

Kenneth

ASSIGNMENT

From: _____

Date: _____

Estimated Cost: _____

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

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: 876k

IDAC Accident Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: 12 days

Res.: Yes or No

Lum Sum: 20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Date / Time

Action / Instruction

Bonnet jammedVeh No: SUR 962LYr Regn: 07 17Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toy Priusc.c. 1797Colour: M. Silver

A/C: Insured / Std / NI / NA

Sp. Reading: 222012

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 8VW506080425Gen. Cond: Good / Fair / Poor / BurntSteering: Inoper / Jammed / Leaked / Burnt orBrake: Inoper / Jammed / Leaked / Burnt orMod: Nil / S/Rlm / STD / Rlm orTyre Size: F: 195/55R15

R: _____

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

TOYO / YOKO or Intertec

Front

Rear

R/Bal. 9 mmR/Bal. 9 mmL/Bal. 9 mmL/Bal. 9 mmD.O.A. 9/19/22D.O.I. 13/9/2022

Survey held at _____

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

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

Date/Time, File Pass to?

☐

: Prel. Report

☐

: Final Report

Date/Time, File Return to?

Days Of Repair: _____

Resurvey No. of Trlp: _____

Survey Fee: _____

Transportation

S + RS. SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech Invs (\$)

☐

: Weekend (\$)

Report Format:

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

Date: 12/09/2022
Vehicle No: SLR962L
Model: TOYOTA PRIUS HYBRID 1.8S CVT
Chassis: ZVW506080425-2017
Reg. Year: 2017

Third Party Insurer: ALLIANZ
Third Party Veh No: SMN9496R
Date of Accident: 09/09/2022
Estimator: TING AN

Surveyor:

ESTIMATE

12 days

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	REAR TAILGATE	1		Ben \$420.00
2	REAR TAILGATE "PRIUS" EMBLEM	1		Ben \$30.00
3	REAR TAILGATE "HYBRID" EMBLEM	1		Ben \$30.00
4	REAR TAILGATE "TOYOTA" EMBLEM	1		Ben \$55.00
5	REAR TAILGATE OUTER GARNISH COVER	1		Ben \$330.00
6	REAR TAILGATE INNER TRIM BOARD	1		\$120.00
7	REAR TAILGATE INNER LOCK	1		Ben \$165.00
8	REAR TAILGATE WEATHERSTRIP	1		Ben \$145.00
9	REAR TAILGATE HANDLE COVER	1		Ben \$18.00
10	REAR WINDSCREEN MOULDING	1		Ben \$40.00
11	REAR BUMPER	1		Ben \$170.00
12	REAR BUMPER LOWER GARNISH COVER	1		Ben \$170.00
13	REAR BUMPER TOWING COVER	1		Ben \$15.00
14	REAR BUMPER ANTENNA SENSOR	1		\$55.00
15	REAR BUMPER SIDE BRACKET LH	1		Ben \$50.00
16	REAR BUMPER SIDE BRACKET RH	1		Ben \$50.00
17	REAR BUMPER REINFORCEMENT	1		Ben \$105.00
18	REAR BUMPER SIDE GARNISH COVER LH	1		Ben \$55.00
19	REAR BUMPER SIDE GARNISH COVER RH	1		Ben \$55.00
20	REAR UPPER TAIL LAMP LH	1		\$175.00
21	REAR UPPER TAIL LAMP RH	1		Ben \$175.00
22	REAR LOWER TAIL LAMP LH	1		\$200.00
23	REAR LOWER TAIL LAMP RH	1		Ben \$200.00
24	REAR END PANEL	1		Ben \$215.00
25	REAR END PANEL UPPER COVER	1		Ben \$73.00
26	REAR FLOOR PANEL TOOLBOX TRAY	1		\$530.00
27	REAR FLOOR PANEL TOOLBOX TRAY UPPER BOARD	1		\$620.00
28	REAR FENDER INNER TRIM LH	1		Ben \$165.00
29	REAR FENDER INNER TRIM RH	1		Ben \$165.00
30	FRONT BONNET	1		Ben \$230.00
31	FRONT BONNET LOCK	1		Ben \$70.00
32	FRONT BONNET INSULATOR	1		Ben \$165.00
33	FRONT BONNET STAND	1		\$35.00
34	FRONT BONNET HINGE LH	1		Ben \$40.00
35	FRONT BONNET HINGE RH	1		Ben \$40.00
36	FRONT WIPER AIR GRILLE	1		Ben \$250.00
37	FRONT WIPER WASHER TANK	1		\$72.00

