

ASS. REC BY: TauREF: CS/CT123000155/Top 3.

ASSIGNMENT

2024 Nov

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: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: 835K

IDAC Accident Report _____ Consistent? : Yes or No

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

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

Lump Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SK7118EYr Regn: 2014 Nov

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

Truck / Trailer or _____

Make: ToyotaC.C. 1598Colour: Blue

A/C: Insured / Std / NI / NA

Sp. Reading: 136703

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR053REH104319341

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: 205/55R16R: N

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

TOYO / YOKQ or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mm

D.O.A. _____

D.O.I. 5/1/23Survey held at Woon Meng

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?

1)

Date/Time, File Return to?

2)

Rep. Format: _____

Lump Sum / I.B.F. / P

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

Site Insp (\$)

Interview (\$)

Tech. Insp (\$)

Weekend (\$)

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

Woon Meng Motor Pte Ltd

Office : 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578
Workshop: 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578
Tel: 6316 1131 HP: 9730 2017 Fax: 6316 7050
28, Gul Drive, Singapore 629476 Tel : 63531131
(Email Adress : woonmeng @singnet.com.sg)
Co Reg No. 200603678M GST Reg No. 20-0603678M

Estimate

TP Claim

To : China Taiping Insurance (Singapore) Pte Ltd
Motor Claims Dept

Date : 05 Jan 2023

Dear Sirs :

Fax : 68804838

RE : ESTIMATE COST FOR TOYOTA COROLLA ALTIS 1.6 - SCK7118E
ACCIDENT INVOLVING SCK7118E AND GBD1815P ON 04.01.2023

<u>ITEMS</u>	<u>DESCRIPTION</u>	<u>QTY</u>	<u>PRICE</u>
1	Rear bumper	1pc	\$ 561.50 <i>de</i>
2	Rear bumper retainer @\$109.3ea	2pcs	\$ <i>RH</i> 218.60 <i>LH de</i>
3	Rear bumper reinforcement	1pc	\$ 399.50 <i>?</i>
4	Rear bumper reflector lh	1pc	\$ 59.80 <i>?</i>
5	Rear lamp (outer) lh	1pc	\$ 398.80 <i>q q</i>
6	Rear lamp (inner) lh @\$414.4ea	2pcs	\$ <i>RH * ?</i> 828.80 <i>LH ana</i>
7	Rear mudguard lh	1pc	\$ 1,149.90 <i>bu c</i>
8	Rear fuel tank cover lh	1pc	<i>Ry</i>
9	Rear fuel tank cable	1pc	<i>x</i>
10	Rear door lh	1pc	<i>Ry</i>
11	Rear door lock lh	1pc	<i>x</i>
12	Rear door hinge lh @\$	2pcs	<i>x</i>
13	Rear door inner trim lh	1pc	<i>?</i>
14	Rear mudguard inner garnish lh	1pc	<i>?</i>
15	Rear mudguard inner trim lh	1pc	<i>?</i>
16	Rear end panel	1pc	\$ 670.10 <i>?</i>
17	Rear end panel top garnish	1pc	\$ 244.30 <i>?</i>
18	Rear rubber	1pc	\$ 175.00 <i>?</i>
Sum Carried Forward			

Sum Carried Forward

19	Rear bootlid	1pc	\$	973.20 <i>bt</i>
20	Rear bootlid hinge @\$69.9ea	2pcs	\$	139.80 <i>Rv</i>
21	Rear bootlid lock	1pc	\$	403.70 <i>?</i>
22	Emblem	1pc	\$	57.30 <i>ner</i>
23	Corolla	1pc	\$	41.00 <i>ner</i>
24	Altis	1pc	\$	45.60 <i>ner</i>
25	Rear bootlid handle outer chorme	1pc	\$	193.50 <i>cut</i>

26	Rear sensor	1set	\$	220.00 <i>2000 n</i>
27	Rear number plate	1pc	\$	35.00 <i>bt</i>
28	Sealant	2pcs	\$	40.00 <i>na</i>

Labour Charge & Misc

To remove, replace, repair & install rear damaged parts.	\$	1,700.00 <i>1000</i>
To R & R rear windscreen glass	\$	150.00 <i>120</i>
To remove & install door mechansim & check for function	\$	120.00 <i>x</i>
To R & R sensor wiring.	\$	100.00 <i>30</i>
To R & R rear passenger seat	\$	180.00 <i>100? plate</i>
To R & R wiring.	\$	60.00 <i>30</i>
To putty & spray painting.	\$	1,800.00 <i>1000</i>

Total

All prices quoted are subjected to 7% GST.

