

ASS. REC. BY:

REF:

ALS/ 22 00 7569/Kp

Kennerth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s NGS

Insured: _____

Policy No. _____

Claims No. _____

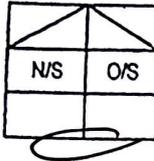
Sum Insured: _____ Excess: _____

(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: 05 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

10/24

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: STU 2486P Yr Regn: 11, 09

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

Truck / Traller or

Make: Toy Vios E c.c. 1497

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

Sp. Reading: 315375 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR05314Y9305140070

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: Drive

R: Wetlake 185/60R15

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 0 mm R/Bal. 5 mm

L/Bal. 0 mm L/Bal. 5 mm

D.O.A. 29/7/22 D.O.I. 10/8/2022

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 Action / Instruction

Date/Time, File Pass to?

: Prell. Report

: Final Report

)

Date/Time, File Return to?

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech Invs (\$ _____)

: Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

\$ + RS. \$ _____

Fixtcs _____

Others _____

Report Format :

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

TOTAL

NGS MOTORSPORT PTE LTD

Blk 10 Ang Mo Kio Industrial Park 2A #02-01 AMK AutoPoint Singapore 568047
 Tel : 9695 5547 Fax: 6481 5727 e-mail : evelymngstrading@gmail.com
 Reg No: 201812604N

24/06/2022

Allianz Ins Singapore Pte Ltd
 79 Robinson Road
 #09-01
 Singapore 068897
Attn: Motor Claims Dept

*Not Authored
 11 Sep 20
 Resumy After Paint
 5 days*

RE: Accident On 29/07/2022 13:50 Hrs
 Along Before KPE (TPE), Tunnel, Involving SJU2486P/SLH6204E
 Claims against SLH6204E

We submit herewith our direct claim estimate quotation as follow:-
 Replacement parts - Toyota Vios

1	Rear Boot lid		\$ <i>B</i> 697.50	✓
2	Rear Boot Hinge RH/LH	\$ 49.70	\$ <i>R</i> 99.40	X
1	Rear Boot Inner Lock		\$ <i>nu</i> 146.80	✓
1	Rear Bumper		\$ <i>Bu</i> 534.40	✓
2	Rear Bumper Retainer upp RH/LH	<i>MSD11</i> \$ 48.70	\$ 97.40	LT
2	Rear Bumper Retainer Low RH/LH	\$ 105.50	\$ <i>bu</i> 211.00	X
2	Taillamp RH/LH	<i>MSOM</i> \$ 276.20	\$ 552.40	LT
2	Gasket, Taillamp RH/LH	<i>MSM</i> \$ 39.46	\$ 78.92	LT
4	Clips, Taillamp RH/LH	\$ 8.50	\$ <i>nu</i> 34.00	X
1	Weatherstrip, Rr Trunk		\$ <i>bu</i> 142.70	<i>50%sa</i>
1	luggage Compartment Panel		\$ <i>R</i> 639.50	X
1	Luggage Compartment Board		\$ <i>bu</i> 155.90	X
1	End panel		\$ <i>B</i> 592.20	✓
1	Garnish, End panel		\$ <i>CM</i> 226.83	✓
1	Emblem 'E'		\$ <i>nu</i> 38.40	✓
1	Emblem "VIOS"		\$ <i>nu</i> 54.80	✓
			\$ 4,302.15	
		Less 25%	\$ (1,075.54)	
			\$ 3,226.61	
14	Clips, Trunk Trim	\$ 5.00	\$ <i>nu</i> 70.00	X
2	Frnt & Rr RH Sport Rim	<i>bu</i> \$ 580.00	\$ 1,160.00	X
1	Reverse Sensor	<i>S.Net</i> <i>S.Net</i>	<i>shom</i> \$ 280.00	<i>200%sa</i>

Vehicle No : SJU2486P

To remove all damaged part with all necessary component/attachment Straighten chassis member, repair/reshape dented body panel.. Replace damaged part. Refit into position.	\$ 1,000.00	600/
To transfer Rear boot lid mechanism	\$ 150.00	50/
To spray painting	\$ 1,000.00	600/
Check wiring & light function	\$ 50.00	20/
	<u>\$ 6,936.61</u>	

Any other parts which necessitate repair or renewal will incur additional charged.
Please contact our Ms Evelyn @HP96955547 to arrange for survey. Thank you

Yours faithfully.

NGS MOTORSPORT PTE LTD
EVELYN NG

**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 29/07/2022 16:24 (SGT)
Reported by Driver
Date of Accident 29/07/2022 13:50 (SGT)
Exact Location of Accident Singapore
Additional Location Information BEFORE KPE(TPE) TUNNEL
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJU2486P
INSURED/POLICYHOLDER
Is company? Yes
Name Of Registered Owner ABOI CAR RENTAL
Company Reg No 53378618E
Email Address ABOICARACCIDENT@GMAIL.COM
Mobile Phone No (Phone) +65-94526618
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Vios
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 hire
Transmission Auto
CC 1500

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number 5113388789-02

DRIVER

Name of Driver LUO CAIJIE
NRIC No S8934397F
Date Of Birth 29/09/1989
Occupation Indoor

INCOME MOTOR SERVICE CENTRE

Report No: MT/ _____

D.O.A: **29/07/2022**
Time: **13:50** hrs

Report Date & Start Time: 29/07/2022 / 16:08

Vehicle No: SJU2486P Reporting Type: TP

IMPORTANT NOTICE

SKETCH PLAN

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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

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.
- (collectively the "Purposes")

(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.



29/07/22 / 16:08

Policyholder's Signature / Date & Time

29/07/22 / 16:08

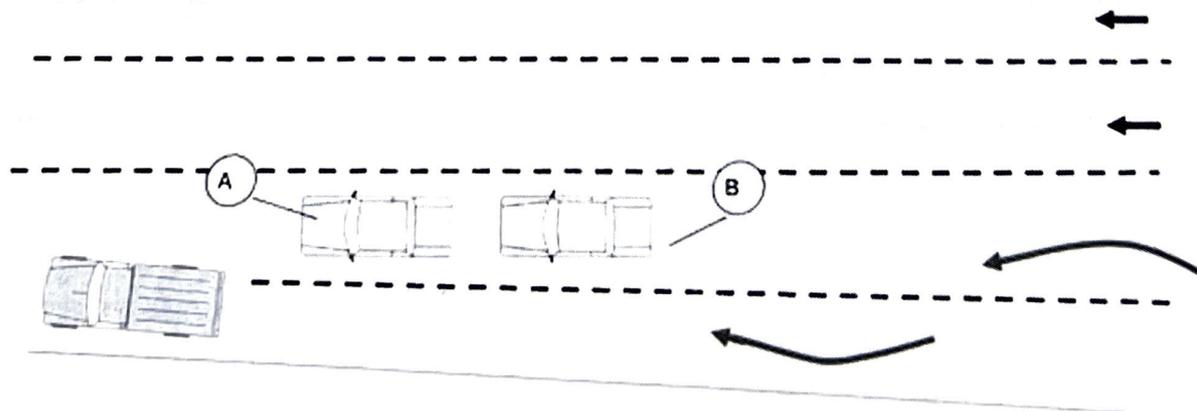
Driver's Signature (If driver is not the policyholder) / Date & Time

Chen JunLiang

Witnessed by Reporting Centre Personnel

(Name as in NRIC/ID card)

Sketch Plan



Vehicle A: SJU2486P

Vehicle B: SLH6204E