

ASS. REC. BY:

REF:

MS61 22007024 KN

Hennerh

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:

821K

IDAC Accident Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

03 days

Res.: Yes or No

Lum Sum:

20 %

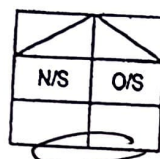
3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT



Veh No:

GBE 751R

Yr Regn:

08, 15

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

Truck / Trailer or

Make:

Kia K2500

c.c

2497

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

214376

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

KNCSJX 76LF7948244

Gen. Cond:

Good / Fair / Poor / Burnt

Steering:

In order / Jammed / Leaked / Burnt or

Brake:

In order / Jammed / Leaked / Burnt or

Mod:

Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195 R15X8

R:

185 R12X8(10)

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

TOYO / YOKO or

Front

Rear

R/Bal.

3

mm

R/Bal.

99

mm

L/Bal.

3

mm

L/Bal.

99

mm

D.O.A.

5/8/22

D.O.I.

7/9/2022

Survey held at

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

None OK

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1) Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

\$ + RS. \$

: Fines

: Others

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

Report Format :

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

Tropical Tech Automobile Services

BLK 5032 ANG MO KIO AVENUE 3 #01-303 INDUSTRIAL PARK 2 SINGAPORE 569535

TEL : 6481 7773 / 6481 1403 FAX : 6484 4978

E-mail : tsac303@singnet.com.sg

M/s: **MSIG Insurance (Singapore) Pte. Ltd**
4, Shenton Way, #21-01, SGX Centre 2,
S'pore 068807

Attn: Motor Claims Department
Tel: 68272888
Fax: 68277800

Estimate bill: TT 28 / 22 / TP / WT

Registration No: GBE751R

Make / model: Kia K2500 Lorry

*Not within
6/1/22 @
Bumay After Pain
3 days*

Mileage: Date: 26 / 08 / 2022

**TRAFFIC ACCIDENT INVOLVING VEHICLE BEARING REGISTRATION NO: GBJ5099G AND GBE751R ALONG
AYE HIGHWAY NEAR CLEMENTI EXIT ON 05 AUGUST 2022 AT ABOUT 1024HRS.**

| | | | | | |
|------|----------------------------|--------|----|----------|-------|
| 1pc | Rear gate | | \$ | 1,889.00 | |
| 1pc | Rear gate '70km/h' sticker | | \$ | 11.00 | ✓ |
| 1pc | Rear gate '13 pax' sticker | | \$ | 11.00 | ✓ |
| 2pcs | Rear gate hinge | | \$ | 432.00 | X |
| 2pxs | Rear tail lamp | o/s BM | \$ | 594.00 | ✓ |
| 2pxs | Rear tail lamp panel | o/s M | \$ | 486.00 | ✓ |
| 1set | Rear reversing sensor | | \$ | 360.00 | 2001m |
| | Sub A total: | | \$ | 3,783.00 | |
| | Less 20% discount: | | \$ | 756.60 | |
| | A total: | | \$ | 3,026.40 | |

Special net items:

1pc Rear license smart plate & casing
B total:

\$ 35.00 ✓
\$ 35.00

Remove and transfer rear gate necessary attachment spart part items.

Remove and refit rear gate, rear gate hinges, rear tail lamps, rear tail lamp panels, rear reversing sensors.

Heat / weld / beating / pull / straighten / align rear chassis frame by Chassis Alignment jack.

Diagnostic and reset rear reversing sensor fault error by HHT

To check and refit rear tail lamp wiring harness.

Under coating on rear damaged portion.

Putty / primer application, spray painting rear gate, rear gate hinges, rear tail lamp panels, rear bumper reversing sensors.

\$ 600.00
\$ 100.00 501
\$ 80.00 201
\$ 150.00 301
\$ 600.00 4001
\$ 4,591.40

Grand final amount:

Tropical Tech Automobile Services


(Authorised Signature)
William Tan

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

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Actual Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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 | 05/08/2022 17:24 (SGT) |
| Reported by | Driver |
| Date of Accident | 05/08/2022 10:24 (SGT) |
| Exact Location of Accident | AYE, Singapore |
| Additional Location Information | AYE HIGHWAY NEAR CLEMENTI EXIT |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------|
| Vehicle Registration Number | GBE751R |
|-----------------------------|---------|

INSURED/POLICYHOLDER

| | |
|--------------------------|---------------------------------|
| Is company? | Yes |
| Name Of Registered Owner | SC ENGINEERING PRIVATE LIMITED. |
| Company Reg No | 2XXXXX219G |
| Email Address | XINYI@SCE.SG |
| Mobile Phone No | (Phone) +65-63359926 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Kia |
| Model | K2500 6M/T |
| 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 | Commercial vehicle |
| Transmission | Manual |
| CC | 2497 |

INSURANCE COMPANY

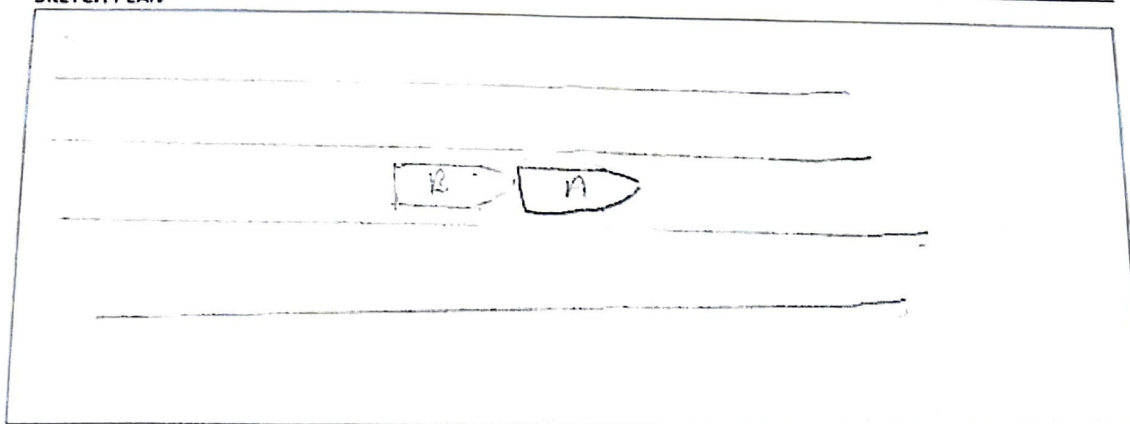
| | |
|-----------------------------------|--------------------------------------|
| Name of Insurance Company | Tokio Marine Insurance Singapore Ltd |
| Policy Number / Cover Note Number | MQ003295 |

DRIVER

| | |
|-----------------|----------------|
| Name of Driver | BACHITAR SINGH |
| Passport No/FIN | GXXXX874M |
| Date Of Birth | 01/04/1986 |
| Occupation | Outdoor |

Date of accident: 05-05-2022 Time: 12:24pm Location: AYE Highway Clementi exit 4
My Vehicle A: GRF7512 Vehicle B: A17-5012 Vehicle C:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Today this morning time 12:24pm I drive my car AYE Highway near by Clementi exit 4. There was a very heavy traffic, my vehicle was moving slowly. Suddenly one van hit me from the back. No one is injured.

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address :

& myself :

Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Zila
Ah Lim Motor Company