Head office

6 Kung Chong Road Singapore 159143
Tel (+65) 6472 1313 | Fax (+65) 6472 2112

Branch

9A Serangoon North Ave 5 Singapore 554500
Tel (+65) 6484 9919 | Fax (+65) 6481 1993

Branch (Motor Insurance Claims)

Blk 10 Ang Mo Kio Ind Park 2A #01-05 Singapore 568047
Tel (+65) 6481 1522 | Fax (+65) 6481 1011



Date: 12/09/2022
Vehicle No: SLR962L
Model: TOYOTA PRIUS HYBRID 1.8S CVT
Chassis: ZVW506080425-2017
Reg.Year: 2017

Third Party Insurer: ALLIANZ
Third Party Veh No: SMN9496R
Date of Accident: 09/09/2022
Estimator: TING AN
Surveyor:

38	A-PILLAR GARNISH MOULDING LH	1		\$40.00	7
39	A-PILLAR GARNISH MOULDING RH	1		<i>Pn</i> \$40.00	x
40	FRONT HEADLAMP LH	1		<i>CM</i> \$320.00	7
41	FRONT HEADLAMP RH	1		\$320.00	7
42	FRONT BUMPER	1		<i>CM</i> \$165.00	7
43	FRONT BUMPER SIDE BRACKET LH	1		<i>Di</i> \$40.00	7
44	FRONT BUMPER SIDE BRACKET RH	1		<i>Di</i> \$40.00	7
45	FRONT BUMPER TOWING COVER LH	1		<i>Di</i> \$20.00	7
46	FRONT BUMPER TOWING COVER RH	1		<i>Pn</i> \$20.00	x
47	FRONT BUMPER LOWER GRILLE	1		<i>CM</i> \$70.00	7
48	FRONT BUMPER REINFORCEMENT	1		<i>Pn</i> \$215.00	7
49	FRONT BUMPER LOWER REINFORCEMENT	1		\$95.00	7
50	FRONT BUMPER ABSORBER FOAM	1		<i>CM</i> \$50.00	7
51	FRONT BUMPER UNDER COVER	1		\$80.00	7
52	FRONT BUMPER FOG LAMP LH	1		\$215.00	7
53	FRONT BUMPER FOG LAMP RH	1		<i>Pn</i> \$215.00	x
54	FRONT GRILLE	1		<i>CM</i> \$110.00	7
55	FRONT GRILLE LOGO EMBLEM	1		<i>Di</i> \$50.00	7
56	FRONT SUPPORT PANEL	1		\$460.00	7
57	FRONT SUPPORT PANEL UPPER COVER	1		\$110.00	7
58	FRONT AIR DUCT	1		\$35.00	7
59	FRONT AIR FILTER ASSY	1		\$320.00	7
60	FRONT HYBRID BATTERY	1		\$4,950.00	7
61	FRONT ENGINE ECU	1		\$3,755.00	7
62	ENGINE MOUNTING LH	1		\$90.00	7
63	ENGINE MOUNTING RH	1		\$140.00	7
64	ENGINE MOUNTING REAR	1		\$80.00	7
65	FRONT AIRCON CONDENSER	1		\$550.00	7
66	FRONT AIRCON CONDENSER LIQUID TUBE	1		\$230.00	7
67	FRONT AIRCON CONDENSER PRESSURE PIPE	1		\$135.00	7
68	FRONT RADIATOR	1		\$600.00	7
69	FRONT RADIATOR FAN SHROULD LH	1		\$175.00	7
70	FRONT RADIATOR FAN SHROULD RH	1		\$175.00	7
71	FRONT RADIATOR FAN BLADE LH	1		\$95.00	7
72	FRONT RADIATOR FAN BLADE RH	1		\$95.00	7
73	FRONT RADIATOR FAN MOTOR LH	1		\$95.00	7
74	FRONT RADIATOR FAN MOTOR RH	1		\$95.00	7
75	FRONT RADIATOR TOP HOSE	1		\$25.00	7
76	FRONT RADIATOR BOTTOM HOSE	1		\$20.00	7

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Chassis: ZVW506080425-2017
Reg.Year: 2017

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Third Party Veh No: SMN9496R
Date of Accident: 09/09/2022
Estimator: TING AN
Surveyor:

