

ASS. REC. BY:

REF:

III / 22 01 04 16/16p

C

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____ Body fix
of _____

Insured: _____

Policy No. _____

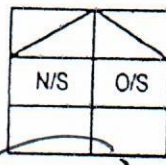
Claims No. _____

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: 879K

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 6 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:

SCE 1890X P Yr Regn: 02, 18

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

Truck / Trailer or

Make:

Toy Altis c.c. 1598

Colour

M-Black A/C: Insured / Std / NI / NA

Sp. Reading

140901 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

NR053REH 804578000

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F: 225/45 R17

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Continental

Front

Rear

R/Bal.

P mm

R/Bal.

P mm

L/Bal.

P mm

L/Bal.

P mm

D.O.A.

14/10/22

D.O.I.

20/10/2022

Survey held at

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

Rear N/S

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

Date / Time

Action / Instruction

21/11 11:00 AM 83900K Car

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S + RS \$

P. 100

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Report Format :

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

BODYFIX

NO 10 ANG MO KIO INDUSTRIAL PARK 2A #04-06

AMK AUTOPOINT SINGAPORE 568047

Tel No. : 62571289 Fax No. : 64837432

E-Mail : bodyfix@singnet.com.sg

Tax Reg. No. : 53010635C Buss. Reg. No. : 53010635C

INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET #04/05

IOB BUILDING SINGAPORE 049711

Attention : Motor Claim Department

Contact : 63476100 Fax No. : 62244174

Estimate : ES221018

Date : 17/10/2022

Vehicle Num. : SCE 1690 P

Make/Model : TOYOTA COROLLA ALTIS-2018

Chassis/Eng# : MR053REH604578000/1ZR0A79712

Accident Date : 14/10/2022

Claim No. :

Reference :

Policy No. :

Not Withheld
61 Day & 3900h
Meaning After Rain
6 days

S/N	Quantity	Particular	Unit Price	Amount S\$
LIST ITEMS :				
1.	1PC	REAR BUMPER		581
2.	2PCS	REAR BUMPER SIDE RETAINER		
3.	2PCS	REAR BUMPER REFLECTOR		
4.	1PC	REAR END PANEL		655.70
5.	1PC	REAR END PANEL TOP GARNISH		202.00
6.	1PC	TAILGATE		781.10
7.	1PC	TAILGATE REFLECTOR LH		374.45
8.	1PC	TAILGATE REFLECTOR RH		
9.	1PC	TAILGATE WEATHERSTRIP		
10.	1PC	TAILGATE CHROME HANDLE		
11.	1PC	TAILGATE LOGO		
12.	1PC	TAILGATE LOCK		
13.	1PC	TAIL LAMP RH		391.90
14.	1PC	TAIL LAMP LH		
15.	1PC	EMBLEM 'ALTIS'		
16.	1PC	EMBLEM 'COROLLA'		
17.	2PCS	TAILGATE HINGES		
18.	1PC	TAIL LAMP PANEL RH		
19.	1PC	TAIL LAMP PANEL LH		
20.	1PC	REAR FENDER (LH)		
21.	1PC	REAR FENDER (RH)		
List TotalS\$:				9,088.00
SPECIAL NETT ITEMS :				
1.	1SET	REVERSE SENSOR		
Special Nett Total S\$:				400.00

CONTINUE / ...

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:

BODYFIX**NO 10 ANG MO KIO INDUSTRIAL PARK 2A #04-06****AMK AUTOPOINT SINGAPORE 568047****Tel No. : 62571289 Fax No. : 64837432****E-Mail : bodyfix@singnet.com.sg****Tax Reg. No. : 53010635C Buss. Reg. No. : 53010635C****INDIA INTERNATIONAL INSURANCE PTE LTD****64 CECIL STREET #04/05****IOB BUILDING SINGAPORE 049711****Attention : Motor Claim Department****Contact : 63476100 Fax No. : 62244174****Estimate : ES221018****Date : 17/10/2022****Vehicle Num. : SCE 1690 P****Make/Model : TOYOTA COROLLA ALTIS-2018****Chassis/Eng# : MR053REH604578000/1ZR0A79712****Accident Date : 14/10/2022****Claim No. :****Reference :****Policy No. :**

S/N	Quantity	Particular	Unit Price	Amount S\$
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LABOUR :

TO CHECK&TEST LIGHTING FUNCTIONS & REVERSE SENSOR WIRING

RUST-PROOFING ON THE REAR ACCIDENT AFFECTED PORTIONS

LABOUR TO REPLACE ABOVE PARTS, PANEL BEAT, REPAIR & RE-ALIGN DAMAGED PARTS

TO SPRAY PAINT REAR END PANEL, REAR BUMPER, TAILGATE

REAR FENDER LEFT & RIGHT & OTHER AFFECTED AREAS

Labour Total S\$:

2 cl

80 cl 80.00

80 cl 100.00

80 cl 1,200.00

80 cl 2,000.00

3,380.00

SingDollars : Twelve Thousand Eight Hundred Sixty-Eight Only

E. & O.E.**Total S\$: 12,868.00**

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for BODYFIX