

ASS. REQ. BY:	REF:
Kenneth	1651 220077911Kv

Кемет

Ven No: INC 8192 Yr Regn: 09, 21
 Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or Trailer
 Make: Toy Naah C.C. 1797
 Colour N. Blue AC: Insured / Std / Nil / NA
 Sp. Reading — T/Radio: Insured / Std / Nil / NA
 C/No: —
 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 ARim or
 Tyre Size: F.P. 195/65R15
 R: GY
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or —
 Front R/Bal. 6 mm R/Bal. 8 mm
 L/Bal. 6 mm L/Bal. 8 mm
 D.O.A. 30/7/22 D.O.I. 17/8/2022
 Survey held at —
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
—

ies, of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

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

North Flat, Tailgate journal
WLCSP re-estimating estimate on list prices

Days Of Repair: _____
Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$

<input type="checkbox"/>	Site Insp (\$	_____)	\$ + _____
<input type="checkbox"/>	Interview (\$	_____)	\$ + _____
<input type="checkbox"/>	Tech Invs (\$	_____)	\$ + _____
<input type="checkbox"/>	Weekend (\$	_____)	\$ + _____

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ComfortDelGro Engineering

205 Braddell Road S(579701)

ACCIDENT REPAIR ESTIMATES

Our Ref:

Type of Claim : THIRD PARTYVehicle No. : SNC819ZMake & Model : TOYOTA NOAHYear of Manufacture : 2021Chassis No. : ZWR800504928

Engine No. : _____

Policy No. : _____

Time of Accident : _____

In-house Vehicle Assessor

Repair Estimates

Case Owner : _____

Signature : _____

Contact No

Ft Counter Operation

Brenda Tel: 63837730 email: brendang@sparkcarcare.com

Rohani tel: 63837890 email: rohani@sparkcarcare.com

Parts (a) Cost / List Price Items \$ 10,070.00Plus/Less 15% \$ 1,510.50Total of Cost / List \$ 11,580.50(b) Nett Price Items \$ 45.00

Less _____

Total of Nett Item _____

(c) Special Nett Items \$ -Total Parts Cost (Appendix A) \$ 11,580.50Labour (Appendix B) \$ 4,840.00Total Repair Cost \$ 16,420.50

The above total will be subjected to 7% G.S.T.

Not Authorized
Rohani Bypass

Back-end Operation

Ngo Toh Wee Tel: 63837656 email: ngo@sparkcarcare.com

Patrick Tel: 63837441 email: patrick@sparkcarcare.com

Name of Surveyor : BennerCompany : CKKSurvey conducted on : 17/8/22 at _____**Remarks By Surveyor**(a) The repair of this vehicle is ~~authorized~~ / is not authorized until further notice.(b) Recommended Days of Repair : 12 day(s)(c) Resurvey : Required / ~~Not Required~~

(d) Excess : \$ _____

(e) Signature of surveyor : Le Date: 17/8/22

Spark Car Care

ComfortDelGro Engineering Pte Ltd
 205 Braddell Road S (579701)
 Tel: 63837168 / 63837466 Fax: 62815767

