

ASS. REC. BY:

REF:

CS/AIS 22009716

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: _____

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 4 days Res.: Yes or NoLump Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24-HRS

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

Veh No: SLQ 5834X Yr Regn: July 2017

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

Truck / Trailer or

Make: Honda Vezel Hybrid 1496Colour: SILVER A/C: Insured / Std / NI / NASp. Reading: 627886 T/Radio: Insured / Std / NI / NAEng/No: LEB5948293C/No: KU31248277

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60 R16R: 11

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

TOYOTA / YOKO or Triangle

Front Rear

R/Bal: 5 mm R/Bal: 5 mmL/Bal: 5 mm L/Bal: 5 mmD.O.A. 28/09/22 D.O.I. 25/10/22Survey held at 2.1km Hw M207 AMIC

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

N/S Rear

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

Date / Time Action / Instruction

Allianz SLT 1387E14/11/22 Insured 2/5 3.10/1 - with 4 days of lag @ 04 days
(Red \$ 5,374.20 / 63%)

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

\$ - \$ - \$

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp. (\$☐ : Interview (\$☐ : Tech. Invs (\$☐ : Weekend (\$

Report Format: _____

Lump Sum / I.B.J. (\$) _____

Lian Her Motors

Blk 5034 #01-405 Ang Mo Kio Industrial Pk 2 Singapore 569541
 Tel : 64817221

H L Car Rental Pte Ltd
 Blk 5038 #01-405
 Ang Mo Kio Industrial Pk 2
 Singapore 569541

Vehicle No : SLQ 5834 X
 Make/Model : Honda Vezel 1.5 X A
 Year : 2017

| Qty | Description | Unit Price | Amount |
|-----|-------------|------------|--------|
|-----|-------------|------------|--------|

Estimate Cost Of Repair

| | | | |
|------|--|-----------|--------------|
| 1 pc | Rear bumper <i>cut</i> | 762.70 | \$855.60 ✓ |
| 1 pc | Rear n/s side bumper <i>Sub</i> | | \$335.60 X |
| 1 pc | Rear n/s bumper side retainer <i>Sub</i> | | \$55.10 X |
| 1 pc | Rear n/s fender arch protector <i>cut</i> | | \$175.20 ✓ |
| 1 pc | Rear n/s door <i>Rebuild</i> | | \$986.80 ✓ |
| 1 pc | Rear n/s door inner trim board <i>new & missing broken</i> | | \$485.20 ✓ |
| 1 pc | Rear n/s door glass regulator <i>new</i> | | \$176.50 X |
| 1 pc | Rear n/s door glass regulator motor <i>new</i> | | \$468.80 X |
| 1 pc | Rear n/s door rubber <i>new</i> | | \$125.60 X |
| 1 pc | Rear n/s rocker panel garnish <i>new</i> | | \$455.70 X |
| 1 pc | Rear n/s shock absorber <i>new</i> | | \$385.10 X |
| 1 pc | Rear n/s hub assy <i>new</i> | 305.30 | \$355.60 ✓ |
| 1 pc | Rear axle <i>new</i> | | \$1,250.70 X |
| | | | \$6,111.50 |
| | | Less 20 % | \$1,222.30 |
| | | | \$4,889.20 |

S Nett

| | | | |
|--------|------------------------------|--------|----------------|
| 1 pc | Rear n/s tyre rim <i>cut</i> | | \$550.00 450/- |
| 15 pcs | Clip <i>new</i> | 465.00 | \$30.00 15/- |
| | | | \$580.00 |

Labour Charges

| | |
|---|------------------|
| Remove/renew the above parts including knocking, welding & cutting. | \$1,000.00 500/- |
| To putty and spray paint | \$1,000.00 500/- |
| Check & reconnect wiring. | \$45.00 new |
| balance c/f | \$7,514.20 |

SLQ 5834 X

balance b/f \$7,514.20

Labour Charges

| | | |
|---|-------------------|------|
| To respray anti-rust proofing treatment | \$180.00 | 40/- |
| Remove/refit rear n/s door mechanism and glass to new door. | \$150.00 | 60/- |
| Remove/refit rear boot upholstery to facilitate repair. | \$100.00 | 44 |
| Remove/renew rear axle, hub and shock absorber. | \$450.00 | 80/- |
| Check and realign wheel alignment. | \$80.00 | 60/- |
| Total | <u>\$8,474.20</u> | |

25/10/22 @ 1700 hrs
Nat Andrew
L/sun

Jan 4 days.

