(08/11/13) wef

ASS. REC. BY: Marcus

REF: CS/C7/22007673/4943

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: SKL6397Y

at Workshop m/s 7K Lee

of

Insured: SLX B995H

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

Bal. or Market Value: $45K.

IDAC Accident Rport: Consistent? : **Yes** or **No**

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

Est. Repairs: 5 days Res.: **Yes** or **No**

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

CA / REV / REP. / 24 HRS 4356

Vehicle: **IN / OUT**

Date: Person Contacted:

Veh No: SKL6397Y Yr Regn: 06/12/13

Type: **M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer** or CA

Make: Lexus ES250 c.c 2494

Colour Grey A/C: **Insured / Std / NI / NA**

Sp.Reading 134421 T/Radio: **Insured / Std / NI / NA**

Eng/No:

C/No: JTHBJ1GG902036965

Gen. Cond: **Good / Fair / Poor / Burnt**

Steering: **Inorder / Jammed / Leaked / Burnt** or

Brake: **Inorder / Jammed / Leaked / Burnt** or

Modi : **Nil / S/Rim / STD A/Rim** or

Tyre Size: F: 225/45 R18

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Continental

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	11/08/22	D.O.I.	12/08/22

Survey held at

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

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

Date / Time	Action / Instruction
	Dep 20K.
	COE until 05-12-2023 LTA$ 33199
18/8/22	L/S $4700 informed Ivy (Rad $ 7772.34, 62%-)

Date/Time, File **Pass** to? 1) 25/8 [illegible]

Date/Time, File **Return** to? 2)

☐ : **Preli. Report**

☐ : **Final Report**

Days Of Repair: 5

Resurvey No. of Trip: 2

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

Survey Fee:

Transportation: ___S + RS, ___SI

Photos

Others

TOTAL

Report Format : MER-TP

Lump Sum / I.B.I. ($ 4700)

VEHICLE NO: SKL 63974 | MAKE & MODEL: Lexus. ES250 | AUTO / MANUAL

DATE OF ACCIDENT	11 08 2022 — 1498cc
TIME OF ACCIDENT	8:10 AM
LOCATION OF ACCIDENT	Jalan Bukit Merah towards CTE
NAME OF OWNER	Hui Chee Cheong
	cheecheonghui @ hotmail.com — 97668196
NRIC	S1261435G
CLAIM TYPE	~~OD~~ / THIRD PARTY / ~~...~~
FLEET POLICY	~~YES~~ / NO
INSURANCE	AXA
TYPE OF COVERAGE	Comprehensive / ~~Third Party / Third Party Fire & Theft~~
POLICY NO	GA507648/1
NAME OF DRIVER	AS ABOVE / ~~...~~
NRIC	As Above.
DATE OF BIRTH	01 / 07 / 1957
ANY PASSENGER	~~YES~~ / NO
NAME OF PASSENGER	NA
GENDER OF PASSENGER	~~MALE / FEMALE~~
OCCUPATION	~~Outdoor~~ / ~~Indoor~~ Not working
DATE OF DRIVING PASS	08 / 12 / 1978
GENDER	Male / Female
CONTACT NO	Mobile: 97668196 Office: Home:
EMAIL	cheecheonghui @ hotmail.com
ADDRESS	Blk 73 Telok Blangah Heights, #12-313 (S) 100073
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No.: INSURER:
RELATIONSHIP	Employee / If No.
WEATHER CONDITION	Clear / ~~Raining~~ / Other
ROAD SURFACE	Dry / ~~Wet / Other~~
ANY INJURIES	No / If ~~yes, Who?~~
CONTACT NO	
POLICE REPORT	No / If ~~yes, Where?~~
NOTICE OF INTENDED PROSECUTION GIVEN	NO/IF YES, WHO:
VEHICLE B NO.	SLX 8995H — Any Passenger: 01
NAME	Law Kiat Hwee — China.
CONTACT NO	

WORKSHOP:

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. The 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 lodgment 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.

   (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.

   (e) the information so collected under (d) above may be shared / disclosed:

   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud regulators, law enforcement and government agencies as reasonably required for the purposes stated; or

