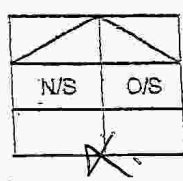


ASSIGNMENT

From: _____ Date: _____
Estimated test: _____
OD / TP / WS / TP RES / OD RES / EVA / RV / 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: _____
IDAC Accident Report _____ Consistent? : Yes or No
GIA / PR Seen _____ Consistent? : Yes or No
Est. Repairs: _____ days Res.: Yes or No
Turn Sum: _____ % 3 Val.: Yes or No
CA / REV / REP. / 24 HRS WY'
Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SKZ 8163T Yr Regn: 2016 / Feb
Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____
Make: Toyota Wish C.C. 1797
Colour: Black A/C: Insured / Std / Nil / NA
Sp. Reading 111271 T/Radio: Insured / Std / Nil / NA
Eng/No: _____
C/No: ZGE 2060 24339
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or _____
Brake: In order / Jammed / Leaked / Burnt or _____
Modi: Nil / STD / STD A/Rim or _____
Tyre Size: F: 225 / 40 R18
R: _____
SS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO , etc
Front Rear
R/Bal. 6 mm R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. _____ D.O.L. 9/11/22
Survey held at Autobacs
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? ☐ : Preli. Report
1) ☐ : Final Report
Date/Time, File Return to?
2) _____

Days Of Repair: _____
Resurvey No. of Trip: _____
Add Fee: ☐ : Site Insp: ☐
☐ : Interview ☐
☐ : Tech Insp ☐
☐ : Weekend ☐

Survey Fee: _____
Transportation: _____
Lump Sum / L.B.H. ☐



AUTOBACS CAR CARE (SINGAPORE) PTE. LTD.

8 Kaki Bukit Ave 4 #08-40/45/46 Premier@KB Singapore 415875

TEL: 6789 5155

Co. Reg No.: 201500047H GST No.: 201500047H

Email: admin@autobacs.com.sg

TO	: NTUC (GBL18M)	DATE : 06-11-2022
ATTENTION	: MOTOR CLAIMS DEPARTMENT	JOB TYPE : T/P CLAIMS
VEHICLE DETAILS		ACCIDENT DETAIL
VEHICLE NO.	: SKZ8163T	DATE : 04-11-2022
MAKE / MODEL	: TOYOTA WISH	TIME : 0910HRS

CLAIM DETAIL : PARTS PRICE (S\$)

S/N	DESCRIPTION	QTY	UNIT LIST	TOTAL LIST	
1	REAR TAILGATE	1	\$ 1,273.90	\$ 1,273.90	X
2	REAR TAILGATE WINDSCREEN MOULDING	1	\$ 177.60	\$ 152.00	X
3	REAR TAILGATE LOGO EMBLEM	1	\$ 92.80	\$ 92.80	X
4	REAR TAILGATE INNER TRIM BOARD	1	\$ 486.10	\$ 486.10	X
5	REAR TAILGATE RUBBER GUIDE STOPPER RH	1	\$ 48.20	\$ 53.60	X
6	REAR TAILGATE RUBBER GUIDE STOPPER LH	1	\$ 48.20	\$ 48.20	X
7	REAR TAILGATE MECHANISM LOCK	1	\$ 443.90	\$ 409 443.90	X
8	REAR TAILGATE WEATHER STRIP	1	\$ 398.80	\$ 398.80	X
9	REAR TAILGATE INNER HINGE	2	\$ 65.90	\$ 131.80	X
10	REAR TAILGATE INNER HANDLE	1	\$ 45.80	\$ 45.80	X
11	REAR TAILGATE REFLECTOR RH	1	\$ 415.70	\$ 229.40 415.70	X
12	REAR TAILGATE REFLECTOR LH	1	\$ 45.70	\$ 45.70	X
13	REAR TAILGATE BACK RUBBER GASKET RH/LH	1	\$ 20.80	\$ 20.80	X
14	REAR BUMPER	1	\$ 585.90	\$ 1,171.80	X
15	REAR BUMPER REFLECTOR RH	1	\$ 58.80	\$ 58.80	X
16	REAR BUMPER REFLECTOR LH	1	\$ 58.80	\$ 58.80	X
17	REAR BUMPER SIDE RETAINER RH	1	\$ 75.60	\$ 75.60	X
18	REAR BUMPER SIDE RETAINER LH	1	\$ 75.60	\$ 75.60	X
19	REAR BUMPER SCREW WITH GARNISH RH	1	\$ 30.60	\$ 30.60	X
20	REAR BUMPER SCREW WITH GARNISH LH	1	\$ 30.60	\$ 30.60	X
21	REAR BUMPER INNER SHIELD RH	1	\$ 85.30	\$ 85.30	X
22	REAR END PANEL	1	\$ 515.80	\$ 515.80	X
23	REAR END PANEL TAILGATE ANTENNA SENSOR	1	\$ 126.70	\$ 126.70	X

rear tailgate chrome ava / \$289

24	LOGO EMBLEM (VALVE MATIC)	1	\$ 78.00	\$ 78.00	✓
25	LOGO LION STICKER	1	\$ 30.00	\$ 30.00	✓
26	REAR END PANEL INNER TOP GARNISH	1	\$ 278.12	\$ 278.12	✓
27	REAR END PANEL LOWER	1	\$ 185.70	\$ 185.70	✓
28	REAR EXHAUST SILENCER BOX	1	\$ 578.50	\$ 578.50	X
29	REAR EXHAUST RUBBER MOUNTING	1	\$ 48.60	\$ 48.60	X
30	REAR EXHAUST ALUMINIUM HEAT SHIELD	1	\$ 145.80	\$ 145.80	X
31	REAR FLOOR PANEL	1	\$ 650.60	\$ 650.60	X
32	REAR FLOOR PANEL INNER UPHOLSTERY BOARD	1	\$ 447.50	\$ 447.50	X
				TOTAL : \$	8,281.52
				-25%	\$ 2,070.38
				SUB TOTAL :	\$ 6,211.14

4181.30
3135.97

CLAIM DETAIL : PARTS S/NETT

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT	
1	REAR BUMPER REVERSE SENSOR SET	1	\$ 280.00	\$ 280.00	✓
2	REAR TAILGATE WINDSCREEN SEALANT WITH PRIME	1	\$ 80.00	\$ 80.00	✓
3	REAR TAILGATE WINDSCREEN INNER GARNISH CLIPS	1	\$ 80.00	\$ 80.00	✓
4	REAR TAILGATE OUTER CHROME GARNISH CLIPS	1	\$ 60.00	\$ 60.00	✓
5	REAR TAILGATE NUMBER PLATE WITH CASING	1	\$ 65.00	\$ 65.00	✓
6	REAR TAILGATE CLIPS SET	1	\$ 60.00	\$ 60.00	✓
7	REAR TAILGATE INNER SEALANT	1	\$ 80.00	\$ 80.00	✓
8	REAR BUMPER CLIPS	1	\$ 80.00	\$ 80.00	✓
9	REAR END PANEL SEALANT	1	\$ 80.00	\$ 80.00	✓
10	REAR END PANEL INNER TOP GARNISH CLIPS	1	\$ 60.00	\$ 60.00	✓
11	REAR FLOOR PANEL SEALANT	1	\$ 80.00	\$ 80.00	✓
12	REAR FLOOR PANEL INNER TOP GARNISH SEALANT	1	\$ 80.00	\$ 80.00	✓
13	FRONT DOOR INNER GARNISH CLIP	1	\$ 80.00	\$ 80.00	✓
14	FRONT DOOR OUTER MOULDING CLIP	1	\$ 60.00	\$ 60.00	✓

