

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.

N/S	O/S

Bel. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 6 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SKV 9856S Yr Regn: 13/10/15
 Type: ☒ M. Car / ☐ M. Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /
 Truck / Trailer or _____
 Make: Volkswagen Golf c.c. 1197
 Colour: Silver A/C: ☒ Insured / ☐ Std / ☐ NI / ☐ NA
 Sp. Reading: 159230 T/Radio: ☒ Insured / ☐ Std / ☐ NI / ☐ NA
 Eng/No: _____
 C/No: WVWZZZAU 2FW 353899
 Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ Burnt
 Steering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or
 Brake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or
 Modl: ☒ NII / ☐ S/Rim / ☐ STD A/Rim or
 Tyre Size: F: 205/55R16
 R: 11

BS / ☒ DUN / ☐ EXNOVA / ☐ GY / ☐ FS / ☐ LIZA / ☐ MIC / ☐ OHTSU / ☐ PIR / ☐ SUMI /
 TOYO / YOKO or _____

Front: 5 mm R/Bal. 6 mm
 L/Bal. 5 mm
 D.O.A. 7/8/22 D.O.I. 11/8/22
 Survey held at Volkswagen

Des. of Damages: ☒ Frt / ☒ Rear / ☐ O/S / ☐ N/S / ☐ U/C / ☐ Rooftop orFront RH

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

Date / Time	Action / Instruction
	<u>MV-45K</u>
	<u>PV-22,972</u>
	<u>MV-22,078</u>
	Steve finalised final fig \$8362.41, 6 days. (Red \$4980.52, 37%)

Date/Time, File Pass to?

☐ : Prel. Report
☐ : Final Report

Date/Time, File Return to?

2)

Report Format: MER-TPLump Sum / I.E.F. (\$) 8362.41Days Of Repair: 6Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech, Invs (\$)
☐ : Weekend (\$)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

VOLKSWAGEN CENTRE SINGAPORE

247 Alexandra Road
Singapore 159934
Biz. Reg. No.: 199101494Z
GST No.: M200985052

Steve (LKK)
11/8/22, 11.30am

W P/P
L BL 4
6 Lys



Quotation
Non binding - Preview

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Company
CHINA TAIPING INSURANCE (S) PL
3 ANSON ROAD
#18-00 SPRINGLEAF TOWER
Singapore 079909

Customer Details:
Mr
LAI
MUK FAN
143 RIVERVALE DRIVE
#11-555
Singapore 540143

Document no.
Document date 08-08-2022
Customer no. 5211001170
Customer GST-ID 200208384E
Dealer 30001
Job order number 2022022865/ 1
Job order date 08-08-2022
Service Advisor SHU SHI TANG

License plate	Model code	First registration	VIN	Model	Mileage
SKV9856S	5G12DZ	13-10-2015	WWWZZZAUZFW353899	Golf 1.2 TLBMT 77 TSI D7F	155,057

Repair limit: \$

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
9801B004	B&P CHECK SHORT CIRCUIT / HARNESS REPAIR				#1	280.00	299.60
9801B005	B&P DIAGNOSIS AND PROGRAMMING				#1	480.00	513.60
5G0823359A	Gas-Filled Strut X	1	pcs.	140.57	#1	140.57	150.41
	BONNET ABSORBER						
5G0807217BNGRU	Cover For Bumper Primed / BR	1	pcs.	1,375.68	#1	1,375.68	1,471.98
5G0807049A	Guide Piece	1	pcs.	26.71	#1	26.71	28.58
	LHS BUMPER SIDE BRACKET X						
5G0807050A	Guide Piece	1	pcs.	26.71	#1	26.71	28.58
	RHS BUMPER SIDE BRACKET / BR						
5G0807724D	Support Part	1	pcs.	59.69	#1	59.69	63.87
	RHS BUMPER INNER BRACKET ?						
5G0805705G	Guide	1	pcs.	67.00	#1	67.00	71.69
	BUMPER CTR BRACKET ?						
5G0807248F	Foam Insert ?	1	pcs.	53.12	#1	53.12	56.84
5G0807109AL	Impact Beam ?	1	pcs.	770.01	#1	770.01	823.91
	REINFORCEMENT						
5G0853651G ZLL	Radiator Grille Satin Bla ? CUT	1	pcs.	581.98	#1	581.98	622.72
5G0853677 9B9	Cooling Air Grill Satin B	1	pcs.	174.25	#1	174.25	186.45
	BUMPER CTR LOWER GRILLE ?						
5G0853666 9B9	Cooling Air Grill Satin B	1	pcs.	106.57	#1	106.57	114.03
	RHS FOG LAMP GRILLE (LOWER) ?						
5G0853212D 9B9	Cover Part For Bumper Sat	1	pcs.	32.27	#1	32.27	34.53
	RHS FOG LAMP GRILLE (UPPER) ?						
5G2941006E	Twin Halogen Headlamps / CUT	1	pcs.	781.06	#1	781.06	835.73
6R0973735	Flat Contact Housing ?	1	pcs.	22.76	#1	22.76	24.35
	H/LAMP WIRE HOUSING						
5G0821106A	Fender / DD	1	pcs.	655.47	#1	655.47	701.35
	RH						
5G0821136B	Cross Support ? - MC	1	pcs.	36.54	#1	36.54	39.10
	RHS FENDER BRACKET						
N 90817302	Rivitted Cap Nut / MC ?	2	pcs.	2.64	#1	5.28	5.65
5G0805970N	Wheelhouse Liner	1	pcs.	199.41	#1	199.41	213.37
	RHS FENDER LINER (UPPER) ?						
5G0805912L	Wheelhouse Liner	1	pcs.	107.85	#1	107.85	115.40
	RHS FENDER LINER (LOWER)						
	LABOUR	4 2	pcs.	840.00	#1	3,360.00	3,595.20
	SPRAY PAINT	5 23	pcs.	800.00	#1	4,000.00	4,280.00
	CHINA TAIPING DIRECT SETTLEMENT						
	DOA: 7/8/2022						
	TP VEH: CB8389E						
	SURVEY BY:						

Quotation valid till 15-08-2022

Quotation
 Non binding - Preview

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 Service Advisor SHU SHI TANG

License plate	Model code	First registration	VIN	Model	Mileage
SKV9856S	5G12DZ	13-10-2015	WVWZZZAUZFW353899	Golf 1.2 TLBMT 77 TSI D7F	155,057

Tax Code	Labour	Material	GST %	GST	Total amount excl. GST	Total amount incl. GST
#1	760.00	12,582.93	7%	934.01	13,342.93	14,276.94
Total	760.00	12,582.93		934.01	13,342.93	14,276.94

Customer

Service Advisor

—VISIT OUR WEBSITE: aftersales.vw.com.sg (for online service appointments) and volkswagen.com.sg and www.skoda.com.sg (for additional services, products and promotions).—

All invoices are denominated in SGD, unless otherwise stated.

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	08/08/2022 15:30 (SGT)
Reported by	Both
Date of Accident	07/08/2022 15:30 (SGT)
Exact Location of Accident	Near 702 Bedok Reservoir Rd, Singapore 470702
Additional Location Information	OPEN SPACE CARPARK OF BLK 702 BEDOK RESERVOIR
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKV9856S

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LAI MUK FAN
NRIC No	S0080594G
Email Address	JORDANLAI0807@GMAIL.COM
Mobile Phone No	(Phone) +65-88762236
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Golf
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1197

INSURANCE COMPANY

Name of Insurance Company	Etiqa Insurance Pte Ltd
Policy Number / Cover Note Number	MA015763

DRIVER

Name of Driver	LAI MUK FAN
NRIC No	S0080594G
Date Of Birth	08/07/1951
Occupation	Outdoor

Age Of Driving Pass	07/02/1973
Driving experience	49 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88762236
Alt. Phone Number	-
Email Address	JORDANLAI0807@GMAIL.COM
Address	BLK 143 RIVERVALE DRIVE
Address complement	#11-555
Postcode	540143
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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

ON THE STATED DATE AND TIME, I PARK MY CAR SKV9856S AT BLK 702 BEDOK RESERVOIR CARPARK, THIS SCHOOL BUS VEHICLE B (CB8389E) EXIT THE PARKING LOT (133) AND HIT MY CAR RIGHT HAND FRONT PORTION. DRIVER WAITED FOR ME AND TOLD ME HE HIT MY CAR.

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	CB8389E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Driver	SIMON LIM PENG HUAT
o	S1223057E
ct Number	(Phone) +65-81133513
ess	-
ress complement	-
stcode	-
nsurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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 willful 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

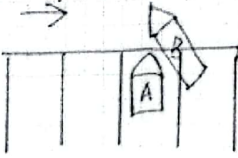
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

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

Sketch Plan

X	X	X	
			
open speed camera of SIC 700 Badok Reservoir			

A: SKV98565
B: CB8389E

Describe Circumstance of the Accident

Date: 7/8/2022

Time: 3.30 PM

Location: 703 Bedok Reservoir car park.

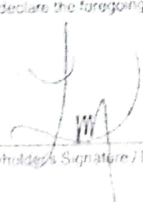
I park my car SKV48565 at 703 Bedok Reservoir carpark, This school bus CB838AE exit the parking lot and hit my car Right hand front portion.


Driver waited for me and told me he hit my car.

Driver particulars: Simon Lim Peng Huat
S1223057E
81133513.

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time


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

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

v1.0/2022