

ASS. REC. BY:

REF:

AGZ 220099101Kc

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:

883k

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

7-10 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

Smk 992A

Yr Regn:

03. 19

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

Truck / Trailer or

Make:

Honda Shuttle

C.G.

Wagon 1496

Colour

M.P. White

A/C:

Insured / Std / NI / NA

Sp. Reading

132778

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

Grk8 . 2001484

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:

R:

195/55R15

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.

5/10/22

D.O.I.

7/10/2022

Survey held at

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

8/131

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

Date / Time

Action / Instruction

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:

S + RS. SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

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

源摩哆廠

GUAN MOTOR WORKS

Business Regn. No: 08102600E

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 Fax: 6453 8292 H/P: 9742 6003

REPAIR ESTIMATE - SMK 992 A

No.	Qty	List items	
1	1	Front bumper	Bu \$ 1,050.00 —
2	1	Front bumper grille	\$ 170.00 ?
3	2	Front bumper fog lamp cover	Pr \$ 290.00 X
4	2	Rear bumper side retainer	Dit \$ 244.00 —
5	2	Front bumper corner retainer	\$ 86.00 ?
6	1 set	Rear bumper clips	Pr \$ 40.00 —
7	1	Rear bumper inner reinforcement	\$ 320.00 ?
8	1	Front grille	\$ 395.00 ?
9	1	Front grille upper chrome	Pr \$ 365.50 —
10	1	Front grille lower chrome	\$ 280.70 ?
11	1	Front grille centre "H" logo	\$ 72.40 ?
12	2	Headlamp	\$ 4,500.00 ?
13	2	Headlamp top chrome	Pr \$ 426.00 X
14	2	Headlamp lower bracket	\$ 440.00 ?
15	1	Rear bumper	Pr \$ 1,150.60 —
16	2	Rear bumper side reflector cover	Dd/Dit \$ 90.00 —
17	2	Rear bumper side reflector	\$ Pr 94.00 X
18	1	Rear bumper tow cover	\$ Dd 16.50 —
19	2	Rear bumper side retainer	\$ Dd 53.00 —
20	2	Rear bumper inner side foam	\$ 113.00 ?
21	1 set	Rear bumper clips	\$ Pr 40.00 —
22	1	Rear tailgate	Pr \$ 1,293.00 —
23	2	Rear Tailgate side lamp/reflector	CMA \$ 681.60 —
24	1	Rear tailgate outer chrome garnish/handle	CMA \$ 383.00 —
25	1	Rear tailgate number plate lamp	\$ Pr 96.00 X
26	1	Rear tailgate centre "H" logo	\$ Pr 38.00 —
27	1	Rear tailgate LH "SHUTTLE" emblem	\$ Pr 55.00 —
28	2	Rear tailgate damper	\$ Pr 330.00 X
29	1	Rear tailgate top lock	\$ Dd 157.00 —
30	1	Rear tailgate lower lock catch	\$ R 27.50 X
31	1	Rear Tailgate weatherstrip	Dd/Dit \$ 168.00 50% in
32	1	Rear tailgate inner trim board	Pr \$ 320.00 —
33	1 set	Rear tailgate inner trim board clips	\$ Pr 60.00 —
34	1	Rear tailgate windscreen glass	Shorten \$ 1,280.00 —
35	1 set	Rear tailgate windscreen moulding	Pr \$ 120.00 —
36	1	Rear tailgate wiper arm	\$ Pr 85.00 X
37	1	Rear tailgate wiper motor	\$ 395.00 ?
38	1	Rear tailgate wiper blade	\$ Pr 66.50 X
39	2	Taillamp	CMA \$ 1,041.00 —
40	1	Rear end panel	Pr \$ 560.80 —
41	1	Rear end panel top garnish	\$ Dd 155.50 —
42	1	Rear end panel keyless sensor	\$ 85.00 ?
43	1	Rear spare tyre panel	\$ 956.00 ?

Not Authorized
L1 Rep &
Penny After Paint
7-10 days

4-32-C62

1000Mbps
bit
met

- 46 1 Rear spare tyre panel top board
47 2 Rear fender inner side garnish
48 1 set Rear fender inner side garnish clips

\$	655.00	7
<i>Build</i> \$	910.00	✓
\$	<i>na</i> 60.00	✓
\$	21,694.20	
Less 20%	\$ 4,338.84	
Total :	\$ 17,355.36	

Special Nett Items

- 49 1 Front number plate
50 1 set Reverse sensors
51 1 set Reverse camera
52 1 set Rear InCar Camera
53 1 Rear number plate
54 1 set Rear windscreen sealant
55 1 set Rear end panel/spare tyre panel sealant

\$	<i>sn</i> 50.00	X
\$	<i>short</i> 250.00	<i>200sn</i>
\$	550.00	7
\$	200.00	7
\$	<i>na</i> 50.00	<i>45sn</i>
\$	<i>na</i> 50.00	<i>401sn</i>
\$	120.00	7
Total :	\$ 1,270.00	