S/NETT TOTAL : \$ 1,225.00

360

CLAIM DETAILS: LABOUR AND SPRAY PAINTING

TO DISMANTLE & REPLACED WITH PANEL BEATING ALL THE ACCIDENT PORTION	\$ 1,400.00	700
TO SPRAY PAINTING ALL THE ACCIDENT PORION & POLISHING AFFECTED AREA	\$ 1,200.00	700
TO APPLY ANTI-RUST & TUFF KOTE	\$ 150.00	40
TO PERFORM LIGHTING & WIRING CHECK	\$ 80.00	30
TO DISMANTLE & REINSTALL REAR WINDSCREEN PERFORM	\$ 150.00	120
TO PERFORM TRANSFER REAR TAILGATE MECHANISM & RELIGN BACK TO MANUFACTURING SPECIFICATION	\$ 250.00	60
TO DISMANTLE & REPLACED REAR BUMPER REVERSE SENSOR WITH DISTANCE SETTING	\$ 80.00	30
TO PERFORM CONDUCT WATER LEAKAGE TEST OF ACCIDENT PORTION	\$ 150.00	30

LABOUR TOTAL : \$ 3,460.00

1710

ESTIMATE REPORT

TOTAL PARTS \$	7,436.14
TOTAL LABOUR \$	3,460.00
TOTAL AMOUNT \$	10,896.14

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:

Tanfikan 9749574 9/6256356

'wp' 9/11/22 1030 am

L/S Resurvey after repair

Tanfikan e/kharto-u-u

6 days

3135.97

360

1710

5205.97

L/S 4150
6 days #

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 07/11/2022 10:24 (SGT)
Reported by Driver
Date of Accident 04/11/2022 09:10 (SGT)
Exact Location of Accident Singapore
Additional Location Information GAMBAS CRESENT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKZ8163T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner GNANA SAMBANTHAR S/O PATHMANAPAN
NRIC No SXXXX274D
Email Address UMA811_MURU@YAHOO.COM.SG
Mobile Phone No (Phone) +65-87200858
Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota
Model Wish
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 1797

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5125234198

DRIVER

Name of Driver UMARANI D/O MURUGAYA
NRIC No SXXXX398B
Date Of Birth 08/09/1976
Occupation Indoor

Date Of Driving Pass	04/03/2000
Driving experience	22 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-87200858
Alt. Phone Number	-
Email Address	UMA811_MURU@YAHOO.COM.SG
Address	1 JALAN MATA AYER #01-07
Address complement	-
Postcode	759075
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHMENTS.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBL18M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	-
Name of Driver	Commercial vehicle
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	UMARANI D/O MURUGAYA
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLANS

- Polymers and Plastics Division, Guy & Tang

Actual Owner's Signature (I enclose it for the
1999 vehicle) Date & Time

Witnessed by Reporting Officer [Signature]
(please print in NR/C/D card)

Skeleton Flag

Gambas Prince

Gambas Crescent

A SKZ 8163T
b. GB 18m

Describe the circumstances of the accident

On 04/11/2022 at about 09:10am, I was travelling along Gambia Crescent towards Gambia Ave. Upon reaching the slip road, I stopped my vehicle before the give-way lines to check on the on-coming traffic. Out of a sudden, I felt an impact from the rear. I alighted and realised vehicle B had collided onto the rear portion of my vehicle.

Declaration

I declare that the foregoing particulars are true and correct.



Signature of the driver (to be signed by the driver)



Witness's Signature (to be signed by the witness)



Witnessed by Registered Person (to be signed by the registered person)

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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	274D
Vehicle No.:	SKZ8163T
Vehicle to be Exported:	No
Intended Deregistration Date:	09 Nov 2022
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8X A
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	2ZR1588849
Chassis No.:	ZGE206024339
Maximum Power Output:	105.0 kW (140 bhp)
Open Market Value:	\$17,104.00
Original Registration Date:	03 Feb 2016
First Registration Date:	03 Feb 2016
Transfer Count:	1
Actual ARF Paid:	\$17,104.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	02 Feb 2026
PARF Rebate Amount:	\$11,117.00
COE Expiry Date:	02 Feb 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$58,190.00
COE Rebate Amount:	\$18,805.00
Total Rebate Amount:	\$29,922.00

The information contained herein is correct as at 09 Nov 2022

OK