

(08/11/11) wef

ASS. IEC. BY: John

REF:

4834

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No: SMT 2308Rat Workshop m/s HIN LUNHof 1008, BUKIT MUKAH LPS #0120

Insured:

LPC

Policy No.

Claim 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:

89k

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

days

Res.:

Yes or No

Lum Sum:

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

REPAIR LIMIT - 85K

Veh No:

SMT 2308R

Yr Regn:

2020 / APRType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

HYUNDAI AD NANTE 1.6 LSA cc 1591

Colour:

GREEN

A/C: Insured / Std / NI / NA

Sp. Reading:

48002

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

KMH0841 CMLU035107Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195/65R15

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

17/08/22

D.O.I.

23/08/22

Survey held at

HIN LUNH

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

OLD FRG

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

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

) S + RS, SI

☐

: Interview (\$

) Photos

☐

: Tech. Invs (\$

) Others

Report Format :

Lump Sum / I B / (\$

HIN LUNG WORKSHOP

Blk 1008 Bukit Merah Lane 3 #01-20, S'pore 159722. Tel: 68583000 Fax: 64760075
Website: www.hinlung.com.sg GST Regn. No: M2-0065859-X

Your Ref:
Our Ref : 0765/08/22
M/s : LONPAC INSURANCE BHD
300, BEACH ROAD #17-04/06 THE CONCOURSE
SINGAPORE 199555
Attn : MOTOR CLAIM DEPARTMENT

Page: 1
Date: 22/08/2022

Dear Sir/Madam,

ACCIDENT REPAIR ON : SMT2308R - AVANTE 1.6 GLS (A) 2020
INSURED : BOLT CAR LEASING PTE LTD
DATE OF ACCIDENT : 17/08/2022
YOUR INSURED VEH NO: XD5101D

APPENDED BELOW ARE THE ESTIMATED COST OF REPAIR & PARTS TO BE REPLACED:-

		S\$	S\$	S\$
REPLACEMENT OF PARTS				
1	FRONT BUMPER <i>turn</i>	1 @	475.00	475.00
2	MOULDING - FRONT BUMPER, LH <i>X</i>	1 @	116.00	116.00
3	MOULDING - FRONT BUMPER, RH <i>X</i>	1 @	116.00	116.00
4	LIP ASSY - FRONT BUMPER <i>ca</i>	1 @	64.00	64.00
5	CAP ASSY - FRONT BUMPER <i>X</i>	1 @	18.00	18.00
6	BUMPER CLIPS <i>ca</i>	10 @	4.90	49.00
7	BRACKET - FRONT BUMPER SIDE LH <i>X</i>	1 @	15.00	15.00
8	BRACKET - FRONT BUMPER SIDE RH <i>cut</i>	1 @	15.00	15.00
9	BRACKET ASSY - FRONT BUMPER UPPER SUPPORT, LH <i>X</i>	1 @	15.00	15.00
10	BRACKET ASSY - FRONT BUMPER UPPER SUPPORT, RH <i>X</i>	1 @	15.00	15.00
11	DUCT ASSY - AIR CURTAIN, LH <i>X</i>	1 @	28.00	28.00
12	DUCT ASSY - AIR CURTAIN, RH <i>X</i>	1 @	28.00	28.00
13	ABSORBER - FRONT BUMPER ENERGY <i>ca</i>	1 @	111.00	111.00
14	GRILLE ASSY - RADIATOR <i>X</i>	1 @	530.00	530.00
15	COVER ASSY - RADIATOR GRILLE UPPER <i>cut</i>	1 @	85.00	85.00
16	STRIP - FRONT BUMPER <i>ca</i>	1 @	26.00	26.00
17	GRILLE - FRONT BUMPER SIDE, LH <i>X</i>	1 @	34.00	34.00
18	GRILLE - FRONT BUMPER SIDE, RH <i>X</i>	1 @	34.00	34.00
19	CLIP <i>ca</i>	10 @	4.90	49.00
20	MOULDING - FRONT BUMPER LICENSE PLATE <i>X</i>	1 @	22.00	22.00
21	LAMP ASSY - FRONT TURN SIGNAL, LH <i>X</i>	1 @	165.00	165.00
22	LAMP ASSY - FRONT TURN SIGNAL, RH <i>ca</i>	1 @	165.00	165.00
23	PANEL ASSY - UNDER COVER <i>X</i>	1 @	134.00	134.00
24	CLIP <i>X</i>	10 @	4.90	49.00
25	PANEL ASSY - HOOD <i>X</i>	1 @	1,911.00	1,911.00
26	PANEL ASSY - FENDER, RH <i>4</i>	1 @	1,227.00	1,227.00
27	LAMP ASSY - SIDE RETAINER, RH <i>X</i>	1 @	28.00	28.00
28	PANEL ASSY - FRONT DOOR, RH <i>cut</i>	1 @	1,832.00	1,832.00
29	WEATHERSTRIP ASSY - FRONT DOOR SIDE, <i>X</i>	1 @	115.00	115.00

