

ASS. REC. BY:

REF: ASM / CS/ASM22011187/Kvp3

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured: SH 6843C

Policy No.

Claims No. S2M04E79

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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

09

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

16/3/23 Kenneth confirmed LS \$3100 (Red 13,762.45, 81%)

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 17/3/23-typist

Report Format: TP

Lump Sum H.B.: (\$ 3100)

Days Of Repair:

4

Resurvey No. of Trlp:

1

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S - RS, SI

Fees

Others

TOTAL

Veh No:

GBH 4088E

Yr Regn:

03, 18

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

Truck / Trailer or

Make:

Toy Dyna

c.c.

2982

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

144431

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JTFA735Y90K210264

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: M / S/Rim / STD A/Rim or

Tyre Size:

F:

Kenda

195R15X8

R:

Dun

155R12X8(0)

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

TOYO / YOKO or

Front

Rear

R/Bal.

8

mm

R/Bal.

55

mm

L/Bal.

8

mm

L/Bal.

55

mm

D.O.A.

4/11/22

D.O.L.

8/11/2022

Survey held at

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

C/S Acc body

The UIC / Chassis frame / Body Structure affected due to collision.

H C AUTO PTE LTD

160 Sin Ming Drive #05-09 Sin Ming Auto City Singapore 575722

Tel : 6457 0678 Fax : 6457 8287

Co. and GST Reg. No. : 200820153N

Date: 20 / 07 / 2013

ESTIMATE COSTS OF REPAIR

M/s VS M&E Services Pte Ltd

C/o 160 Sin Ming Drive

#05-09 Sin Ming Auto City

Singapore 575722

*Not with the
L/Ly &
Heavy After Paint
4 days*

Dear Sir / Madam ,

Vehicle no. : GBH 4088 E - Toyota Dyna 150

Accident date : 04 / 11 / 2022

Quantity	Descriptions	Amount (S\$)
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1	1 pc	o/s tail gate 'L' bracket	\$ 100.90	X
2	1 pc	o/s side gate	\$ 1,341.20	✓
3	1 pc	o/s side bracket	\$ 93.00	X
4	1 pc	o/s side bracket rubber	\$ 31.20	X
5	1 pc	o/s rear wheel rim	\$ 227.20	X
6	1 pc	fuel tank	\$ 1,258.40	X
7	1 pc	fuel tank bracket	\$ 387.30	X
8	1 pc	o/s rear mudflap	\$ 62.70	X
9	1/2 pcs	rear wheel fender 1 @ 256.90	\$ 513.80	✓
10	1 pc	o/s rear wheel rim hup bearing	\$ 232.60	?
11	1 pc	o/s rear wheel hup shaft	\$ 867.00	?
12	1 pc	o/s rear spring bar	\$ 1,514.00	X
13	1 pc	o/s rear shock absorber	\$ 189.60	X
14	1 pc	rear axle beam	\$ 3,123.30	X
			\$ 9,942.20	
Less 25%			\$ 2,485.55	
			\$ 7,456.65	
15	1 pc	o/s side gate guard	\$ 850.00	sn X
16	1 pc	o/s side gate chrome guard	\$ 650.00	sn X
17	1 pc	o/s rear wheel rim cap	\$ 350.00	sn X
18	1 pc	o/s rear wheel tyre	\$ 450.00	sn X
Balance C/FD			\$ 9,756.65	

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Balance B/FD (GBH 4088 E)	\$	9,756.65	
Labour charges	\$	2,200.00	5001
To putty and spray painting	\$	880.00	6001
Re-seal anti rust	\$	200.00	301
To check, replace, repair wiring	\$	120.00	151
Remove and refix fuel tank	\$	280.00	22 X
Remove and refix rear undercarriage	\$	450.00	22 X
To check wheel alignment	\$	80.00	601
	\$	13,966.65	
Plus : 7% GST	\$	977.67	
Sub-Total	\$	14,944.32	

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	07/11/2022 17:09 (SGT)
Reported by	Both
Date of Accident	04/11/2022 18:00 (SGT)
Exact Location of Accident	Gul Ln, Singapore
Additional Location Information	in front of No 19
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH4088E

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Vs M & E Services Pte Ltd
Company Reg No	2XXXXX131H
Email Address	vs@vsmne.com.sg
Mobile Phone No	(Phone) +65-98335433
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	3000

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7210036991-01

DRIVER

Name of Driver	Pounraj Balamurugan
Passport No/FIN	GXXXX184U
Date Of Birth	02/01/1992
Occupation	Outdoor

SKETCH PLAN

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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 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 Insurers' 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
(Name as in NRICAD card)

Sketch Plan

- 7 NOV 2022

- 7 NOV 2022

