ASS. REC. BY: Kenneth | REF: CTY 22013000/kp

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Optimp

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.

N/S	O/S
X	

Bal. or Market Value: $ 78K

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 09 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SGR 678S Yr Regn: 11.10

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or (A) Wagon

Make: Volvo T5 c.c 2521

Colour M. Black A/C: Insured / Std / NI / NA

Sp.Reading 128042 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: YV1MK67598 2229705

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl : Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: _____

R: 235/35R19

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	8 mm
L/Bal.	6 mm	L/Bal.	8 mm

D.O.A. 21/12/22 D.O.I. 30/12/2022

Survey held at _____

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or Rear n/s & u/c

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

Date / Time	Action / Instruction

Date/Time, File Pass to?

1) _____ ☐ : Prell. Report ☐ : Final Report

Date/Time, File Return to?

2) _____

Report Format :

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____) ☐ : Interview ($ _____) ☐ Tech Invs ($ _____) ☐ Weekend ($ _____)

Survey Fee:	
Transportation	$ - RS. SI
Parking	
Others	
TOTAL	

OPTIMAWERKZ™ SINGAPORE

OPTIMA WERKZ PTE LTD
Co. Reg. No. 201212455W
www.ow.sg /OptimaWerkz /OptimaWerkz

Date:	27/12/2022	Third Party Insurer:	CHN TAIPING
Vehicle No:	SGR678S	Third Party Veh No:	SJZ5230P
Model:	VOLVO C30	Date of Accident:	21/12/2022
Chassis:	YV1MK6759B2229705	Estimator:	VICTOR
Reg.Year:	2010	Surveyor:	KENNETH

ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S$	AMOUNT S$
1	REAR BUMPER	1		$2,400.00
2	REAR BUMPER SIDE BRACKET LH	1		$105.00
3	REAR LOWER BUMPER	1		$840.00
4	REAR BUMPER REFLECTOR LH	1		$115.00
5	REAR REINFORCEMENT	1		$1,360.00
6	REAR END PANEL	1		$4,200.00
7	REAR FENDER LH	1		$3,600.00
8	REAR INNERSHIELD LH	1		$260.00
9	REAR WHEELARCH LH	1		$450.00
10	SIDE SKIRT LH	1		$620.00
11	TAILLAMP LH	1		$820.00
12	TAILLAMP BRACKET LH	1		$135.00
13	REAR LOWER ARM LH	1		$390.00
14	REAR KNUCKLE ARM LH	1		$1,100.00
15	REAR KNUCKLE ARM BUSHING LH	1		$310.00
16	REAR WHEEL BEARING WITH SENSOR LH	1		$970.00
17	REAR ABSORBER LH	1		$540.00
18	REAR UPPER ARM LH	1		$410.00
19	REAR LOWER CONTROL ARM LH	1		$260.00
20	REAR CROSSMEMBER	1		$4,250.00
21	REAR FENDER GLASS WITH MOULDING ASSY LH	1		$1,200.00
22	REAR PARKNG SENSOR LH	1		$380.00
			SUB TOTAL	$24,715.00
			LESS 10%	-$2,471.50
			PARTS TOTAL	$22,243.50

NO.	SPECIAL NETT	QTY	UNIT S$	AMOUNT S$
1	REAR BUMPER CLIPS	1		$120.00
2	REAR LOWER BUMPER CLIPS	1		$100.00
3	REAR INNERSHIELD CLIPS	1		$80.00
4	SIDE SKIRT LH CLIPS	1		$100.00
5	END PANEL SEALANT	1		$150.00
6	REAR FENDER GLASS SEALANT	1		$100.00
			S/N TOTAL	$650.00

OPTIMA WERKZ SINGAPORE

OPTIMA WERKZ PTE LTD
Co. Reg. No. 201212455W
www.ow.sg /Optimawerkz /Optimawerkz

Date:	27/12/2022	Third Party Insurer:	CHN TAIPING
Vehicle No:	SGR678S	Third Party Veh No:	SJZ5230P
Model:	VOLVO C30	Date of Accident:	21/12/2022
Chassis:	YV1MK6759B2229705	Estimator:	VICTOR
Reg.Year:	2010	Surveyor:	KENNETH

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE,REPLACE,REFIX & READJUST REAR ACCIDENT AREA.	$1,400.00 12.0
LABOUR CHARGES TO SUPPLY PAINT & FURNISHING MATERIALS AT REAR ACCIDENT AREA	$1,000.00 7.0
LABOUR CHARGES TO REMOVE & REINSTALLED REAR FENDER GLASS LH.	$200.00 6.0
LABOUR CHARGES TO REMOVE & REINSTALLED ~~REAR DOOR INNER MECHANISM~~ & ~~ETC. TO EFFECT REPLACE OF REAR DOOR RH.~~ fender garnishes	$120.00 1.0
LABOUR CHARGES TO REMOVE & REPLACE REAR UNDERCARRIAGE LH.	$350.00 1
TO WHEEL ALIGNMENT & BALANCING.	$150.00 6.0
TO CHECK WIRING & ELECTRICAL SYSTEM.	$150.00 2.0
LABOUR TOTAL	$3,370.00

VICTOR

TOTAL **$26,263.50**

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:

Head office Branch

SF0E22CN0005 / FALCON-AIR AUTO SERVICES PTE LTD [528840]
ENTRY DATE & TIME: 23/12/2022 14:32 (SGT)
SUBMITTED BY: Anna Ng
VERSION: 1 (23/12/2022 14:32 (SGT))

Your NCD will be affected due to late reporting

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 witholding 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	23/12/2022 14:32 (SGT)
Reported by	Driver
Date of Accident	21/12/2022 11:50 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE TWDS CITY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGR678S

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WONG LI LIN
NRIC No	S0015982D
Email Address	KEM.TEO@GMAIL.COM
Mobile Phone No	(Phone) +65-91692606
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	C30
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	2531

INSURANCE COMPANY

Name of Insurance Company	United Overseas Insurance Ltd
Policy Number / Cover Note Number	dhom110170961903

DRIVER

Name of Driver	TEO KOK ENG MICHAEL
NRIC No	S0037507A
Date Of Birth	18/06/1950
Occupation	Indoor

A) SGR 678S

B) SJZ 5230P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per Police Report attached.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Driver's Signature

Reporting Centre Personnel's Signature