

ASS. REC. BY:

REF:

INCL 22 00 87P51K9

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

OD/TP/WS/TP RES/OD RES/EVA/INV/MY

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:

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

04

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:

SIR 7855C

Yr Regn:

08, 17

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

Truck / Trailer or

Make:

707

Pier 9

c.c

Wagon 1496

Colour

m.p. white

A/C: Insured / Std / NI / NA

Sp. Reading

188776

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

NJP172 7001272

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rlm / STD A/Rlm or

Tyre Size:

F:

185/60R15

R:

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

TOYO / YOKO or

Front

R/Bal.

9

mm

Rear

R/Bal.

8

mm

L/Bal.

9

mm

L/Bal.

8

mm

D.O.A.

3/8/22

D.O.I.

7/9/2022

Survey held at

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

N/S Rear body

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

/

Date/Time, File Pass to?

☐

: Prell. Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

S - RS. SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

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

# AUTOWORX HOUSE

C/O. 176 SIN MING DRIVE #02-01 SINGAPORE 575721  
TEL: 64520715 FAX: 64529250

## ESTIMATE

MACQUEEN RENTALS PTE LTD  
c/o 46 Lenton Plain  
Singapore 786548

Date: 13/08/2022

QUANTITY	PARTICULARS	AMOUNT (\$)
	<b>RE: TOYOTA SIENNA WELCAB / SLR 7655 C</b>	
1pc	rear door LH	1,164.50
1pc	rear door protector	514.50
1pc	rear door outer handle	341.60
1pc	rear door window regulator	435.10
1pc	rear door window regulator motor	514.50
1pc	rear door slide lower	116.70
1pc	rear door slide upper	150.60
1pc	rear door slide rail lower	245.10
1pc	rear fender	1,057.40
1pc	rear fender arch protector	245.60
1pc	rear bumper	1,076.40
1pc	rear bumper protector trim	211.70
1pc	rear bumper side retainer	69.50
1pc	rear wheel bearing assy	567.50
1pc	rear axle	1,540.50
1pc	rear fender upper trim	667.50
	<b>Sub-total</b>	<b>8,918.70</b>
	<b>Less 20%</b>	<b>1,783.74</b>
	<b>Sub-total</b>	<b>7,134.96</b>
1pc	alloy rim	700.00
1pc	rear shock absorber	3,645.00
	<b>Sub-total</b>	<b>4,345.00</b>
	<b>Total</b>	<b>6,930.00</b>

**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:

To remove and replace the parts mentioned above, panel beat and realign the necessary affected areas.

To check wiring system.

To apply putty and spray painting on affected areas.

To remove undercarriage

To transfer door accessories

To apply rust proofing on affected areas.

To apply waterproof sealant on affected areas.

To perform 4 wheels computerised alignment

Total

6,930.00



## 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	04/08/2022 14:30 (SGT)
Reported by	Driver
Date of Accident	03/08/2022 17:45 (SGT)
Exact Location of Accident	Corporation Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR7655C
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MCQUEEN RENTALS PTE LTD
Company Reg No	2XXXXX605G
Email Address	ask@mcqueenrentals.com
Mobile Phone No	(Phone) +65-88585551
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
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	1496

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5115168776-02

#### DRIVER

Name of Driver	LIM SENG
NRIC No	SXXXX132E
Date Of Birth	13/04/1954
Occupation	Outdoor

## 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.



Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Sketch Plan

Vehicle A = SLR765tc Vehicle B = GBK7812D