77	FRONT FENDER LH	1		Rn \$215.00	✓
78	FRONT FENDER RH	1		Rn \$215.00	X
79	FRONT FENDER "HYBRID" EMBLEM LH	1		Rn \$30.00	✓
80	FRONT FENDER "HYBRID" EMBLEM RH	1		Rn \$30.00	X
81	FRONT FENDER INNER SHIELD LH	1		Rn \$95.00	X
82	FRONT FENDER INNER SHIELD RH	1		Rn \$95.00	X
83	FRONT FENDER GARNISH COVER LH	1		\$50.00	?
84	FRONT FENDER GARNISH COVER RH	1		Rn \$50.00	X
85	FRONT DOOR LH	1		REPAIR	
86	FRONT DOOR RH	1		REPAIR	
				SUB TOTAL	\$20,613.00
				COST +10%	\$2,061.30
				PARTS TOTAL	\$22,674.30

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$	
1	REAR WINDSCREEN SEALANT	1		Rn \$80.00	✓
2	REAR TAILGATE INNER TRIM BOARD CLIPS	1		Rn \$50.00	✓
3	REAR BUMPER REVERSE SENSOR	1		Rn \$300.00	2000n
4	REAR BUMPER CLIPS	1		Rn \$50.00	✓
5	REAR REVERSE CAMERA	1		\$150.00	?
6	REAR NUMBER PLATE & HOLDER	1		Rn \$50.00	450n
7	REAR END PANEL JOINT SEALANT	1		Rn \$100.00	300n
8	REAR END PANEL UPPER COVER CLIPS	1		Rn \$40.00	✓
9	REAR FENDER INNER TRIM CLIPS LH	1		Rn \$50.00	✓
10	REAR FENDER INNER TRIM CLIPS RH	1		Rn \$50.00	X
11	FRONT BUMPER CLIPS	1		Rn \$50.00	✓
12	FRONT BONNET INSULATOR CLIPS	1		Rn \$40.00	✓
13	FRONT SUPPORT PANEL UPPER COVER CLIPS	1		\$40.00	?
14	FRONT NUMBER PLATE & HOLDER	1		Rn \$50.00	450n
15	FRONT BATTERY	1		\$180.00	?
16	FRONT FENDER INNER SHIELD CLIPS LH	1		Rn \$40.00	X
17	FRONT FENDER INNER SHIELD CLIPS RH	1		Rn \$40.00	X
18	RADIATOR COOLANT	1		\$80.00	?
				S/N TOTAL	\$1,440.00

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Model: TOYOTA PRIUS HYBRID 1.8S CVT
Chassis: ZVW506080425-2017
Reg. Year: 2017

Third Party Insurer: ALLIANZ
Third Party Veh No: SMN9496R
Date of Accident: 09/09/2022
Estimator: TING AN
Surveyor:

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST REAR & FRONT ACCIDENT AREAS & ETC.

1200
\$2,500.00

LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT REAR TAILGATE, REAR TAILGATE OUTER GARNISH COVER, REAR BUMPER, FRONT BONNET, FRONT BUMPER, FRONT FENDER LH, FRONT FENDER RH, FRONT DOOR LH, FRONT DOOR RH & ETC.

1800
\$2,000.00

LABOUR CHARGES TO REMOVE & REFIX REAR WINDSCREEN GLASS, REAR WINDSCREEN MOULDING, REAR WINDSCREEN SEALANT & ETC.

\$150.00 ✓

LABOUR CHARGES TO REMOVE & REINSTALLED REAR TAILGATE INNER MECHANISM & ETC. TO EFFECT REPLACE OF REAR TAILGATE.

\$120.00 60

LABOUR CHARGES TO REMOVE & REPLACE REAR BUMPER REVERSE SENSOR & ETC.

\$100.00 50

TO REFILL AIRCON GAS & ETC.

\$150.00 100

TO TUFF KOTE & UNDERSEAL MATERIALS & ETC.

\$150.00 120

TO DIAGNOSIS FAULT CODE & RESET MEMORY.

\$150.00 7

TO CHECK WIRING & ELECTRICAL SYSTEM.