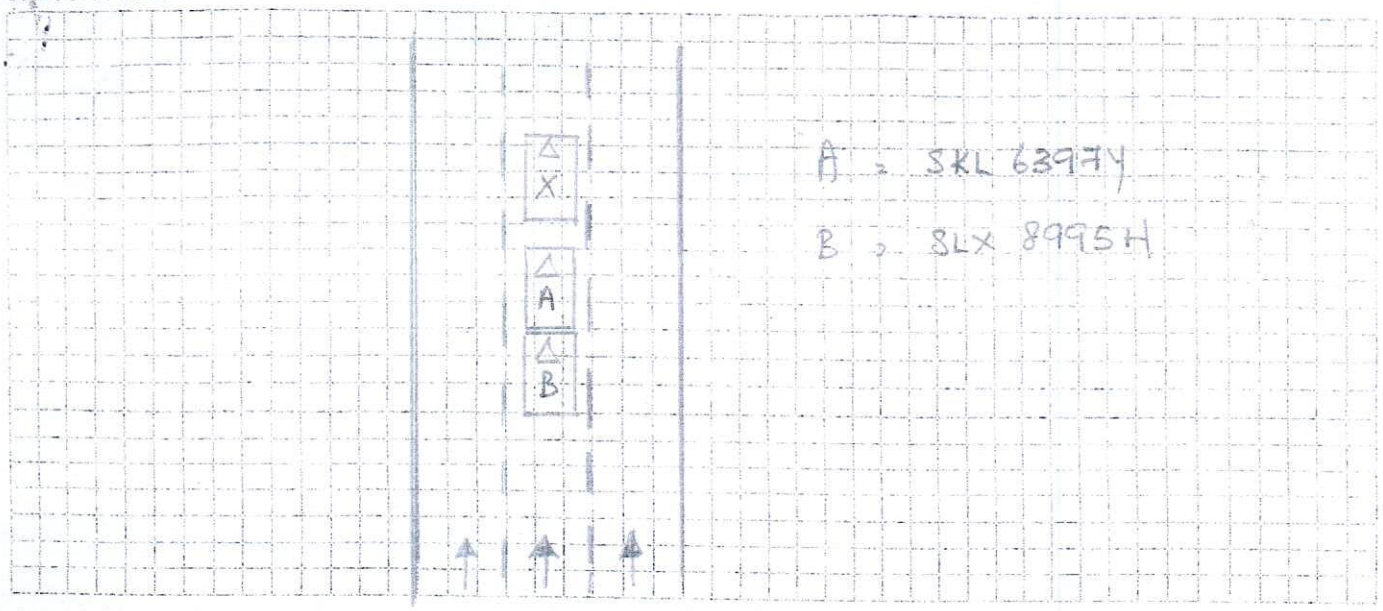
   (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time

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

For Office Use Only

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Jalan Bukit Merah toward CTE on 11/08/2022 at about 8:10 a.m. Due to vehicle in front brake, I follow thru. Suddenly vehicle B collided into the rear portion of my vehicle. We alighted and exchange particulars and left the scene after that.

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 Police Officer's Signature
Name:
NRIC/FIN:

T K LEE AUTOMOTIVE PTE. LTD.

NO 1 KAKI BUKIT AVE 6 #02-47
AUTOBAY SINGAPORE 417883
Tel : 6509 5521 / 65095524 Fax : 6509 5523

The Motor Claims Dept.
CHINA TAIPING INSURANCE (S) PTE LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
SINGAPORE 079909
SLX8995H

ESTIMATE

VEHICLE NO : SKL6397Y
MAKE/MODEL : LEXUS ES 250
ACC DATE : 11.08.2022

	QTY	PARTICULAR	UNIT PRICE S$	AMOUNT S$
		~~LIST~~ PRICE		
1	1	REAR BUMPER	1,015.10	1,015.10
2	4	REAR BUMPER PDC SENSOR	509.10	2,036.40
3	1	REAR BUMPER REFLECTOR - RH	89.92	89.92
4	1	REAR BUMPER SPONGE	230.50	230.50
5	1	REAR BUMPER REINFORCEMENT	861.43	861.43
6	2	REAR BUMPER SIDE HOLDER - RH/LH	64.43	128.86
7	2	REAR BUMPER SIDE RETAINERS - RH/LH	101.25	202.50
8	1	REAR BOOT LID	981.62	981.62
9	1	REAR BOOT LOGO	92.60	92.60
10	1	REAR BOOT EMBLEM "LEXUS"	110.25	110.25
11	1	REAR BOOT EMBLEM "ES250"	110.25	110.25
12	2	REAR BOOT LAMPS	381.93	763.86
13	1	REAR BOOT INNER LOCK	566.95	566.95
14	1	REAR BOOT W/STRIP	299.42	299.42
15	1	REAR END PANEL	869.10	869.10
16	1	REAR END PANEL GARNISH	361.43	361.43
17	1	REAR EXHAUST SILENCER - RH	1,055.60	1,055.60
18	1	REAR EXHAUST CHROME PIPE	190.65	190.65
19	1	REAR SMART KEYLESS ANTENNA	199.50	199.50
20	1	REAR TAILLAMP - RH	581.93	581.93
21	1	REAR UNDERCOVER	221.40	221.40
				10,969.27
		LESS 10%		1,096.93
				9,872.34

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:

NOT Approved
all
12/08/22
L/S $4700/
5 days.

4762.76
10%
4286.48
90
1570
4886.48
4709

T K LEE AUTOMOTIVE PTE.LTD

	QTY	PARTICULAR	UNIT PRICE S$	AMOUNT S$
		SPECIAL NETTS ITEM		
1	1	(SET) REAR BUMPER CLIP	45.00	45.00
2	1	(SET) REAR UNDERCOVER CLIP	45.00	45.00
				90.00
		LABOUR CHARGES :		
1		TO CHECK REAR ELECTRICAL WIRING		50.00
2		TO REMOVE & REFIX REAR INTERIOR TRIMS TO ASSIST REPAIR		120.00
3		TO REMOVE & REPLACE EXHAUST SYSTEM		100.00
4		TO TUFF KOTE		60.00
5		TO PUTTY, SPRAY PAINT & POLISH AFFECTED PARTS		1,080.00
6		TO PANEL BEAT, CUT, WELD, REMOVE & REPLACE DAMAGED PARTS		1,050.00
			TOTAL:	2,460.00

ESTIMATE PARTS AND LABOUR GRAND TOTAL : $ 12,422.34

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Acknowledged by Repairer
Signature:
Date: