVER	Bu	0.00	0.00	*75.00 F	X
3	1	*6 PCS REAR BUMPER LOWER UNDER COVER CLIPS @2/PC		0.00	0.00	*12.00 F	X
4	1	*1 PC REAR BUMPER LH SIDE PAD	Bu	0.00	0.00	*68.00 F	✓
5	1	*1 PC REAR BUMPER LH RETAINER		0.00	0.00	*12.00 F	✓
6	1	*1 PC REAR BUMPER LH REFLECTOR		0.00	0.00	*40.00 F	7
7	1	*1 PC REAR BUMPER RH REFLECTOR		0.00	0.00	*40.00 F	X
8	1	*1 PC REAR RH FENDER WHEEL ARCH TRIM	Bu	0.00	0.00	*55.00 F	X
9	1	*1 PC TAILGATE	Bu	0.00	0.00	*570.00 F	✓
10	1	*2 PCS TAILGATE DAMPER STRUT @90/PC		0.00	0.00	*180.00 F	7
11	1	*1 PC TAILGATE EMBLEM (VEZEL)	Bu	0.00	0.00	*35.00 F	✓
12	1	*1 PC TAILGATE OUTER GARNISH	CM	0.00	0.00	*125.00 F	✓
13	1	*1 PC TAILGATE OUTER GARNISH EMBLEM (H)	Bu	0.00	0.00	*15.00 F	✓
14	1	*1 PC TAILGATE REFLECTOR LH	CM	0.00	0.00	*138.00 F	✓
15	1	*1 PC TAILGATE REFLECTOR RH	CM	0.00	0.00	*138.00 F	✓
16	1	*1 PC TAILGATE INNER TRIM BOARD	CM	0.00	0.00	*105.00 F	✓
17	1	*1 PC TAILGATE INNER TRIM BOARD LH UPPER		0.00	0.00	*25.00 F	7
18	1	*1 PC TAILGATE INNER TRIM BOARD RH UPPER		0.00	0.00	*25.00 F	7
19	1	*1 PC TAILGATE INNER PULL POCKET		0.00	0.00	*20.00 F	7
20	1	*1 PC TAILGATE INNER LOCK		0.00	0.00	*75.00 F	✓
21	1	*1 PC LH TAILLAMP	Tu	0.00	0.00	*270.00 F	✓
22	1	*1 PC RH TAILLAMP	CM	0.00	0.00	*270.00 F	7
23	1	*1 PC 3RD BRAKE LAMP		0.00	0.00	*130.00 F	7
24	1	*1 PC REAR NUMBER PLATE LAMP		0.00	0.00	*20.00 F	7
25	1	*1 PC SPARE TYRE PANEL		0.00	0.00	*490.00 F	7
26	1	*1 PC SPARE TYRE TOP COVER BOARD		0.00	0.00	*155.00 F	7
27	1	*1 PC REAR FENDER INNER TRIM LH		0.00	0.00	*185.00 F	7
28	1	*1 PC REAR FENDER INNER TRIM RH		0.00	0.00	*185.00 F	7
29	1	*10 PCS REAR FENDER INNER TRIM CLIPS @2/PC		0.00	0.00	*20.00 F	7
30	1	*1 PC REAR END PANEL		0.00	0.00	*290.00 F	7
31	1	*1 PC REAR END PANEL INNER TRIM		0.00	0.00	*55.00 F	7
32	1	*1 PC REAR WIPER ARM		0.00	0.00	*45.00 F	✓
33	1	*1 PC REAR WIPER ARM COVER	mi	0.00	0.00	*8.00 F	✓
34	1	*1 PC REAR WIPER BLADE	mi	0.00	0.00	*42.00 F	✓
35	1	*1 PC REAR WIPER MOTOR	mi	0.00	0.00	*115.00 F	✓
36	1	*1 PC REAR EXHAUST MUFFLER	Bu	0.00	0.00	*370.00 F	7
37	1	*1 PC REAR EXHAUST MOUNTING		0.00	0.00	*13.00 F	X
38	1	*1 PC REAR TOOL BOX TRAY	Bu	0.00	0.00	*105.00 F	7
39	1	*1 PC REAR WINDSCREEN GLASS	shorter	0.00	0.00	*450.00 F	✓
40	1	*1 SET REAR WINDSCREEN GLASS MOULDING	Bu	0.00	0.00	*60.00 F	✓

F=Franchise part.