2KK And 97237799

3877.16
L/S 3,100/-

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 11:45 (SGT) |
| Reported by | Driver |
| Date of Accident | 28/09/2022 06:45 (SGT) |
| Exact Location of Accident | Changi, Singapore |
| Additional Location Information | AIRPORT DEPARTURE TERMINAL 3 |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SLQ5834X |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|------------------------|
| Is company? | Yes |
| Name Of Registered Owner | H.L.CAR RENTAL PTE LTD |
| Company Reg No | 2XXXXX543E |
| Email Address | carrental.lh@gmail.com |
| Mobile Phone No | (Phone) +65-96602313 |
| Alternative Phone No | +65-97687073 |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Honda |
| Model | Vezel |
| 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 | 1498 |

INSURANCE COMPANY

| | |
|-----------------------------------|--------------------------|
| Name of Insurance Company | Income Insurance Limited |
| Policy Number / Cover Note Number | 5127247102-00005 |

DRIVER

| | |
|----------------|-------------|
| Name of Driver | CHUA AH HWA |
| NRIC No | SXXXX311G |
| Date Of Birth | 12/09/1970 |
| Occupation | Outdoor |

| | |
|--|-------------------------------|
| Date Of Driving Pass | 27/10/1989 |
| Driving experience | 32 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96602313 |
| Alt. Phone Number | - |
| Email Address | carrental.lh@gmail.com |
| Address | APT BLK 446 BRIGHT HILL DRIVE |
| Address complement | #05-113 |
| Postcode | 570446 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Hirer |
| 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? | No |
| Was any injured conveyed to hospital by ambulance? | - |
| Was any other vehicle or property damaged? | Yes |
| Number of Passengers (Including Driver) | 2 |
| 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 | - |

PASSENGER 1

| | |
|--------|---------|
| Name | UNKNOWN |
| Gender | Male |

DETAILS OF POLICE ACTION

| | |
|---|----|
| Was the accident reported to the police? | No |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

I WAS GOING TO ALIGHT MY PASSENGER AT CHANGI AIRPORT TERMINAL 3 DEPARTURE. SLT1387E WAS ALIGHTING A PASSENGER. I OVERTOOK HIS CAR AND SUDDENLY HE JUST MOVE OFF AND HIT THE REAR OF MY CAR. WHEN I ALIGHT, HIS HAZZARD LIGHT IS STILL ON.

ATTACHMENT(S)

| | |
|---|-----|
| Are accident photos available for attachment? | Yes |
| Was there any video captured by Car Camera? | No |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SLT1387E |
| Vehicle Manufacturer | - |

| | |
|---|--------------|
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private hire |
| 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) | - |

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.
- (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.

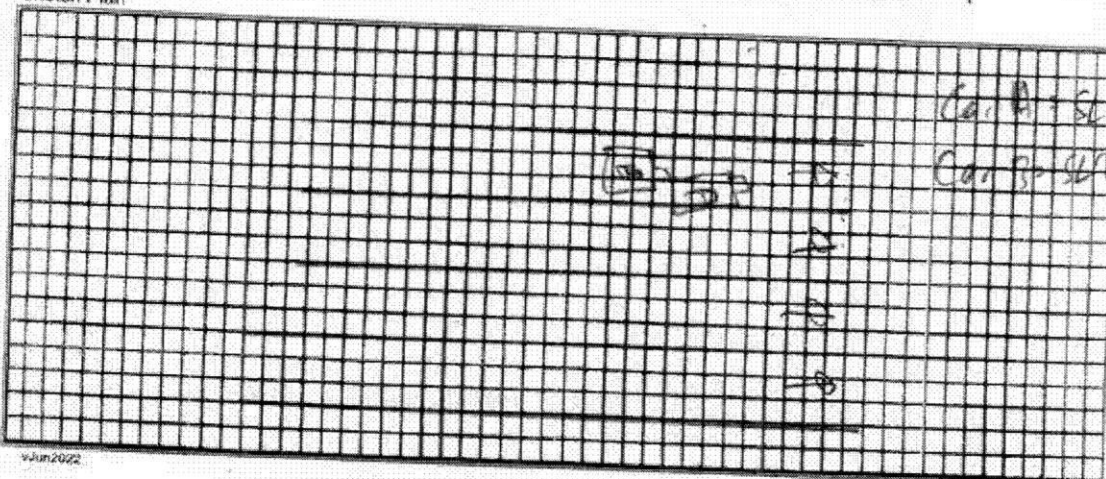
H.L. CAR RENTAL PTE LTD

Policyholder's Signature / Date & Time

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

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

Sketch Plan



vJun2022

Changi Airport Terminal 1 departure

Describe Circumstance of the Accident

I was going to alight my passenger at Changi Airport terminal 3 departure. SLT 1187E was alighting a passenger. I overtook his car and suddenly he just moved off and hit the rear of my car. When I alight, his hazard light is still on.

Declaration

I/We declare the foregoing particulars are true in every respect.

H.I. CAR RENTAL PTE LTD

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)

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