\$100.00 80

LABOUR TOTAL \$5,420.00

TING AN

TOTAL \$29,534.30

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:

Head office

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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	12/09/2022 14:29 (SGT)
Reported by	Driver
Date of Accident	09/09/2022 10:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE EXPRESSWAY (NEAR EXIT 15)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR962L
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	KINETIC HOLDINGS PTE LTD
Company Reg No	201618392N
Email Address	support@kinetic-alliance.com
Mobile Phone No	(Phone) +65-97849075
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	PRIUS HYBRID 1.8S CVT
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	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNA00009432202

DRIVER

Name of Driver	LIM DE MAI, RON
NRIC No	S9125077B
Date Of Birth	10/07/1991
Occupation	Indoor

Vehicle Registration Number	SMN9496R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKP8990A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

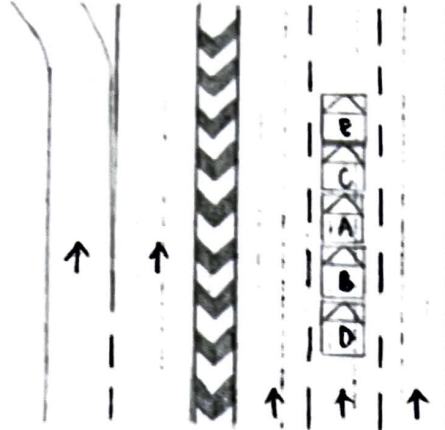
DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	GBL5918H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	GBJ1956J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-

Sketch Plan



- (A) - SUR963L
- (B) - SAIN9996R
- (C) - SEP0910A
- (D) - GBL5918H
- (E) - GBL1956J

LOCATION: PE EXPRESSWAY
(NEAR EXIT 15)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT: T/2022 0909/2071.

Note: Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

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 Personnel's Signature
Name:
NRIC/TIN No.:

() Claim Own Policy () Claim Third Party () Reporting Only
(✓) Claim ODP at other workshop (OPTIMA NERES P/L)



SINGAPORE POLICE FORCE

Police Station Of Origin
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No 1800-7659999



T/20220909/2071

1 of 4

Report No T/20220909/2071

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GOV

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
09/09/2022 17:33

Vide Report No.:

Station Diary No.:
93

Informant's Particulars

Name of Informant: LIM DE MAI, RON			Address: APT BLK 676 CHOA CHU KANG CRESCENT #05-451 SINGAPORE 680676		
ID Type / ID No NRIC NO / S9125077B			Contact No.: Home/Office: Mobile: 91817256		
Nationality: SINGAPORE CITIZEN			Email: LDMRON@GMAIL.COM		
Sex: Male	Age: 31	Date of Birth: 10/07/1991	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:		

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General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/09/2022 10:45	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit: 80 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBJ1956J	Lorry	MITSUBISHI	CANTER FEA01BR1S DEK (CBU)	Orange	No Damage	0
GBL5918H	Van	TOYOTA	HIACE VAN TURBO 4 DR AUTO	White	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999



T/20220909/2071

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Report No. T/20220909/2071

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKP8990A	Car	BMW	116I A/T ABS D/AIRBAG 2WD 5DR HID DSC	White	Slightly Damaged	0
SLR962L	Car	TOYOTA	PRIUS HYBRID 1.8S CVT	Silver	Seriously Damaged	1
SMN9496R	Car	RENAULT	GRAND SCENIC IV 1.5 DCI AT EU6	Brown	Slightly Damaged	0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM DE MAI, RON	ID No.	S9125077B
Related Vehicle	SLR962L (Car)	Contact No.	91817256
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	09/09/2022	Date Discharge	NIL
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

On 09/09/2022, at about 1046hrs, at PIE toward Changi Airport, beside upper serangoon exit. I was a gojek driver with one passenger in my Vehicle (Order No: RB-120688-5918623). I was travelling at the second right lane and the traffic was very heavy with wet surface as it was drizzling. It was a Chain Collision which involve First vehicle GBJ1956J then SKP8990A then my vehicle (SLR962L) then followed by the fourth Vehicle SMN9496R then last vehicle GBL5918H. The accident started when first 2 vehicle had completely stop and I also completely stop my vehicle at stationary, suddenly the fifth vehicle collided with fourth vehicle then came collided with the rear of my vehicle which then I collided with the second follow by first vehicle. Only my vehicle was tow away and my passenger was not injury. I felt unwell on my lower back after the collision and went to hospital for X-RAY at 1300hrs by myself without ambulance conveyed, and was given MC 7 days. I did not have the other parties particular as they refused to exchange the particulars.

I am lodging this report for recording and for insurance purposes.