

ASS. REC. BY:

REF: SMR/

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s MEPRIVE

of _____

Insured: _____

Policy No. _____

Claims No. _____

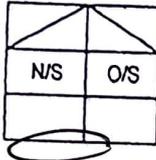
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: 83k

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: 5-6 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: SL 81913E Yr Regn: 04, 18

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

Truck / Trailer or _____

Make: Toy CAR c.c. 1797

Colour: Br. Brown A/C: Insured / Std / NI / NA

Sp. Reading: 345542 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ZYX10 2099224

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / SRIm / STD A/RIm or

Tyre Size: F: B.S 225/50R18

R: _____

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

TOYO / YOKO or _____

Front

Rear

R/Bal. 6 mm

R/Bal. 0 mm

L/Bal. 6 mm

L/Bal. 0 mm

D.O.A. 27/12/22

D.O.I. 14/12/2022

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

Date/Time, File Pass to?

: Prell. Report

Days Of Repair: _____

1) _____

: Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

Survey Fee:

2) _____

Add Fee: : Site Insp (\$ _____)

Transportation:

\$ + RS. \$ _____

Report Format :

: Interview (\$ _____)

Fuel \$ _____

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

: Tech Invs (\$ _____)

Others _____

: Weekend (\$ _____)

TOTAL

Table with multiple rows for recording fees and costs, including a 'TOTAL' row at the bottom.

Massive Trading & Auto

Blk 5038 #01-405 Ang Mo Kio Industrial Pk 2 Singapore 569541
H/p 91082728

Tan Kian Boon
Blk 262 Toa Payoh East
#18-14 Singapore 310262

Vehicle No : SLZ 1913 E
Make : Toyota C-HR
Year : 2017

*Not Attached
C1 Rep &
Pricing After Paint
5-6 days*

Qty	Description	Unit Price	Amount
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Estimate Cost Of Repair

1 pc	Rear tail-gate assy		<i>Pr</i> \$1,150.70 ✓
1 pc	Rear tail-gate glass moulding		<i>Mc</i> \$95.20 ✓
1 pc	Rear tail-gate inner trim board		<i>Pr</i> \$426.50 X
2 pcs	Rear tail-gate reflector	<i>n/s ?</i> \$485.10	\$970.20
1 pc	Rear tail-gate outer garnish		\$925.60 ?
1 pc	Rear tail-gate inner lock		<i>Pr</i> \$452.70 ✓
1 pc	Rear tail-gate emblem - Hybrid		\$48.90 ?
1 pc	Rear tail-gate emblem - C-HR		\$45.80 ?
1 pc	Rear tail-gate emblem		\$62.30 ?
1 pc	Rear boot rubber		\$205.60 ?
1 pc	Rear bumper		<i>Pr</i> \$755.60 ✓
1 pc	Rear bumper reinforcement		<i>Pr</i> \$455.70 ✓
2 pcs	Rear bumper reflector garnish	<i>n/s ?</i> \$125.60	\$251.20
1 pc	Rear lower bumper		<i>Pr</i> \$485.70 ✓
2 pcs	Rear bumper side retainer	\$75.10	\$150.20 X
1 pc	Rear buzzer		\$175.20 ?
1 pc	Rear n/s fender		<i>Pr</i> \$985.70 X
2 pcs	Rear fender arch garnish	<i>n/s ?</i> \$165.20	\$330.40
2 pcs	Rear fender inner trim board	\$550.10	<i>Pr</i> \$1,100.20 X
1 pc	Rear end panel		<i>Pr</i> \$725.70 ✓
1 pc	Rear end panel inner garnish		\$402.10 ?
1 pc	Rear exhaust silencer		\$955.80 ?
			\$11,157.00
Less 25 %			\$2,789.25
			\$8,367.75

S Nett

1 pc	Rear reverse camera
15 pcs	Rear bumper clip
1 pc	Rear reverse sensor
1 pc	Rear windscreen sealant
1 pc	Rear no plate

	<i>Pr</i> \$400.00 X
\$2.00	<i>Mc</i> \$30.00 ✓
	<i>Pr</i> \$200.00 ✓
	<i>Mc</i> \$40.00 ✓
	<i>Pr</i> \$35.00 X
balance c/f	\$9,072.75

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:

Z 1913 E

balance b/f \$9,072.75

Labour Charges

Remove/renew the above parts including knocking, welding & cutting.

