

ASS. REC. BY:

REF:

CAZ/ 22010169/K

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

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:

02 days

Res.: Yes or No

Lump Sum:

1.B.1 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SMQ 1722A

Yr Regn:

10. 19

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

Truck / Traller or

Make:

Toy Vios

c.c

1496

Colour

h. White

A/C:

Insured / Std / NI / NA

Sp. Reading

49628

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MR 2B231-3401190474

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD / Rlm or

Tyre Size:

F:

195/50R16

R:

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

TOYO / YOKO or

Front

R/Bal.

3

mm

L/Bal.

3

mm

D.O.A.

8/10/22

Rear

R/Bal.

4

mm

L/Bal.

4

mm

D.O.I.

17/10/2022

Survey held at

Des. of Damages: FR / Rear / O/S / N/S / UIC / Rooftop or

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

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:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

S - R.S. SI

F. 105

Others

TOTAL

Report Format :

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

Date:

AH LIM MOTOR COMPANY

No. 10 Ang Mo Kio Ind. Park 2A #01-09 AMK Autopoint Singapore 568047
 TEL: 6483 1244 (4 lines) FAX: 6483 6170 Email: ahlimmc@singnet.com.sg
 GST:M9-0009639-E RCB NO:06470300B

SURVEYOR COPY

M/S : LIANG YING
 138B TOA PAYOH LOR 1A
 #17-22
 SINGAPORE 312138
 TEL: 81133311
 ATTN:

Estimate No: MC1903048
 Date: 11 Oct 2022
 Policy No: P10262095R02
 Veh Reg No: SMQ1722A
 Make/Model: TOYOTA VIOS 1.5 G
 AUTO

Your Ref No: SMQ1722A
 Claim Type: Third Party
 Accident Date: 08/10/2022
 TP Veh Reg No: GBE7205E

lgm
 LCIC

Not Authorised
 Repair After 2 days

Estimate Repair Cost to Vehicle No :SMQ1722A

Description	Quantity	List Price S\$	Amount S\$
SPARE PARTS			
1 RADIATOR GRILLE BASE	1 PC	254.50	7
2 RADIATOR GRILLE EMBLEM	1 PC	61.90	7
3 RADIATOR GRILLE EMBLEM COVER	1 PC	105.40	7
4 RADIATOR GRILLE MLDG LH & RH	2 PC	146.80	X
5 RADIATOR GRILLE TOP RUBBER	1 PC	25.50	X
6 RADIATOR GRILLE CTR BUSH	1 PC	20.90	X
7 FRONT BUMPER	1 PC	525.80	7
8 FRONT BUMPER CLIPS	4 PC	19.20	7
9 FRONT BUMPER CTR GRILLE	1 PC	96.60	X
10 FRONT BUMPER LOWER GRILLE	1 PC	387.30	✓
11 FRONT BUMPER LOWER GRILLE LAMP LH & RH	2 PC	1,383.20	X
12 FRONT BUMPER LOWER GRILLE LAMP CLIPS	4 PC	15.56	X
13 FRONT BUMPER LOWER GRILLE TOW COVER	1 PC	96.60	X
14 FRONT BUMPER REINFORCEMENT	1 PC	423.90	7
15 FRONT BUMPER SIDE RETAINER LH & RH	2 PC	213.40	X
16 HEADLAMP LH & RH	2 PC	3,337.60	X
17 FOGLAMP COVER LH & RH	2 PC	187.00	X
18 AIR GUIDE TOP LH & RH	2 PC	169.40	X
19 AIR GUIDE BTM LH & RH	2 PC	136.80	X
20 AIR GUIDE CLIPS	2 PC	8.20	X
21 RADIATOR SUPPORT PANEL TOP COVER	1 PC	290.40	X
22 RADIATOR SUPPORT PANEL TOP COVER CLIPS	8 PC	33.60	X
23 FRONT FENDER COWLING CLIPS	16 PC	43.20	X
		7,982.76	
	Less 25%	1,995.69	5,987.07
Special Nett			
24 NUMBER PLATE	1 PC	35.00	35.00
LABOUR			
25 TO DISCONNECT AND CHECK ELECTRICAL WIRING, WIRE SOCKETS AND ETC. TO REMOVE AND REINSTALL DAMAGED ELECTRICAL UNITS, TEST AND RECTIFY FOR PROPER FUNCTIONING.	1 PC	40.00	X
26 TO SPRAY ANTI-RUST COATING ON AFFECTED AREAS.	1 PC	60.00	X
27 TO DISMANTLE ALL DAMAGED PARTS. TO CUT & WELD. TO KNOCK & REPAIR FRONT BONNET INNER PANELS AND AFFECTED AREAS. TO REFIT LISTED PARTS BACK SAME.	1 PC	500.00	180

Ah Lim Motor Company

Date:

