

REP:

EGI.

AE-S. REC-BY: Taufiq

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: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: ~~100~~ 800

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: 955K

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 6 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: Mabel Vehicle: IN / OUT

Veh No: GBJ4415J Yr Regn: 2019, April

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

Truck / Trailer or _____

Make: Nissan NV200 c.c. 1461

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

Sp. Reading: 100961 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: USKYBAM 2090175431

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/60R15

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

TOYO / YOKO or _____

Front R/Bal. 6 mm Rear R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. _____ D.O.L. 18/11/22

Survey held at UAT Group

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

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

Date / Time	Action / Instruction
	finalised with MABEL LS \$6100, 6 days. (Red \$10048.46, 62%)

Date/Time, File Pass to? : Prelt. Report

1) 23/12 Typist : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 6

Resurvey No. of Trip: 2

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. invs (\$ _____)

: Weighing (\$ _____)

Survey Fee:	
Transportation:	
S + RS. SI.	
Photos	
Others	

Repair Form No: MER-OD

Lump Sum: 6100

LKT GROUP PTE LTD

BLK 3006 UBI ROAD 1

#01-384 SINGAPORE 408700

OFFICE NO. : 6846 6260 / FAX NO. : 6477 9002

E-MAIL : lkt.mabel@gmail.com / claims.lkt@gmail.com

Date : 16-Nov-22

Registration no. : GBJ4415J / NISSAN NV200 ACENTA DCI 1.5 M / 2019

DOA : 15-Nov-22 Estmate No. : LKT007_GBJ4415J_NV200

S/N	Qty	Item	Amount	
<u>LIST ITEMS</u>				
1	1	Bonnet		To Repair 0.00 <i>Ry</i>
2	1	Front fender RH		To Repair 0.00 <i>KY</i>
3	1	Front fender inner panel RH	442.00	<i>Rx</i>
4	1	Front fender inner shield RH	182.00	<i>X</i>
5	1	Headlamp RH	759.60	<i>crs</i>
6	1	Front bumper	740.50	<i>de</i>
7	2	Front bumper side retainer x2	<i>LHX</i> 97.20	<i>RH-dev</i>
8	2	Front bumper bracket x2	<i>LHX</i> 183.40	<i>RH-?</i>
9	1	Front bumper top side garnish RH	448.60	<i>mis</i>
10	1	Front bumper sponge	180.00	<i>de</i>
11	1	Front bumper reinforcement	296.00	<i>bt</i>
12	2	Front bumper reinforcement bracket x2	<i>LH-?</i> 251.20	<i>RHbt</i>
13	1	Front bumper fog lamp RH	268.20	<i>X</i>
14	1	Front grille	287.40	<i>crs</i>
15	1	Front grille logo	72.40	<i>del</i>
16	1	Front grille lower garnish	198.70	<i>ent</i>
17	1	Wiper washer tank	215.00	<i>crs</i>
18	1	Wiper washer tank motor	171.00	<i>X</i>
19	1	Front chassis member RH	726.00	<i>Ry</i>
20	1	Front support top panel	658.70	<i>bt</i>
21	1	Front support panel frame assy	722.80	
22	2	Front support side air-guide x2	<i>LH-?</i> 252.20	<i>RHde</i>
23	1	Front air-duct	125.60	<i>?</i>
24	1	Radiator assy	1045.00	<i>?</i>
25	1	Radiator fan assy	986.70	<i>?</i>
26	2	Radiator top bracket x2	144.00	<i>?</i>
27	1	Radiator top hose	95.00	<i>?</i>
28	1	Radiator bottom hose	109.52	<i>?</i>
29	1	A/C condenser	1128.40	<i>?</i>
30	1	A/C condenser high pressure pipe	255.60	<i>?</i>
31	1	A/C condenser low pressure pipe	110.00	<i>?</i>
32	1	A/C condenser suction hose	195.00	<i>?</i>
33	1	A/C condenser discharge hose	248.35	<i>?</i>
34	1	Intercooler	1270.00	<i>bt</i>
35	1	Intercooler inlet pipe	261.00	<i>?</i>
36	1	Intercooler outlet pipe	249.00	<i>?</i>
			13376.07	
Less 10%			3344.02	
			10032.05	