Labour

- 1 Towing charges.
2 Labour Charges for remove/refit, cutting/welding and replacement of damages.
3 To putty and spray Spray Paintings charges.
4 To remove, refix A/c condenser, A/c piping/hoses, radiator and etc..., including refill A/c gas.
5 To remove, refix rear windscreen glass.
6 To check wirings and lightings for front & rear portion.
7 To remove, refit reverses sensors & reverse camera.
8 To remove, refit InCar camera.
9 To remove, refit rear tailgate fittings.
10 To remove, refit rear upholstery and attachments.
11 To supply and apply anti rust treatment

\$	80.00	<i>50h</i>
\$	1,800.00	7
\$	2,000.00	<i>120d</i>
\$	<i>na</i> 150.00	X
\$	140.00	<i>12d</i>
\$	50.00	<i>40d</i>
\$	120.00	<i>60d</i>
\$	80.00	<i>40d</i>
\$	80.00	<i>60d</i>
\$	120.00	<i>100d</i>
\$	120.00	7
Total :	\$ 4,740.00	

Total Parts and Labour : \$ 23,365.36

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	06/10/2022 10:02 (SGT)
Reported by	Both
Date of Accident	05/10/2022 13:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SIMEI ST 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK992A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ONG SER LIM
NRIC No	SXXXX775E
Email Address	edak_9969@hotmail.com
Mobile Phone No	(Phone) +65-96331037
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Shuttle
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	1500

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5122032521-01

DRIVER

Name of Driver	ONG SER LIM
NRIC No	SXXXX775E
Date Of Birth	07/05/1953
Occupation	Outdoor

IMPORTANT NOTICE

SKETCH PLAN

1. Please report correctly the details of the accident to speed up the claims process.
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3. Information provided must be as truthful and accurate as possible. Any willful 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.

5. 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.

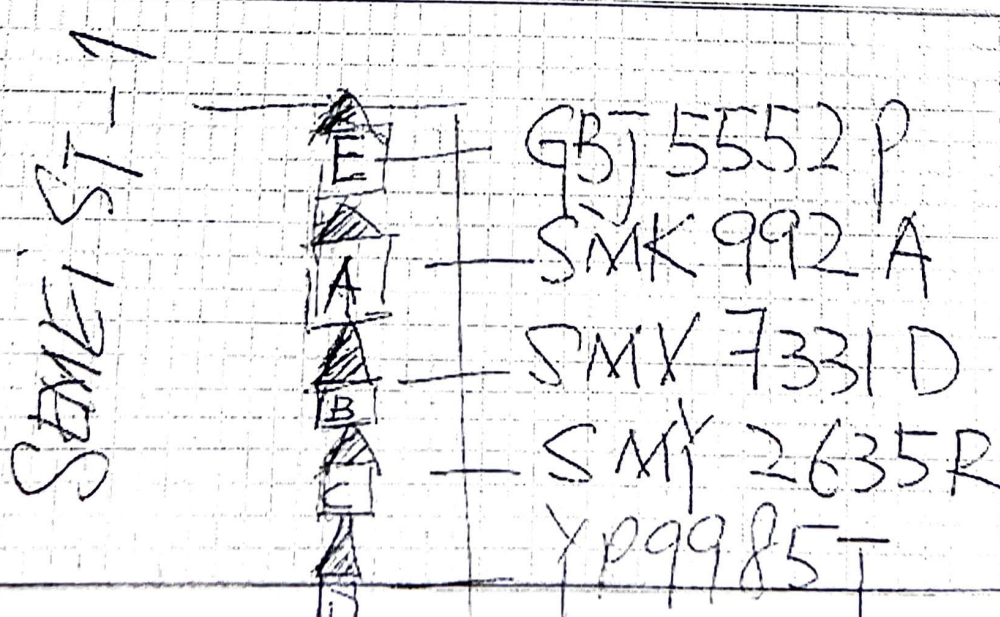


Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Policyholder's Signature / Date & Time

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

Sketch Plan





SINGAPORE POLICE FORCE

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999



T/20221005/2092

2 of 3

Report No. T/20221005/2092

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YP9985T	Lorry	ISUZU	NNR85UH4 A AMT	Blue	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMK992A	NTUC Income Insurance Co-Operative Limited	5122032521-01	28/09/2022	27/09/2023

Brief Details.

On the above-mentioned date, time and location I was driving along Simei St 3 towards Simei St 1.

When I approached the traffic light, it was red as such I stopped my vehicle. Suddenly I felt a huge impact from the rear.

The crash caused my vehicle (V2) to move forward and hit onto one lorry (V1). I proceeded to make a check and found one lorry (V5) crashed onto two vehicles (V3 and V4) behind me. The crash caused the rear of my vehicle to be hit by V3.

I felt unwell and I will be going to see the doctor. I am lodging this report for insurance claim.