AH LIM MOTOR COMPANY

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TEL: 6483 1244 (4 lines) FAX: 6483 6170 Email: ahlimmc@singnet.com.sg
GST:M9-0009639-E RCB NO:06470300B

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M/S : LIANG YING
138B TOA PAYOH LOR 1A
#17-22
SINGAPORE 312138
TEL: 81133311
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Estimate No: MC1903048
Date: 11 Oct 2022
Policy No: P10262095R02
Veh Reg No: SMQ1722A
Make/Model: TOYOTA VIOS 1.5 G
AUTO

Your Ref No: SMQ1722A
Claim Type: Third Party
Accident Date: 08/10/2022
TP Veh Reg No: GBE7205E

Estimate Repair Cost to Vehicle No :SMQ1722A

Description	Quantity	List Price	Amount
		S\$	S\$
28 TO SPRAY FRONT BONNET,FRONT BUMPER.	1 PC	500.00	200
		1,100.00	1,100.00
	Total		S\$ 7,122.07
	Add GST @ 7%		498.54
	Total Amount Payable		S\$ 7,620.61

TOTAL: SINGAPORE DOLLAR SEVEN THOUSAND SIX HUNDRED TWENTY AND CENTS SIXTY ONE ONLY

Please arrange this vehicle to be surveyed soonest possible.
Thank You

For AH LIM MOTOR COMPANY

Zila
Ah Lim Motor Company

AUTHORISED SIGNATURE

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	10/10/2022 15:51 (SGT)
Reported by	Both
Date of Accident	08/10/2022 10:08 (SGT)
Exact Location of Accident	5 Temasek Blvd, Singapore 038985
Additional Location Information	SUNTEC TOWER 5 DROP OFF PT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMQ1722A
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIANG YING
NRIC No	SXXXX463B
Email Address	JAMESMOCHIDA@HOTMAIL.COM
Mobile Phone No	(Phone) +65-81121722
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vios
Variant	VIOS 1.5 G (AUTO)
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	1496

INSURANCE COMPANY

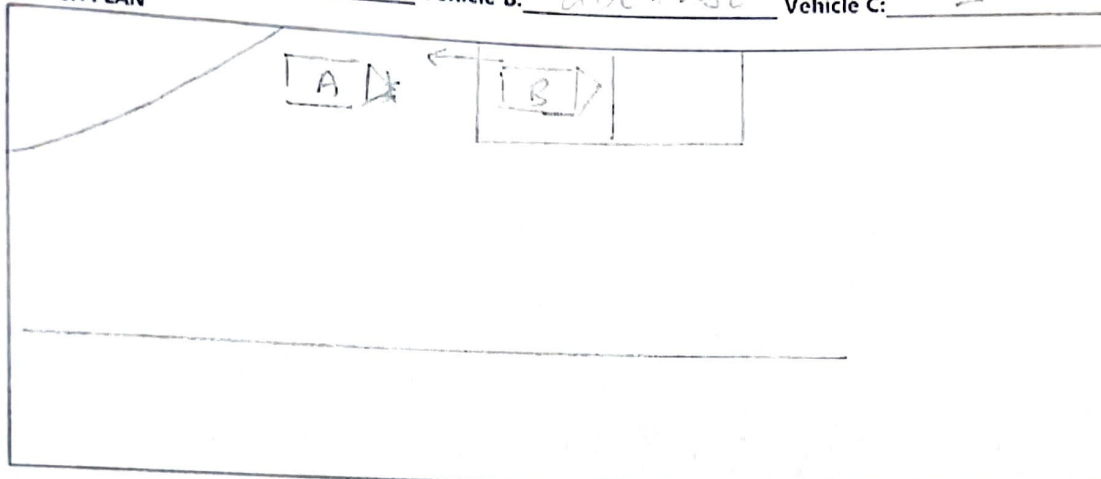
Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number	P10262095R02

DRIVER

Name of Driver	PANG LIANG YEUNG
NRIC No	SXXXX463B
Date Of Birth	14/02/1961
Occupation	Indoor

Date of accident: 8/10/22 Time: 1008 Location: Suntec Tower 5
My Vehicle A: SMQ1722A Vehicle B: GBE7205E Vehicle C: -

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 08.10.2022 at 1008 am. I parked our car outside Suntec Tower 5 (convention center) taxi drop-off point with my wife and children sitting inside.

There was a big gap in front with a van by no plate GBE7205E. All of a sudden, the van in front of us reversed and barged onto our front part of our car SMQ1722A. The driver just came out and have a look, told my wife nothing or damages incurred and drove off. (Just like a hit & run) Our no plate cracked and need a replacement together with the inconveniences to travelling to & fro to make this report.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop:

Email address:

& myself:

Email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer 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/FIN No.:

AH LIM MOTOR COMPANY