Total Parts (\$\$)

5,211.00

Report was unsubmitted during this print-out.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

No Qty Particulars

Amount

Miscellaneous Items

1	1	1 PC REAR BUMPER LOWER SKIRT EXTENSION				
2	1	1 PC REAR CAMERA	mi		250.00	✓
3	1	1 PC REAR FLOOR RUBBER TRAY			320.00	7
4	1	1 PC REAR NUMBER PLATE			220.00	7
5	1	1 PC REAR WINDSCREEN GLASS SEALANT	Bu		35.00	✓
			Bu		40.00	✓

No Qty Particulars

Amount

6 1 1 SET REVERSE CAMERA
 7 1 1 SET REVERSE SENSOR

350.00

200.00

Sub Total (\$\$)

1,415.00

Estimates on Labour

No Particulars

Lab.Type

Amount

Labour Items

1	TOWING		
2	REMOVE & REFIX REAR WINDSCREEN GLASS	New	50.00
3	REMOVE & REFIX SEAT ASSY,CARPET,GARNISH, TOP ROOF LINING AND WASH CUSHION	New	120.00
4	REMOVE & REFIX REAR BUMPER ASSY, TAILGATE, REAR WIPER ASSY, LOCK ASSY, TOP SPOILER, LOWER SKIRT, TO CUT, WELD & RENEW REAR END PANEL, REAR COMPARTMENT, TO STRAIGHTEN, KNOCK & REPAIR REAR BOTH CHASSISS, REAR BOTH FENDERS AND REALIGN THE SAME	New	120.00
		New	1,300.00
5	REMOVE & REFIX REAR EXHAUST AND CHECK SYSTEM	New	60.00
6	PUTTY & RESPRAY ON REAR BUMPER, REAR PANEL, REAR BOTH FENDERS, TAILGATE, REAR COMPARTMENT	New	1,300.00
7	REMOVE & REFIX REAR SENSORS, REVERSE CAMERA, CCTV CAMERA, SMART KEY AND RESET SYSTEM	New	50.00
8	RUSTPROOFING	New	90.00
Gross Labour Cost (\$\$)			3,090.00

Report was unsubmitted during this print-out.
 Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

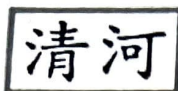
LKK Auto Consultants hence notify
 the Repairer of the following:

- 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:

**CHENG HOE MOTOR PTE LTD**

Blk 1019, Yishun Industrial Park A, #01-374/382, Singapore 768761

Tel : 67556142 Fax : 67557719

Email: chmotor@singnet.com.sg

TP INSURER:

China Taiping Insurance (Singapore) Pte. Ltd. (HQ)

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	TP/CHINA(YN8563U)
Policy No:		Date of Loss:	26/07/2022
Vehicle Reg. No.:	SLC9421B	Driveable?	
Party At Fault:	UNKNOWN		
Driver (TP):	LOW POH NYUK	Driver (Insured):	CHUA PEI XIN
Make/Model:	HONDA VEZEL, 1.5 1.5X CVT (A)	Vehicle Reg. Date:	30/05/2016
Vehicle Colour:	BLUE	Chassis No:	RU11117505
Engine No:	L15B4037508		
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	0		
Remarks:	VEHICLE CURRENTLY LYING AT YISHUN WORKSHOP.		
Present Location:	CHENG HOE MOTOR PTE LTD (YISHUN)		

*NOT WITHIN
11 Days &
Resuming After Rain
6-8 days*

COST OF CLAIMS

	Amount
Parts	5,211.00
Miscellaneous Items	1,415.00
Labour	3,090.00
Paintwork Labour	0.00
Flowing	0.00
Gross Total (\$\$)	9,716.00
+ GST 7.00% (\$\$)	680.12
Nett Amount (\$\$)	10,396.12

s claim is handled by: SHARON CHIONG BENG CHOON

Generated using Merlmen e-Claims Internet Estimation & Adjusting System

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 27/07/2022 18:16 (SGT)
Reported by Both
Date of Accident 26/07/2022 09:15 (SGT)
Exact Location of Accident Singapore
Additional Location Information MIDDLE ROAD /BENCOOLEN STREET
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLC9421B

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner YEONG KIM WENG
NRIC No SXXXX226J
Email Address sandylow469@gmail.com
Mobile Phone No (Phone) +65-96411979
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Honda
Model Vezel
Variant -
Exact purpose for which vehicle was being used at time of accident Private hire
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 5122748873-01

DRIVER

Name of Driver LOW POH NYUK
NRIC No SXXXX595F
Date Of Birth 02/10/1966
Occupation Outdoor

Date Of Driving Pass 08/07/1989
 Driving experience 33 YEARS
 Gender Female
 Mobile Number (Phone) +65-90401228
 Alt. Phone Number -
 Email Address sandylow469@gmail.com
 Address BLK 476A YISHUN ST. 44
 Address complement 09-30
 Postcode 761476
 Is the driver the policyholder? No
 If No, Relationship of the Driver with the Insured Spouse
 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 - Head to Rear
 Weather Conditions DRIZZLING
 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? Yes
 Was any injured conveyed to hospital by ambulance? Yes
 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? Yes
 Police Station Name Woodlands Division Headquarters
 Police Station Phone No (Phone) +65-18004660000
 Police Station Address 1 Woodlands St 12 Singapore 738622
 Was notice of intended Prosecution given? No
 yes, against whom? -

CIRCUMSTANCES OF ACCIDENT

ATTACH POLICE REPORT ATTACH

ATTACHMENT(S)

accident photos available for attachment? Yes
 were there any video captured by Car Camera? Yes
 Reasons for not uploading a video of the accident SD CARD WITH TRAFFIC POLICE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YN8563U
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -

Vehicle Colour	Yellow
Vehicle Category	Commercial vehicle
Name of Driver	CHUA PEI XIN
NRIC No	SXXXX502D
Contact Number	(Phone) +65-94516845
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	FRONT
Of Passenger (Including Driver)	FRONT
	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LOW POH NYUK
Gender	Female
NRIC No	(Phone) +65-90401228
Address	-
Address Complement	-
Postcode	-
Approximate Age Years Old	-
Injuries Sustained	NECK/ CHEST/ HEAD
Vehicle in which person was in?	SLC9421B
Were seat belts worn?	Yes
Was this injured person conveyed to hospital by ambulance?	Yes

MT/118 A28

Describe Circumstance of the Accident

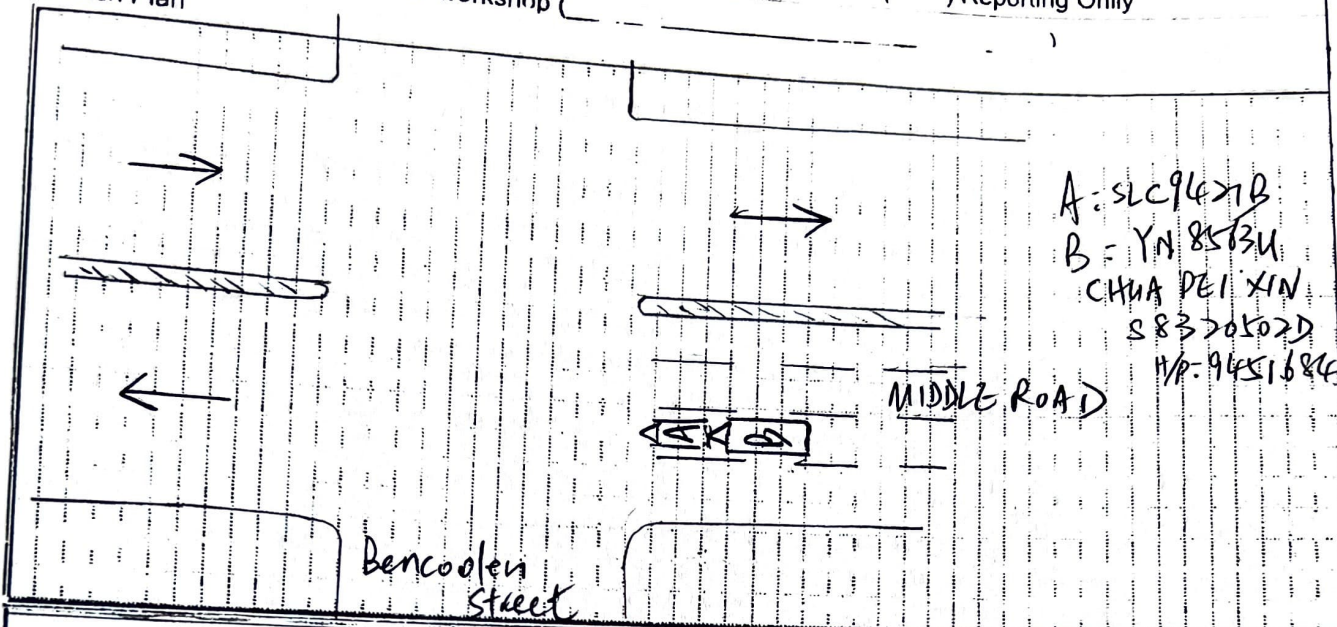
** NOTE PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

() Claim Own Policy

(☒) Claim Third party

() Reporting Only

Sketch Plan



Pls refer P12a Report

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

27/7/22

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

YS



POLICE REPORT (NP299)

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000



1 of 2

Report No. L/20220726/7045

Date/Time Report Made 26/07/2022 19:23		Vide Report No.		Station Diary No.	
Name Of Informant LOW POH NYUK		Address 476A YISHUN STREET 44 #09-30 SINGAPORE 761476			
ID Type / ID No. NRIC NO / S1752595F		Contact No. Home/Office: Mobile: 90401228			
Nationality SINGAPORE CITIZEN		Email Address SANDYLOW469@GMAIL.COM			
Occupation Customer service officer/clerk		Sex Female	Age 55	Date of Birth 02/10/1966	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 26/07/2022 09:10 - 26/07/2022 09:15		Location Of Incident 476A YISHUN STREET 44 #09-30 SINGAPORE 761476			

Brief details.

On 26 July 2022, at about 9.15am, I was driving my vehicle bearing vehicle registration number SLC9421B at MIDDLE ROAD. As I was approaching the traffic light, it turned from amber to red, I then came to a complete stop.

While I was waiting for the traffic light to turn green, suddenly a vehicle came from behind and slammed into the rear of my car. I felt a great impact and I was thrown forward despite wearing my seat belt. I hit my head and I lost consciousness. After I regain consciousness, I felt extreme pain in my neck, chest and my head felt very heavy. I was then conveyed to Raffles Hospital and currently warded in Raffles Hospital ICU.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 26/07/2022 19:23
Officer In-Charge Of Case:	Classification Of Case: