

ASIS REC BY: Toupin REF: 05/EG/22010341/Tv 43

ASSIGNMENT

From: _____ Date: _____

Estimated cost: _____

OD / TP / VS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: XE 333D

Policy No: _____

Claims No: CDMCG22002197

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: 9190K

IDAC Accident Report: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

10/5/23 Lump Sum \$6500 (Red 15,622.93, 70%)

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2) 11/5/23-typist

Report Form: Merimen

Lump Sum / Total: \$6500

Veh No: SMW 6588J Yr Regn: 2022, 04

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

Truck / Trailer or

Make: Toyota Harrier Hybrid. cc 1998

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

Sp. Reading: 68019 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: STEAD3BH80J00/271

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / STD A/Rim or

Tyre Size: F: 235/55R18

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. 17/10/2022 D.O.I. 18/10/22

Survey held at: HD Perfect

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

O/S Rear

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

| Date / Time | Action / Instruction |
|-------------|--------------------------------------|
| 10/5/23 | Lump Sum \$6500 (Red 15,622.93, 70%) |
| | |
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| | |

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2) 11/5/23-typist

Report Form: Merimen

Lump Sum / Total: \$6500

Days Of Repair: 7

Resurvey No. of Trip: 2

Survey Fee: _____

Transportation: _____

Site Insp (\$ _____) S + RS. SI

Interview (\$ _____) Photos

Tech. invs (\$ _____) Others

Weekend (\$ _____) TOTAL

HD Perfect Autowork Pte Lt

Company Reg No: 202136904Z

8 Kaki Bukit Ave 4, #08-09 Premier@Kaki Bukit
Singapore 415875

Tel : 6341 6789 Fax: 6341 6778

E-mail: jlpfectautowok@gmail.com



HD PERFECT
AUTOWORK PTE LTD

DATE : 17.10.2022

TO : ERGO MOTOR CLAIMS DEPTS
VEHICLE NO : SMM6588J
MODEL : TOYOTA HARRIER
DATE OF ACCIDENT : 17.10.2022
TIME OF ACCIDENT : 11:45HRS

WE APPEND HEREUNDER THE ESTIMATED COST OF REPAIRS TO BE CARRIED OUT TO THE ABOVE VEHICLE.

CLAIM DETAIL : PARTS

| S/N | DESCRIPTION | QTY | UNIT LIST PRICE | TOTAL LIST PRICE |
|-----|-----------------------------------|-----|-----------------|------------------|
| 1 | REAR DOOR RH | 1 | \$ 1,550.60 | \$ 1,550.60 |
| 2 | REAR DOOR INNER TRIM RH | 1 | \$ 1,016.80 | \$ 1,016.80 |
| 3 | REAR DOOR SPEAKER RH | 1 | \$ 225.30 | \$ 225.30 |
| 4 | REAR DOOR GLASS CHANNEL RH | 1 | \$ 183.70 | \$ 183.70 |
| 5 | REAR DOOR OUTER HANDLE RH | 1 | \$ 364.70 | \$ 364.70 |
| 6 | REAR DOOR OUTER STRIP MOULDING RH | 1 | \$ 158.70 | \$ 158.70 |
| 7 | REAR DOOR INNER LOCK RH | 1 | \$ 600.20 | \$ 600.20 |
| 8 | REAR DOOR INNER LOCK CATCHER RH | 1 | \$ 98.60 | \$ 98.60 |
| 9 | REAR DOOR WEATHER STRIP RH | 1 | \$ 275.60 | \$ 275.60 |
| 10 | REAR FENDER RH | 1 | \$ 1,531.80 | \$ 1,531.80 |
| 11 | REAR FENDER INNER PANEL RH | 1 | \$ 867.10 | \$ 867.10 |
| 12 | REAR FENDER QUARTER GLASS RH | 1 | \$ 282.60 | \$ 282.60 |
| 13 | REAR FENDER INNER COWLING RH | 1 | \$ 247.30 | \$ 247.30 |
| 14 | REAR ABS SENSOR RH | 1 | \$ 417.60 | \$ 417.60 |
| 15 | REAR SHOCK ABSORBER RH | 1 | \$ 152.10 | \$ 152.10 |
| 16 | REAR WHEEL HUP WITH BEARING RH | 1 | \$ 1,008.20 | \$ 1,008.20 |
| 17 | REAR ANTI ROLL BAR LINKAGE RH | 1 | \$ 179.30 | \$ 179.30 |
| 18 | REAR LOWER ARM RH | 1 | \$ 524.60 | \$ 524.60 |
| 19 | REAR KNUCKLE ARM RH | 1 | \$ 465.20 | \$ 465.20 |
| 20 | REAR ADJUSTABLE ARM RH | 1 | \$ 291.60 | \$ 291.60 |
| 21 | REAR CONTROL ARM RH | 1 | \$ 271.20 | \$ 271.20 |
| 22 | REAR WHEEL RIM RH | 1 | \$ 2,604.90 | \$ 2,604.90 |
| 23 | TAIL LAMP RH | 1 | \$ 689.60 | \$ 689.60 |
| 24 | REAR BUMPER | 1 | \$ 904.80 | \$ 904.80 |
| 25 | REAR BUMPER INNER SIDE GRANISH RH | 1 | \$ 204.90 | \$ 204.90 |

TO : ERGO MOTOR CLAIMS DEPTS
 VEHICLE NO : SMM6588J
 MODEL : TOYOTA HARRIER
 DATE OF ACCIDENT : 17.10.2022
 TIME OF ACCIDENT : 11:45HRS

| | | | | | |
|----|---------------------------------------|----------------|-----------|--------------------------|----------|
| 26 | REAR BUMPER LOWER | 1 | \$ 466.10 | \$ 466.10 | mis ✓ |
| 27 | REAR BUMPER REFLECTOR | 2 | \$ 85.60 | \$ 171.20 | X |
| 28 | REAR BUMPER SIDE RETAINER | 2 | \$ 82.70 | \$ LHX 165.40 | Rflang ✓ |
| 29 | REAR BUMPER SPONGE | 1 | \$ 89.30 | \$ 89.30 | X |
| 30 | REAR BUMPER REVERSE SENSOR | 2 4 | \$ 397.80 | \$ 1,591.20 | Rflang ✓ |
| 31 | REAR BUMPER REVERSE SENSOR HOLDER | 4 | \$ 28.90 | \$ 115.60 | acc ✓ |
| 32 | REAR BUMPER REVERSE SENSOR WIREHARNES | 1 | \$ 288.10 | \$ 288.10 | X |

TOTAL PRICE \$ 18,003.90
 LESS 25% \$ 4,500.98
SUB TOTAL PRICE \$ 13,502.93

| S/N | DESCRIPTION | QTY | UNIT S/NETT | TOTAL S/NETT | |
|-----|--|-----|-------------|--------------|---------|
| 1 | REAR DOOR SEALANT RH | 1 | \$ 150.00 | \$ 150.00 | 40ner ✓ |
| 2 | REAR DOOR INNER TRIM CLIP RH (SET) | 1 | \$ 80.00 | \$ 80.00 | 20ner ✓ |
| 3 | REAR DOOR WINDOW SIDE GARNISH CLIP (SET) | 1 | \$ 60.00 | \$ 60.00 | X |
| 4 | REAR SEAT SIDE GARNISH CLIP RH (SET) | 1 | \$ 80.00 | \$ 80.00 | X |
| 5 | SIDE SKIRT CLIP(SET) | 1 | \$ 80.00 | \$ 80.00 | X |
| 6 | REAR FENDER SEALANT RH | 1 | \$ 150.00 | \$ 150.00 | 60ner ✓ |
| 7 | REAR FENDER INNER COWLING CLIP (SET) | 1 | \$ 60.00 | \$ 60.00 | 20ner ✓ |
| 8 | REAR FENDER INNER TRIM CLIP (SET) | 1 | \$ 80.00 | \$ 80.00 | X |
| 9 | REAR FENDER GLASS SEALANT RH | 1 | \$ 80.00 | \$ 80.00 | 40ner ✓ |
| 10 | REAR FENDER GLASS INNER SHIELD RH | 1 | \$ 60.00 | \$ 60.00 | X |
| 11 | REAR FENDER GLASS SOLAR FILM RH | 1 | \$ 150.00 | \$ 150.00 | X |
| 12 | TAIL LAMP CLIP (SET) | 1 | \$ 60.00 | \$ 60.00 | X |
| 13 | REAR BUMPER CLIP (SET) | 1 | \$ 120.00 | \$ 120.00 | 30ner ✓ |
| 14 | REAR WHEEL TYRE RH | 1 | \$ 650.00 | \$ 650.00 | X |
| 15 | WHEEL CAP (SET) | 1 | \$ 120.00 | \$ 120.00 | X |
| 16 | BRAKE OIL | 1 | \$ 30.00 | \$ 30.00 | X |

TOTAL \$ 2,010.00

CLAIM DETAILS: LABOUR AND SPRAY PAINTING (FRONT)

| S/N | JOB DESCRIPTION | PRICE | ADJUSTED COST |
|-----|---|-------------|---------------|
| 1 | TO PANEL BEAT, REMOVE AND REPLACE PARTS | \$ 2,000.00 | 800 |
| 2 | TO SPRAY PAINT AFFECTED AREA | \$ 1,600.00 | 900 |
| 3 | REMOVE & REFIX CUSHION SEAT/UPHOLSTERY & ROOF LINING TO FACILITATE REPAIR | \$ 350.00 | 80 |

TO : **ERGO** MOTOR CLAIMS DEPTS
 VEHICLE NO : **SMM6588J**
 MODEL : **TOYOTA HARRIER**
 DATE OF ACCIDENT : 17.10.2022
 TIME OF ACCIDENT : 11:45HRS

| | | | |
|----|--|-----------|-------|
| 4 | TUFF COAT | \$ 250.00 | 50. |
| 5 | WIRING CHECK | \$ 250.00 | 40 |
| 6 | REMOVE AND REFIX REAR FENDER GLASS LH | \$ 100.00 | 50 X |
| 7 | REMOVE AND REFIX SAFETY BELT | \$ 250.00 | X |
| 8 | FOUR WHEEL ALIGNMENT | \$ 120.00 | 80 |
| 9 | REMOVE & REFIX AUDIO SPEAKER | \$ 120.00 | X |
| 10 | REMOVE AND REFIX REVERSE SENSOR AND DISTANCE SETTING | \$ 80.00 | 40 |
| 11 | TRANSFER REAR DOOR MECHANISM LH | \$ 80.00 | 60 |
| 12 | REMOVE & REINSTALL REAR WINDOW GLASS RH | \$ 60.00 | 40 |
| 13 | REMOVE AND REFIX REAR UNDERCARRIAGE | \$ 650.00 | 7,150 |
| 14 | RESET ABS LIGHT | \$ 350.00 | X |
| 15 | TO CHECK DIAGNOSTICS OF VEHICLE MANAGEMENT/CONTROL UNITS, RESET MEMORIES TO SPECIFICATION ETC. | \$ 350.00 | 150? |

TOTAL \$ 6,610.00

ESTIMATE REPORT

TOTAL PARTS COST : \$ 15,512.93
 TOTAL LABOUR COST : \$ 6,610.00
 TOTAL REPAIR COST : \$ 22,122.93

NB: THIS IS ONLY AN ESTIMATE AND SHOULD ADDITIONAL WORK BE FOUND NECESSARY TO BE CARRIED OUT IN THE COURSE OF REPAIRS, EXTRA MATERIALS AND LABOUR COST WILL BE CHARGED ACCORDINGLY WHICH HOWEVER, YOU WILL BE INFORMED PRIOR TO ACTION TAKEN

PARTS PRICES ARE SUBJECT TO CHANGES.

YOURS FAITHFULLY,

IRENE

SERVICE ADVISOR
 IRENE
 HP : 8297 9787

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 Co

Accepted by Repairer

Signature:

Date:

Tanpin 97495749 / 12583561
 WP 18/10/22 @ 3pm
 4/5 Resurvey after repair.
 07 days
 tanpin@lkkauto.com



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 | 17/10/2022 15:57 (SGT) |
| Reported by | Both |
| Date of Accident | 17/10/2022 10:15 (SGT) |
| Exact Location of Accident | Clementi Ave 6, Singapore |
| Additional Location Information | TOWARDS PIE (BEF CLEMENTI) |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|------------------------|
| Vehicle Registration Number | SMM6588J |
| INSURED/POLICYHOLDER | |
| Is company? | No |
| Name Of Registered Owner | TEO KEE LIN |
| NRIC No | S8615067J |
| Email Address | GERDHARD.TEO@GMAIL.COM |
| Mobile Phone No | (Phone) +65-88556588 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Toyota |
| Model | Harrier |
| 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 | 2000 |

INSURANCE COMPANY

| | |
|-----------------------------------|---|
| Name of Insurance Company | Direct Asia Insurance (Singapore) Pte Ltd |
| Policy Number / Cover Note Number | MT/01049736 |

DRIVER

| | |
|----------------|-------------|
| Name of Driver | TEO KEE LIN |
| NRIC No | S8615067J |
| Date Of Birth | 02/06/1986 |
| Occupation | Indoor |



| | |
|--|----------------------------------|
| Date Of Driving Pass | 04/06/2007 |
| Driving experience | 15 YEARS AND 4 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-88556588 |
| Alt. Phone Number | - |
| Email Address | GERDHARD.TEO@GMAIL.COM |
| Address | BLK 113A ALKAFF CRESCENT #10-118 |
| Address complement | - |
| Postcode | 341113 |
| 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 - Change/cross lane |
| 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? | No |
| 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? | No |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED
STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

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 | W/PWNER |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|--------------------|
| Vehicle Registration Number | XE333D |
| 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 | TEO KEE LIN |
| Gender | - |
| Phone No | - |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | - |
| Injured person in which vehicle? | SMM6588J |
| Were seat belts worn? | - |
| Was this injured conveyed to hospital by ambulance? | - |


SKETCH PLAN

IMPORTANT NOTICE

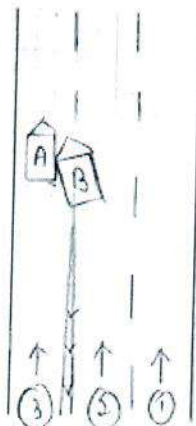
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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. The 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.
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


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


Witnessed by Reporting Centre Personnel

Sketch Plan



A = SMM 6588J

B = XE333D

Clementi Ave 6
towards PIE

(Before Clementi Loop Junction)


Describe Circumstances of the Accident

Refer to attached

Declaration

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


Witnessed by Reporting Centre Personnel

On 17.10.22 at about 10:15 hours along Clementi Ave 6 towards PIE (Before Clementi Loop Junction). While I was travelling straight on the lane 3, suddenly I feel vehicle (B) drive very closely to my vehicle. I quickly apply my horn to alert him but he still continues to cut into my lane and hence collided into my vehicle right hand side portion and causing damages to my vehicle.

Vehicle (A) : SMM6588J

Vehicle (B) : XE333D

A handwritten signature in blue ink, consisting of a stylized 'S' followed by a horizontal line.