HIN LUNG WORKSHOP

Blk 1008 Bukit Merah Lane 3 #01-20, S'pore 159722. Tel: 68583000 Fax: 64760075
Website: www.hinlung.com.sg GST Regn. No: M2-0065859-X

ur Ref:
r Ref : 0765/08/22

Page: 2
Date: 22/08/2022

PENDED BELOW ARE THE ESTIMATED COST OF REPAIR & PARTS TO BE REPLACED:-

		S\$	S\$	S\$
30	RH WEATHERSTRIP ASSY - FRONT DOOR BELT OUTSIDE, RH X	1 @	53.00	53.00
31	BLACK TAPE - FRONT FOOR FRAME UPPER, RH <i>new</i>	1 @	23.00	23.00
32	BLACK TAPE - FRONT DOOR REAR, RH X	1 @	23.00	23.00
33	GUARD ASSY - FRONT WHEEL, LH X	1 @	86.00	86.00
34	GUARD ASSY - FRONT WHEEL, RH X	1 @	86.00	86.00
35	CLIP X	20 @	4.90	98.00
36	RETAINER X	10 @	4.90	49.00
	*SPECIAL NETT			
37	FRONT RIM RH <i>see price check?</i>	1 @	697.00	697.00
38	FRONT BUMPER PLATE WITH CASING <i>see</i>	1 @	35.00	35.00

LABOUR CHARGES

- 1 REPLACE NEW PARTS, REMOVE / REFIT ALL
- 1 ATTACHMENT PARTS TO FACILITATE REPAIR
- 1
- 2 SPRAY PAINT ON THE EFFECTED AREAS
- 2 WITH 2K PAINT
- 2
- 3 CHECK WIRING AND PROPER FUNCTIONING

~~1,000.00~~ 600

~~1,000.00~~ 600

~~100.00~~ 30

Nett Total Before GST

10,721.00

Yours faithfully,

f. h.
(Workshop Manager)

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:

Rahul
Hp 90010068
6 days
P/P
23/08/22 @ 1420
Resurvey before paint

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	19/08/2022 17:35 (SGT)
Reported by	Driver
Date of Accident	17/08/2022 14:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	HILL CRESCENT ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT2308R

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	BOLT CAR LEASING PTE LTD
Company Reg No	201118483H
Email Address	JAYSON@BOLTCARLEASING.COM
Mobile Phone No	(Phone) +65-97837834
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	AD AVANTE 1.6 GLS (A)
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 car
Transmission	Auto
CC	1591

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1220005139

DRIVER

Name of Driver	GUAN MINGFEI
NRIC No	S8179348D
Date Of Birth	28/04/1981
Occupation	Indoor

Date Of Driving Pass	14/11/2007
Driving experience	14 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87005958
Alt. Phone Number	-
Email Address	JAYSON@BOLTCARLEASING.COM
Address	BLK 354 ANG MO KIO ST 32
Address complement	05-145
Postcode	560354
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Collision - Change/cross lane
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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?	Yes
Police Station Name	Teck Ghee Neighbourhood Police Post
Police Station Address	Blk 321 Ang Mo Kio Street 31 Singapore 560321
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD5101D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver	-
Contact Number	(Phone) +65-83691595
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	GUAN MINGFEI
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMT2308R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 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.
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 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.

[Signature]



Policyholder's Signature / Date & Time

[Signature]

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

[Signature]

Witnessed by Reporting Centre Personnel

Sketch Plan

37 Hillcrest Road, Singapore 288913, National Junior College.

A: SMR2309E
B: XDS101D

[Sketch of a car with labels A and B]

Describe Circumstances of the Accident

LICENSE PLATE: QMT 2305R

ACCIDENT DATE & TIME: 17/8/22 1400

CONTACT NUMBER: 87005958

E-MAIL ADDRESS:

LOCATION: Hillcrest Road

Refer to police report.

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.

Please state:

☐ Claim Own Policy ☐ Claim Third Party ☒ Claim OD/TP at other workshop ☐ Reporting Only

Declaration

We declare the foregoing particulars are true in every respect.



