ASS. REC. BY: Kenneth

REF: MSG/220889611K

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TP / WS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s Cheng Hoe

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.

N/S	O/S

Bal. or Market Value: @61K

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 02 days Res.: Yes or No

Lum Sum: 181 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SLJ 6850D Yr Regn: 12, 16

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

Make: Mazda 3 c.c 1496

Colour M. Black A/C: Insured / Std / NI / NA

Sp.Reading 136448 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JM6BM42A8G-0346404

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl : Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 205/60R16

R: _____

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

Front		Rear	
R/Bal.	8 mm	R/Bal.	8 mm
L/Bal.	8 mm	L/Bal.	8 mm
D.O.A.	21/8/22	D.O.I.	14/12/2022

Survey held at _____

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

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

Date / Time	Action / Instruction

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Survey Fee: _____

Transportation: _____ S / RS _____ SI

Parking _____

Others _____

TOTAL _____

Report Format :

Lump Sum / I.B.I: (S

Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761
TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg
GST:201001158E RCB NO:201001158E

M/S : MSIG INSURANCE (S) PTE LTD (SGX)
16 RAFFLES QUAY
#24-01 HONG LEONG BUILDING
SINGAPORE 048581
TEL: 68277660 FAX: 62257402
ATTN: Motor Claim Department
WS Ref: TP/MSIG/AMK
Claim Type: Third Party
Accident Date: 21/08/2022
TP Veh Reg No: SCP6883J

Estimate No: **ES2291300/AMK**
Date: 13 Dec 2022
Policy No: DMPG21014495
Veh Reg No: **SLJ6850D**
Make/Model: MAZDA 3 1.5
Chassis No: JM6BM42A8G0346404
Engine No: P520375242
Reg. Date: 21/12/2016

Estimate Repair Cost to Vehicle No :SLJ6850D

	Description	U/Price	Quantity	List Price S$	Amount S$
	List Price				
1	REMOVE & REFIX FRT BUMPER & ATTACHMENTS,HEADLAMP & REALIGN THE SAME	200.00	1 LA	200.00	200.00
2	PUTTY & RESPRAY FRT BUMPER & ATTACHMENTS,FRT RH FENDER & ALL AFFECTED AREAS	550.00	1 LA	550.00	550.00
				750.00	750.00
				Total	S$ 750.00
				Add GST @ 7%	52.50
				Total Amount Payable	S$ 802.50

* SURVEY VEHICLE AT ANG MO KIO WORKSHOP

Not Authorised
Resurvey After Paint

For Cheng Hoe Motor Pte Ltd

Dorlyn

AUTHORISED SIGNATURE

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
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 witholding 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	22/08/2022 23:44 (SGT)
Reported by	Driver
Date of Accident	21/08/2022 16:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	71 JALAN LEKAR OSCP
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ6850D

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE KOK KIONG
NRIC No	SXXXX223D
Email Address	noemail@gmail.com
Mobile Phone No	(Phone) +65-93366272
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	3
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	1496

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMPG21014495

DRIVER

Name of Driver	LEE DE KAI SEVASTIAN
NRIC No	SXXXX073H
Date Of Birth	22/06/1999
Occupation	Indoor

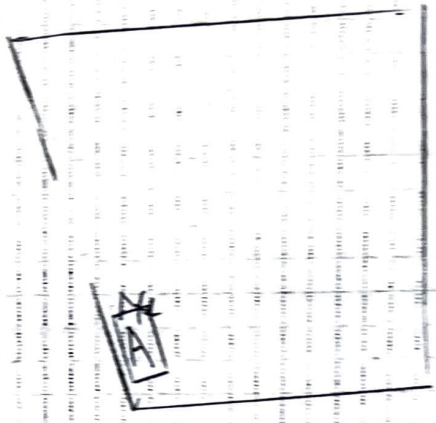
Describe **Circumstance of the Accident**

** NOTE : PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

( ) Claim Own Policy (✓) Claim Third party ( ) Reporting Only

( ) Claim OD/ TP at other workshop (_____)

Sketch Plan



A: SLJ6850D
(parked, no one in it)

Location: 71 Jalan Lekar OSC

Vehicle No: SLJ6850D (ERGO)
Date & Time: 21/08/2022 @ 1600 (cloudy)

refer to police report.

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) (Amk)