\$1,200.00 *700*

To putty & spray paint on accident affected portion

\$1,200.00 *900*

Check and reconnected wiring

\$40.00 *200*

To anti-rust proofing

\$100.00 *600*

Remove/refit rear windscreen

\$120.00 *✓*

Remove/refit rear boot upholstery

\$120.00 *600*

Remove/renew rear exhaust silencer

\$120.00 *?*

Remove/refit roof lining to facilitate repair on rear n/s fender

in \$200.00 *x*

Total \$12,172.75

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 13/12/2022 12:44 (SGT)
Reported by Both
Date of Accident 11/12/2022 11:05 (SGT)
Exact Location of Accident Victoria St, Singapore
Additional Location Information VICTORIA STREET
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ1913E

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN KIAN BOON
NRIC No SXXXX311J
Email Address kianboon1311@gmail.com
Mobile Phone No (Phone) +65-96218513
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model C-hr
Variant -
Exact purpose for which vehicle was being used at time of accident Private hire
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private hire
Transmission Auto
CC 1800

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5100189316-04

DRIVER

Name of Driver TAN KIAN BOON
NRIC No SXXXX311J
Date Of Birth 27/01/1961
Occupation Outdoor

IMPORTANT NOTICE

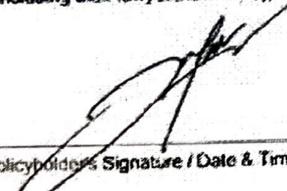
SKETCH PLAN

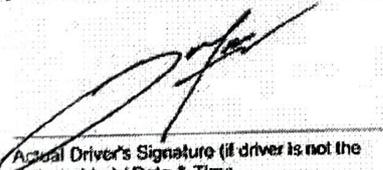
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may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

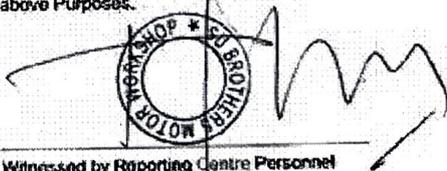
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

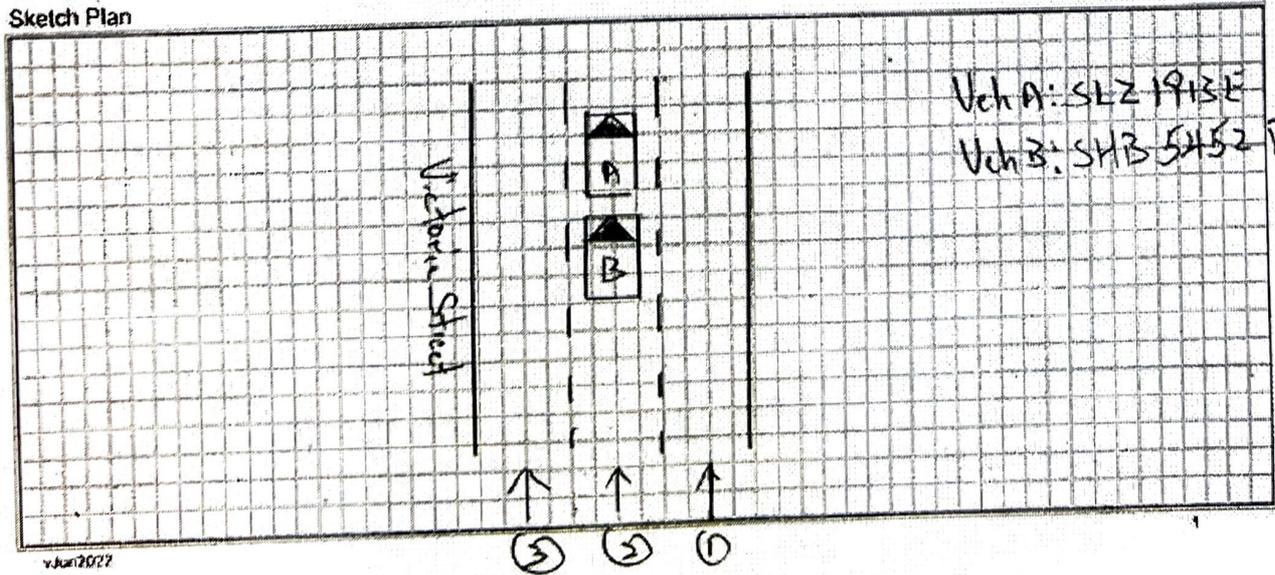
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "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 their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


 Policyholder's Signature / Date & Time


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


 Witnessed by Reporting Centre Personnel
 (Name as in NRIC/ID card)

Sketch Plan



vJun2022