[Signature]

Policyholder's Signature / Date & Time

[Signature]

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

[Signature]

Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE



T/20220818/2127

Police Station Of Origin:
Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

1 of 3

Report No. T/20220818/2127

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/08/2022 22:53	Vide Report No.: E/20220817/0071	Station Diary No.: 24
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Informant's Particulars			
Name of Informant: GUAN MINGFEI		Address: APT BLK 354 ANG MO KIO STREET 32 #05-145 SINGAPORE 560354	
ID Type/ ID No.: NRIC NO / S8179348D		Contact No.: Home/Office: Mobile: 87005958	
Nationality: CHINESE		Email:	
Sex: Male	Age: 41	Date of Birth: 28/04/1981	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: MANAGER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 17/08/2022 14:00	Type of Location:
Location: HILLCREST ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMT2308R	Car	HYUNDAI	AD AVANTE 1.6 GLS (A)	Silver		0
XD5101D	Lorry	ISUZU	CYZ52R	White		0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20220818/2127

2 of 3

Report No. T/20220818/2127

Police Station Of Origin:
Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

CONTINUATION OF REPORT

Driver			
Name	GUAN MINGFEI	ID No.	S8179348D
Related Vehicle	SMT2308R (Car)	Contact No.	87005958
Hospital/Clinic	RAFFLES MEDICAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	17/08/2022	Date Discharge	17/08/2022
No. of Days granted Medical Leave	05	Degree of Injury	NIL

Brief Details.

On 17/8/2022 at about 2pm, I drove my car to fetch my daughter at National Junior College. When I was about to enter the gate, there was a lorry in front of my car. They were doing some works and thus, the security from the security post signal me to overtake the lorry. This is to join the queue with the rest of the cars in front to fetch our children. While I was overtaking the lorry, one of the worker cross the road and signal me to stop. Thus, I came to a stop on the left side of the lorry. Subsequently the lorry moved and collided to the right side of my car. The workers and I came out from the vehicle.

I have to alight from the passenger side door as I am unable to open my door. The right side of the car was badly damaged. I have a front in-car camera and it recorded the whole accident. Later there was disagreement and thus police were called in. When I came back home, I felt pain on my body and also vomitted. I went to the doctor in the evening and was given 5 days of medical leave. I suffered some neck pain.

I would like to state that during school dismissal, the two lanes were being used as a one direction to fetch the students.



**SINGAPORE
POLICE FORCE**



T/20220818/2127

Police Station Of Origin:

Teck Ghee NPP

321 Ang Mo Kio Street 31 SINGAPORE
560321

Tel No: 1800-4599999

3 of 3

Report No. T/20220818/2127

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:

F /

SI MUHAMMAD ALI BIN
MANSOR

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI KOH WEI JIE

Contact No.: 97303412

Signature Of Informant:

Date/Time:

18/08/2022 22:53

Classification Of Case:

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	483H
Vehicle No.:	SMT2308R
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Aug 2022
Vehicle Make:	HYUNDAI
Vehicle Model:	AD AVANTE 1.6 GLS (A)
Primary Colour:	Silver
Manufacturing Year:	2019
Engine No.:	G4FGKU024459
Chassis No.:	KMHD841CMLU035107
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	\$13,197.00
Original Registration Date:	01 Apr 2020
First Registration Date:	01 Apr 2020
Transfer Count: -	0
Actual ARF Paid:	\$13,197.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Mar 2030
PARF Rebate Amount:	\$9,897.00
COE Expiry Date:	31 Mar 2030
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$31,210.00
COE Rebate Amount:	\$23,717.00
Total Rebate Amount:	\$33,614.00

The information contained herein is correct as at 25 Aug 2022

OK

Hyundai Avante 1.6A GLS

Overview

[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)**Price****\$89,800****Depreciation** ⓘ

\$10,940 /yr

[View models with similar depre](#)**Reg Date**

01-Apr-2020

(7yrs 7mths 6days COE left)

Mileage

13,000 km (5.4k /yr)

Manufactured ⓘ

2019

Road Tax ⓘ

\$738 /yr

Transmission

Auto

Dereg Value ⓘ

\$34,801 as of today (change)

OMV ⓘ

\$13,255

COE ⓘ

\$32,699

ARF ⓘ

\$13,255

Engine Cap

1,591 cc

Power

93.8 kW (125 bhp)

Curb Weight ⓘ

1,345 kg

No. of Owners ⓘ

1

Type of Vehicle

Mid-Sized Sedan