

ASS. REC. BY:

REF:

AIS/22010271kg

ASSIGNMENT

Kennerth

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

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: 880k

IDAC Accident Report: _____ Consistent? : Yes or No

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

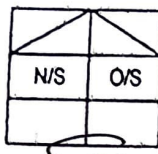
Est. Repairs: 02 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT



Veh No: SLV 4387X Yr Regn: 12, 17

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

Truck / Traller or C-HR HYBRID 1.8S A

Make: Toy Pro C.C. 1797

Colour: M.P. white A/C: Insured / Std / NI / NA

Sp. Reading: 346322 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 24X10 2087417

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: NI / S/Rlm / STD A/Rlm or

Tyre Size: F: Triangle 215/60R17

R: Tourado

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

TOYO / YOKO or

Front

R/Bal. 7 mm

L/Bal. 7 mm

D.O.A. 7/10/22

Survey held at

Rear

R/Bal. 5 mm

L/Bal. 5 mm

D.O.I. 7/11/2022

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

Date/Time, File Pass to?

☐ : Prell. Report

☐ : Final Report

Date/Time, File Return to?

Days Of Repair: _____

Resurvey No. of Trlp: _____

Survey Fee: _____

Transportation

S - RS - SI

F - RS

O - RS

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech Invs (\$

☐ : Weekend (\$

Report Format :

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

TOTAL

Lian Her Motors

Blk 5038 #01-405 Ang Mo Kio Industrial Pk 2 Singapore 569541
Tel : 64817221

Fax : 64816131

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

*Not Withdrawn
11 Supp &
Resurvey After Paint
2 days*

Vehicle No : SLV 4397 X
Make : Toyota C-HR
Year : 2017

Qty	Description	Unit Price	Amount
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Estimate Cost Of Repair

1 pc	Rear top bumper
1 pc	Rear lower bumper
1 pc	Rear bumper reinforcement
2 pcs	Rear bumper side retainer

<i>Ben</i>	\$885.60	<i>✓</i>
<i>od / wa</i>	\$455.70	<i>✓</i>
	\$483.20	<i>7</i>
\$75.10	<i>Ben</i> \$150.20	<i>X</i>
	\$1,974.70	
Less 25 %	\$493.67	
	\$1,481.03	

S Nett

1 pc	Rear reverse sensor
15 pcs	Rear bumper clip

	<i>Ben</i> \$200.00	<i>X</i>
\$2.00	<i>Ben</i> \$30.00	<i>✓</i>

Labour Charges

Remove/renew the above parts including knocking, welding & cutting.

2001
\$500.00

To putty & spray paint on accident affected portion

2201
\$550.00

Check and reconnect wiring

was \$20.00 *X*
Total \$2,781.03

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 17:24 (SGT)
Reported by	Driver
Date of Accident	07/10/2022 21:40 (SGT)
Exact Location of Accident	Newton, Singapore
Additional Location Information	NEWTON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV4397X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	L.H.CAR RENTAL PTE LTD
Company Reg No	200009761N
Email Address	carrental.lh@gmail.com
Mobile Phone No	(Phone) +65-81830735
Alternative Phone No	+65-97687073

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	C-hr
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	1797

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5127247960-000039

DRIVER

Name of Driver	GUSAROV EVGENY
NRIC No	S2768325H
Date Of Birth	30/04/1967
Occupation	Outdoor

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 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 rescind 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.

L.H 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)**Sketch Plan**

		Car 1: 4397X Car 2: 511V62891

Went to Road