This is a computer generated document. No signature is required.

Tanpin 97495749
wp 5/1/23 2410pm
4/5 Remun after repair
Tanpin e/hhauto.com
7days

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	04/01/2023 14:40 (SGT)
Reported by	Both
Date of Accident	04/01/2023 08:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Filter road towards Mandai Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCK7118E
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	Tan Boo Hock
NRIC No	SXXXX119J
Email Address	andtasing@gmail.com
Mobile Phone No	(Phone) +65-97569831
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1598

INSURANCE COMPANY

Name of Insurance Company	Etiqua Insurance Pte Ltd
Policy Number / Cover Note Number	MA024669

DRIVER

Name of Driver	Tan Boo Hock
NRIC No	SXXXX119J
Date Of Birth	18/04/1949
Occupation	Indoor

Date Of Driving Pass	25/05/1970
Driving experience	52 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97569831
Alt. Phone Number	-
Email Address	andtasing@gmail.com
Address	7 Pine Grove, #10-03
Address complement	-
Postcode	597592
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
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	Clementi Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008729999
Alt. Police Station Phone No	(Fax) +65-68728039
Police Station Address	No. Singapore 129858
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to attached sketch plan.

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	GBD1815P
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Sheikh Md Naziruuddin
Passport No/FIN	GXXXX867P
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 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:

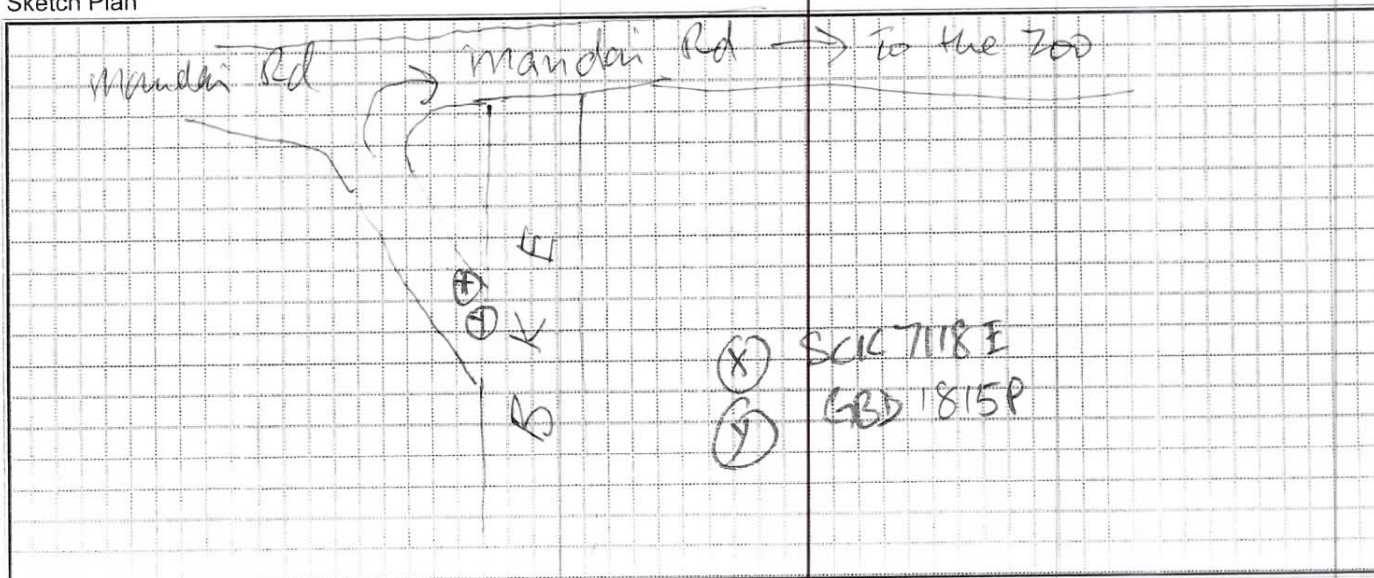
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 their 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 NRIC/ID card)

Sketch Plan



Please note that you might be able to submit an Own Damage Claim under your own policy within 14 days. 1

() Claim Own Damage (☒) Claim Third Party () Reporting Only () Claim OD/ TP at other workshop