Spare Parts

Vehicle No : SNCR819Z Case Owner : 0

Make & Model : TOYOTA NOAH Year Manufacture : 2021

Chassis No : ZWR800504928 Engine No : 0

Sales Order : _____ Supplier : _____

Order By : _____ Type of Claim : THIRD PARTY

S/No	Part Description	QTY	Cost Price	List Price	Nett Price	S/N	Disposition By Surveyor
1	FRT BONNET	1	\$ 320.00				✓
2	FRT BONNET LOCK	1	\$ 65.00				✓
3	FRT BONNET MOULDING	1	\$ 190.00				✓
4	FRT BONNET INSULATOR	1	\$ 140.00				X
5	FRT BONNET LH HINGE	1	\$ 45.00				✓
6	FRT BONNET RH HINGE	1	\$ 45.00				✓
7	FRT HEADLAMP LH	1	\$ 880.00				✓
8	FRT HEADLAMP RH	1	\$ 880.00				✓
9	FRT BUMPER	1	\$ 260.00				✓
10	FRT LH BUMPER RETAINER	1	\$ 40.00				✓
11	FRT RH BUMPER RETAINER	1	\$ 40.00				✓
12	FRT RADIATOR GRILLE ASSEMBLY	1	\$ 380.00				✓
13	FRT BUMPER LOWER GRILLE	1	\$ 320.00				✓
14	FRT SUPPORT PANEL ASSEMBLY	1	\$ 630.00				✓
15	FRT REINFORCEMENT BAR	1	\$ 160.00				✓
16	FRT REINFORCEMENT SPONGE	1	\$ 80.00				✓
17	CONDENSOR	1	\$ 450.00				✓
18	RADIATOR	1	\$ 510.00				✓
19	FAN COWLING	1	\$ 100.00				X
20	FRT BRACE PANEL	1	\$ 65.00				✓
21	FRT LH AIRGUIDE	1	\$ 100.00				✓
22	FRT RH AIRGUIDE	1	\$ 40.00				✓
23	FRT COOLANT SPARE TANK	1	\$ 65.00				X
24	FRT LICENCE PLATE	1			\$ 45.00		✓
25	FRT LH FENDER	1	\$ 350.00				✓
26	FRT LH FENDER INNER COWLING	1	\$ 110.00				X
27	REAR TAILGATE	1	\$ 580.00				✓
28	REAR TAILGATE WHEATHERSTRIP	1	\$ 140.00				✓
29	REAR TAILGATE CHROME MOULDING	1	\$ 300.00				X
30	REAR TAILGATE EMBLEM	1	\$ 45.00				X

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

Spare Parts

Vehicle No : SNC819Z Case Owner : 0

Make & Model : TOYOTA NOAH Year Manufacture : 2021

Chassis No : ZWR800504928 Engine No : 0

Sales Order : 0 Supplier : 0

Order By : 0 Type of Claim : THIRD PARTY

S/N	Part Description	QTY	Cost Price	List Price	Nett Price	S/N	Disposition By
31	REAR TAILGATE LOCK	1	\$ 280.00				✓
32	REAR BUMPER	1	\$ 310.00				✓
33	REAR BUMPER LH REFLECTOR	1	\$ 35.00				✓
34	REAR BUMPER RH REFLECTOR	1	\$ 35.00				✓
35	REAR LH CORNER PANEL	1	\$ 35.00				✓
36	REAR RH CORNER PANEL	1	\$ 90.00				✓
37	REAR PARKING SENSOR	1	\$ 90.00				✓
38	REAR END PANEL OUTER	1	\$ 140.00				✓
39	REAR END PANEL GARNISH	1	\$ 250.00				✓
40	REAR SPARE TYRE TANK TOP BOARD	1	\$ 80.00				✓
41	REAR SPARE TYRE TANK	1	\$ 350.00				✓
42	REAR RH FENDER INNER TRIM	1	\$ 360.00				✓
43	REAR LH FENDER INNER TRIM	1	\$ 310.00				✓
44	REAR BUMPER RH RETAINER	1	\$ 310.00				✓
45	REAR BUMPER LH RETAINER	1	\$ 50.00				✓
46		1	\$ 50.00				✓
47							
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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

Signature: _____
 Date: _____
 Acknowledged by Repairer: _____

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.



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 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 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 01/08/2022 09:14 (SGT)
Reported by Driver
Date of Accident 30/07/2022 03:50 (SGT)
Exact Location of Accident Jln Sultan, Singapore
Additional Location Information
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNC819Z

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner COMFORTDELGRO RENT-A-CAR PTE LTD
Company Reg No 198105775H
Email Address dannyng@cdgrentacar.com.sg
Mobile Phone No (Phone) +65-92707427
Alternative Phone No (Office) +65-68820888

VEHICLE PARTICULARS

Manufacturer Toyota
Model Noah
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 hire
Transmission Auto
CC 1797

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Policy Number / Cover Note Number D18MFL0003414_03

DRIVER

Name of Driver PEH SIT GUAN
NRIC No S693817J
Date Of Birth 24/10/1969
Occupation Outdoor

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 Authorised 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.
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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' law firms/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' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