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Date : 16-Nov-22

Registration no. : GBJ4415J / NISSAN NV200 ACENTA DCI 1.5 M / 2019

DOA : 15-Nov-22

Estmate No. : LKT007_GBJ4415J_NV200

S/N	Qty	Item	Amount	
<u>SPECIAL NETT ITEMS</u>				
1	1	Sundries	60.00	X
2	1	A/C compressor fluid	80.00	X
3	1	Radiator coolant	130.00	7.60
4	1set	Front bonnet sticker	110.00	act
5	1set	Front bumper clips	80.00	30 all
6	1set	Front grille clips	100.00	30 all
7	1	Headlamp panel sealant RH	70.00	X
8	1	Front fender inner panel sealant RH	90.00	X
9	1	Front support top panel sealant	90.00	40 use
10	1	Front support panel assy sealant	120.00	40 use
Parts Total			930.00	
			10962.05	

<u>LABOUR & MISC CHARGES</u>				
1	1	Panel beating and strenghten parts on accident area.	1400.00	700
2	1	Check wiring system after disconnect and connect.	80.00	30
3	1	To R&R a/c condenser and confirm a/c temperature.	150.00	100?
4	1	To R&R radiator and perform pressure/cooling test.	150.00	100?
5	1	To apply undercoating for rust roofing.	200.00	40
6	1	Spray painting on accident area.	1200.00	600
Labour Total			3180.00	
Total Parts and Labour Cost of Repair			14142.05	

20% Lump sum
COR (L/S)

Pre-Repair Survey :-

Name : Taufik
 Contact no. : 97495749 / 62563561
 Date / Time : 12/11/22 @ 1140am

Not advise
 Ex : to be advise
 4/5 Body after repair
 6 days
 Taufik@lkt.com

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	16/11/2022 16:07 (SGT)
Reported by	Driver
Date of Accident	15/11/2022 08:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	NORTH STAR BUILDING DRIVEWAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ4415J
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	IBMS TECHNOLOGY PTE LTD
Company Reg No	2XXXXX505E
Email Address	margie@ibms-tech.com
Mobile Phone No	(Phone) +65-81566392
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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?	Yes
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1461

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMCG22005254

DRIVER

Name of Driver	TAY KOK MENG
NRIC No	SXXXX159B
Date Of Birth	30/07/1976
Occupation	Outdoor

Date Of Driving Pass	19/03/1997
Driving experience	25 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81566392
Alt. Phone Number	-
Email Address	margie@ibms-tech.com
Address	BLK691B CHOA CHU KANG CRESCENT #15-60
Address complement	-
Postcode	682691
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Collided into Property
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
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 SKETCH PLAN DRAFT AND REPORT

ATTACHMENT(S)

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

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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.



[Handwritten signature]

[Handwritten signature]



Policyholder's Signature / Date & Time

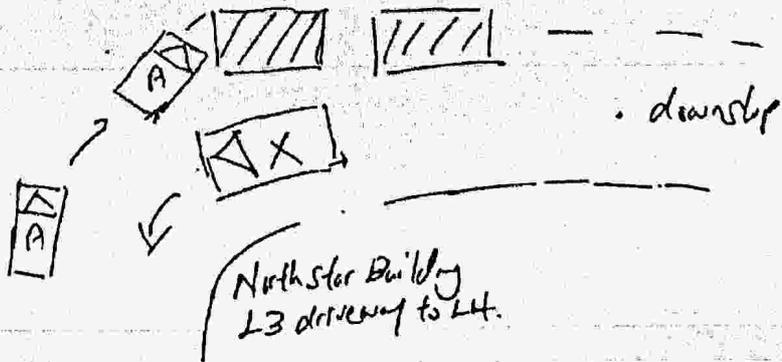
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

Ⓐ GBJ44153

up slope.



down slope.

North Star Building
L3 driveway to L4.

PW: JCN6RPI68 we chat piw
(SMALL COPY) 9671 5311

faantworks

Describe Circumstances of the Accident

On mentioned date and time, I was driving at the said driveway to office. I was driving up from Level 3 to Level 4. A big lorry driving down slope from Level 4 to Level 3 block my view when I turning right up slope accidentally hit onto the pillar partinggo

Declaration

I/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