

ASS. REC. BY:

REF:

C72/ 22009626/Kw

802.11ac

1000Mbps

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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

03

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

In/Out

Veh No:

SLG 1943R Yr Regn: 06.17

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

Truck / Trailer or

Make:

Mit Lancer

c.c.

1590

Colour

M. Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

31801

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JMY SRC YIAGU 006903

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:

205/80R16

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

P

mm

R/Bal.

P

mm

L/Bal.

P

mm

L/Bal.

P

mm

D.O.A.

4/9/22

D.O.I.

5/10/2022

Survey held at

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

N/S

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

OPC

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS. SI

Fuel

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

Lump Sum / I.B.I. (\$



ComfortDelGro Engineering

205 Braddell Road S(579701)

**ACCIDENT REPAIR ESTIMATES**

Our Ref:

Type of Claim : TPVehicle No. : SLQ1943RMake & Model : MITSUBISHI LANCERYear of Manufacture : 2017Chassis No. : JMYSRCY1AGU006903Ins Company : GEEngine No. : 4A92CP5440Excess : Policy No. : Date of Accident : 04.09.2022Time of Accident : 1120Suggested Days of Repair : In-house Vehicle Assessor**Repair Estimates**Case Owner : Johari BHSignature : Parts (a) Cost / List Price Items \$ 2,398.00Plus/Less 25% \$ 599.50Total of Cost / List \$ 1,798.50(b) Nett Price Items \$ -Less Total of Nett Item (c) Special Nett Items \$ -Total Parts Cost (Appendix A) \$ 1,798.50Labour (Appendix B) \$ 1,650.00Total Repair Cost \$ 3,448.50

Contact No

**Frt Counter Operation**

63837103 - Patrick Tia

[PatrickTia@sparkcarcare.com](mailto:PatrickTia@sparkcarcare.com)

63837730 - Brenda Ng

[BrendaNg@sparkcarcare.com](mailto:BrendaNg@sparkcarcare.com)

63837466 - Rohani

[RohaniM@sparkcarcare.com](mailto:RohaniM@sparkcarcare.com)**Workshop Operation**

63837656 - Ngo Toh Wee

[Ngotw@sparkcarcare.com](mailto:Ngotw@sparkcarcare.com)

63838115 -

63837362 -

*Not Authorized*  
*L/Rp B*  
*Murphy After Pain*

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

Name of Surveyor : HennrichCompany : CKKSurvey conducted on : 5/10/22 at **Remarks By Surveyor**(a) The repair of this vehicle is authorized / is not authorized until further notice.(b) Recommended Days of Repair : 03 day(s)(c) Resurvey : Required / Not Required(d) Excess : \$ (e) Signature of surveyor : De Date: 5/10/22



# Spark Car Care

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

## Spare Parts

Vehicle No : SLQ1943R Case Owner : Johari BH  
Make & Model : MITSUBISHI LANCER Year Manufacture : \_\_\_\_\_  
Chassis No : JMYSRCY1AGU006903 Engine No : 4A92CP5440  
Sales Order : \_\_\_\_\_ Supplier : \_\_\_\_\_  
Order By : \_\_\_\_\_ Type of Claim : TP

S/No	Part Description	QTY	Cost Price	List Price	Nett Price	S/N	Disposit Surveyo
1	LHF HEADLAMP	1	<i>h</i>	\$ 792.00			<i>h</i>
2	LHF FENDER	1	<i>h</i>	\$ 588.00			<i>X</i>
3	FRONT BUMPER	1	<i>h</i>	\$ 858.00			<i>7</i>
4	FRONT BUMPER CLIP	15		\$ 90.00			<i>7</i>
5	FRONT BUMPER SIDE RETAINER LH	1	<i>h</i>	\$ 22.00			<i>X</i>
6	LHF FENDER CLIP	8	<i>na</i>	\$ 48.00			<i>X</i>
7							
8							
9							
10							
11							
12							
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Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

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

Vehicle No. : SLQ1943R  
Make & Model : MITSUBISHI LANCER

: **Johari BH**

: **2017**

**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:

*Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a 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 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	06/09/2022 10:46 (SGT)
Reported by	Both
Time of Accident	04/09/2022 11:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Northshore Walk
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ1943R
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	Wong Kah Mun
NRIC No	SXXXX065F
Email Address	bonkerz16@hotmail.com
Mobile Phone No	(Phone) +65-98622033
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Lancer
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	1600

### INSURANCE COMPANY

Name of Insurance Company	Great Eastern General Insurance Limited
Policy Number / Cover Note Number	V5005446

### DRIVER

Name of Driver	Wong Kah Mun
NRIC No	SXXXX065F
Date Of Birth	16/12/1974
Occupation	Indoor

# 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 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. 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/mat 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.

  
06.01.2022 08:30hrs  
Policyholder's Signature / Date & Time

N.A.

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

  
Witnessed by Reporting Centre Personnel

## Sketch Plan

MARINA  
Country Club

Northshore Plaza

