

ASIS REC BY: Taufik

REF: 03/CT/22009653/Tg, y3

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / NS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop/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: 970K. ~~XX~~

IDAC Accident Report \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 13 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS ~~WP~~

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Dennis

Veh No: SL44255C Yr Regn: 2017, NOV

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

Truck / Trailer or

Make: Subaru Impreza 1.6 cc 1600

Colour: Blue A/C: Insured / Std / NI / NA

Sp. Reading: 81165 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JFIGK3KCS 11900 4901

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205 / 50R17

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / 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. \_\_\_\_\_ D.O.L. 3/9/22

Survey held at Motor Image Langkai

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	Action / Instruction
	Taufikh finalised final fig \$16369.04, 13 days. (Red \$1914, 10%)

Date/Time, File Pass to?

1) 23/05 Typist

Date/Time, File Return to?

2) \_\_\_\_\_

Report Format: MER-TP

Comp. Sum / L.B. / P. 16369.04

Days Of Repair: 13

Resurvey No. of Trip: 2

Add Fee: ☐ Site Insp (\$ \_\_\_\_\_)

☐ Interview (\$ \_\_\_\_\_)

☐ Tech. Invs (\$ \_\_\_\_\_)

☐ Weekend (\$ \_\_\_\_\_)

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S + RS. SI. \_\_\_\_\_

Photos \_\_\_\_\_

Others \_\_\_\_\_

TOTAL

MOTORIMAGE ENTERPRISES PTE. LTD.  
25 LENG KEE ROAD  
SINGAPORE 159097

ESTIMATE : ACCIDENT/BODY REPAIRS  
WORKSHOP : LENG KEE  
CONTACT NO :  
REFERENCE : INS/IC/CHI/0206/2022  
DATE : 29-SEP-2022

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD  
3 ANSON ROAD  
#15-00 SPRINGLEAF TOWER  
SINGAPORE S(079909)  
TEL : 6389 6111  
FAX : 6222 1033

OWNER'S NAME : CHIN AH SAM  
ADDRESS : APT BLK 106A DEPOT ROAD #24-567

TELEPHONE NO : S(101106)  
: 97439070

TYPE OF CLAIM : THIRD PARTY CLAIM  
POLICY NO : SI20V13772 LIBERTY INS  
VEHICLE NO : SLU4255C  
MODEL CODE : GK3AK2C  
MODEL/YEAR : IMPREZA 4D 1.6I-S AWD CVT  
ENGINE NO : FB16YB10548  
CHASSIS NO : JF1GK3KC5HG004901  
MILEAGE : 1 KM  
DATE IN : 29/09/2022  
LIABILITY : 0.00  
EXCESS CLAUSE : 0.00  
ESTIMATE BY : DENNIS LEONG JIA HUI  
ACCIDENT DATE : 29/09/2022

Print Date : 29/09/2022  
Print Time : 16:02:06

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SLU4255C

S/NO JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1 TPCLAIM	CONDUCT BODYWORK REPAIR (THIRD PARTY CLAIM) AGAINST CHINA TAIPING (GBG9324)		
2 ZZ/001	DOA:27/09/2022 TIME:1615HRS LOCATION:ALONG MARGARET RD TOWARDS JLN BUKIT MERAH		
3 ZZ/002	REPLACE REAR BUMPER,BUMPER BEAM,REAR BOOTLID,END PANEL,SPARE TYRE PANEL & REAR RH QUATER PANEL	600 3720.00	3000.
4 ZZ/003	RESPRAY REAR BUMPER,REAR BOOTLID,BUMPER BEAM, END PANEL,SPARE TYRE PANEL	520 2700.00	2080.
5 ZZ/004	TRANSFER (BOOTLID) MECHANISM	200.00	150.
6 ZZ/005	REMOVE & REFIX CARPET,SEATS TO FACILITATE REPAIRS	400.00	✓
7 ZZ/006	APPLY SEALANT TO EFFECTED AREA	200.00	100.
8 ZZ/007	TO SUPPLY & INSTALL REVERSE SENSOR	400.00	✓nm
9 ZZ/008	CONDUCT (REAR) LIGHTING TEST	50.00	✓
10 ZZ/009	CONDUCT (REAR BOOTLID) WATER LEAK TEST	50.00	✓
11 ZZ/011	FAULT DIAGNOSTIC (RESET)	280.00	✓
12 ZZ/012	SUNDRIES	100.00	20.
13 ZZ/013	REMOVE & INSTALL REAR WINDSCREEN	300.00	✓
14 ZZ/014	TO SUPPY & INSTALL (REAR) WINDSCREEN TINTED FILM	145.00	✓
15 ZZ/10	CONDUCT (REAR) ANTI-RUST COATING	580.00	?
TOTAL LABOUR CHARGES		9125.00	



MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SLU4255C

S/NO	PARTS DESCRIPTION	PARTS NUMBER	DAMAGED PARTS & PRICES			S/LIST REMARKS
			NETT	LIST	S/NETT	
1	PNL SD OUT QTR RRH	51439FL1409P	973.10	but	✓	
2	R FLOOR PANEL 4D	52129FL0319P	444.00	?		
3	SKIRT COMPL R 4D	52401FL0309P	272.70	?		
4	TRUNK LID COMPL	57509FL0109P	624.00	bt	✓	
5	HINGE TRUNK RH	57520FL0009P	74.00	bt	✓	
6	HINGE TRUNK LH	57520FL0109P	74.00	bt	✓	
7	WSTR TRUNK	57532FL010	92.50	?		
8	BUMPER FACE R 4D FHI	57704FL240	466.20	de	✓	
9	BRKT SD R 4D FHI RH	57707FL380	31.50	?		
10	BRKT SD R 4D FHI LH	57707FL390	31.50	?		
11	BRKT CORNER R 4D RH	57707FL480	18.50	?		
12	BRKT CORNER R 4D LH	57707FL490	18.50	?		
13	BEAM COMPL R EU	57711FL0419P	208.60	bt	✓	
14	COVER HOOK R 4D FHI	57731FL560NN	9.30	de	✓	
15	WINDOW GL ASSY R EXP	65109FL020	2016.50	nei	✓ photo.	
16	DAM RUBBER LWR FHI	65145FL010	8.50	nei	✓	
17	MOLDING R FHI	65158FL000	40.00	ne	✓	
18	LENS & BODY COMPL	84912FL000	37.00	cut	✓	
19	LENS & BODY COMPLRH	84912FL100	388.50	crq	✓	
20	LENS & BODY COMPL LH	84912FL110	388.50	?		
21	LENS & BODY COMPL LH	84912FL13A	207.20	cut	✓	
22	LENS & BODY COMPLRH	84912FL140	207.20	cut	✓	
23	PACKING LH	84940FL07A	18.50	nei	✓	
24	PACKING RH	84940FL08A	18.50	nei	✓	
25	PACKING LH	84940FL09A	18.50	nei	✓	

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SLU4255C

S/NO	PARTS DESCRIPTION	PARTS NUMBER	DAMAGED PARTS & PRICES			
			NETT	LIST	S/NETT	S/LIST REMARKS
26	CLIP 2 PCS	909140062	6.00	net		
27	ORNAMENT ASSY F SIX	91174SA170	74.00	net		
28	LETTER MK R	93079FL020	81.40	net		
29	LETTER MK R IMP	93079FL050	37.00	net		
30	REAR NUMBER PLATE	WM002			45.00	net
SUB TOTAL			6885.70	0.00	45.00	0.00
LESS DISCOUNT ( NETT-20 %)			1377.14	0.00	0.00	0.00
GRAND TOTAL			5508.56	0.00	45.00	0.00
OVERALL TOTAL			5553.56			

LEGEND: REMARKS( OK ) = APPROVED, REMARKS( X ) = NOT APPROVED

SUMMARY OF ESTIMATE FOR VEHICLE REGN NO SLU4255C

TOTAL LABOUR CHARGES	9125.00
TOTAL SPARE PARTS CHARGES	5553.56
GRAND TOTAL	14678.56 *

\* All charges do not include GST.

SURVEYOR'S PARTICULARS

NAME	:	
SURVEYED DATE	:	
AUTHORIZED DATE	:	
EXCESS CLAUSE	:	0.00
LIABILITY	:	0.00
REMARKS	:	

Taufik 97495749/62563561.  
WP' 30/9/22 @ 35pm  
p/p Resurvey before paint  
9-10 days  
taufik@lkkauto.com

PLS NOTE : This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges & spare parts in the process of repairs, we shall inform you accordingly.

**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 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	28/09/2022 16:18 (SGT)
Reported by	Both
Date of Accident	27/09/2022 16:15 (SGT)
Exact Location of Accident	Margaret Dr, Singapore
Additional Location Information	ALONG MARGARET ROAD TOWARDS JALAN BUKIT MERAH
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU4255C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHIN AH SAM
NRIC No	S1057031Z
Email Address	JANETCPP@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-97439070
Alternative Phone No	+65-96688446

### VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Impreza
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	0

### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SI20V13772

### DRIVER

Name of Driver	CHIN AH SAM
NRIC No	S1057031Z
Date Of Birth	10/03/1947
Occupation	Indoor



Date Of Driving Pass	18/10/1974
Driving experience	47 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97439070
Alt. Phone Number	+65-96688446
Email Address	JANETCPP@YAHOO.COM.SG
Address	APT BLK 106A DEPOT ROAD #24-567
Address complement	-
Postcode	101106
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 - Head to Rear
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?	Yes
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	Bukit Merah West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003779999
Alt. Police Station Phone No	(Fax) +65-63773923
Police Station Address	500 Bukit Merah View #01-01 Singapore 159682
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ATTACHED

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH TP

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBG9324X
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) .....	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	BABY
Gender .....	-
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	GBG9324X
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	Yes

##### INJURED 2

Name of injured person .....	WIFE
Gender .....	-
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	GBG9324X
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	Yes

**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 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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

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

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

**Sketch Plan**

<div style="position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black;"></div> </div>	<div style="position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black;"></div> <div style="position: absolute; top: 20%; left: 40%;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">A</div> <div style="margin-left: 10px;">SLU4255C</div> </div> <div style="position: absolute; top: 40%; left: 40%;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">B</div> <div style="margin-left: 10px;">GBC9324X</div> </div> </div>
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