

(08/11/13) wef

REF:

CS/MC 23000939/Rvp3

ASS. REC. BY:

240I

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To inspect Vehicle No: SFB 3228J

at Workshop m/s VANTAGE AUTOMOTIVE

of 305, ALEXANDRA RD

Insured: NTUC

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

Bal. or Market Value: 170K

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

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

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

CA / REV / REP. / 24 HRS

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

Veh No: SFB 3228J Yr Regn: 2022 10CT

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

Make: BYD ATTO3 s/R c.c. _____

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

Sp. Reading: 8448 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: L4XCE4CB2N2081245

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/55R18

R: _____

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

TOYO / YOKO or ATLAS

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mm

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

D.O.A. 20/1/22 D.O.I. 31/01/23

Survey held at VANTAGE

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

REPAIR LIMIT - 66K

Date/Time, File Pass to?

: Prell. Report

: Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$)

: Interview (\$)

: Tech. Invs (\$)

: Weekend (\$)

Survey Fee:

Transportation:

____ \$ + RS ____ SI

Photos

Others

Report Format : _____

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

Division of Vantage Automotive Limited)
 Business Registration No. 53399829L GST Registration No. M2-0000551-1
 305 Alexandra Road
 159942 Singapore
 Tel : 6376 8833
 Fax : 6477 7398

GST Registration No. M2-0000551-1

ESTIMATE



Estimate No. BY 5662	Date Estimated 25/01/2023	Page No. 1 of 2
Prepared By Clement Chia Cher-Yang		

ESTIMATE REPAIR FOR Hwang Siok Lean Doreen 51 Jalan Limau Ball Singapore 468532	ACCOUNT 5749 Income Insurance Limited 75 Bras Basah Rd NTUC Income Centre Singapore 189557
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REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SFB3228J	LGXCE4CB2N2081245	12/10/2022	Atto 3	5531

DESCRIPTION	VALUE
TO CONDUCT THIRD PARTY CLAIM AGAINST INCOME INS(SKU2375P). DOA:20.12.2022	0.00
TO REMOVE AND REPLACE REAR BUMPER AND REAR TAILGATE.	900 1,200.00
TO REMOVE AND REPLACE REAR TAILGATE GLASS AND CONDUCT WATER LEAK TEST.	600.00
TO SUPPLY AND INSTALL 3M SOLAR FILM FOR REAR TAILGATE GLASS. (NETT)	350.00
TO TRANSFER REAR TAILGATE AND BUMPER COMPONENTS FROM OLD TO NEW.	150 300.00
TO REMOVE/REFIT/INSTALL REAR SENSOR.	80 120.00
TO CONDUCT BODY CAVITY PRESERVATIONS.	60.00
SPRAY PAINT REAR TAILGATE AND REAR BUMPER.	900 1,200.00
TO CONDUCT ECU RE-PROGRAMMING AND CLEAR OF FAULT CODES TO ENSURE PROPER FUNCTION .(NETT)	600.00
SUNDRIES.	20 100.00
Total Labour 1:	4,530.00

PART NUMBER	DESCRIPTION	QTY	PRICE	DISC	VALUE
13186484-00	REAR BUMPER RIGHT LOWER SUPPORT ?	1	13.10	10.00	11.79
13186483-00	REAR BUMPER LF BRACKET ASSY ?	1	24.10	10.00	21.69
13161637-00	LEFT TRIM REAR BUMPER <i>sc</i>	1	69.00	10.00	62.10
13161636-00	RIGHT TRIM REAR BUMPER ?	1	69.00	10.00	62.10
13161517-00	TRIM OF REAR BUMPER ?	1	68.00	10.00	61.20
13220424-00	LOWER SURROUND TRIM R BUMPER ?	1	135.00	10.00	121.50
13814520-00	BUMPER BODY ASSY.,REAR ?	1	1,688.00	10.00	1,519.20
13678676-00	RR LICENSE PLATE BASE ASSY ?	1	60.00	10.00	54.00
13777456-00	BACK DOOR ASSEMBLY <i>bt</i>	1	3,480.00	10.00	3,132.00
13171273-00	BACK DOOR GLASS ASSY <i>new photo?</i>	1	2,800.00	10.00	2,520.00
13276895-00	BUILDYOURDREAM WORD MARK ASSY <i>new</i>	1	210.00	10.00	189.00
13688366-00	ATTO WORD MARK ASSY <i>new</i>	1	25.00	10.00	22.50
13182878-00	REAR PEDAL ASSY ?	1	850.00	10.00	765.00
13220230-00	RR LICENSE PLATE TRIM PANEL ASSY <i>cr</i>	1	260.00	10.00	234.00
13778327-00	REAR PANEL ASSEMBLY ?	1	1,082.00	10.00	973.80
10249754-00	PLASTIC NUT ?	10	3.00	10.00	27.00

305 Alexandra Road
 159942 Singapore
 Tel : 6376 8833
 Fax : 6477 7398

GST Registration No. M2-0000551-1



ESTIMATE

Estimate No. BY 5662	Date Estimated 25/01/2023	Page No. 2 of 2
Prepared By Clement Chia Cher-Yang		

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SFB3228J	LGXCE4CB2N2081245	12/10/2022	Atto 3	5531

PART NUMBER	DESCRIPTION	QTY	PRICE	DISC	VALUE
13777448-00	IMPACT BEAM.,REAR	1	432.00	10.00	388.80
Total Parts :					10,165.68

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"
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed is subject to final approval from Insurance Co.

Acknowledged by Repairer
 Signature:
 Date:

Rahul
Hp 90010068
5 days
P/P
31/01/23 @1570
Reby before print

Customer Name & Signature / Company Stamp	Date	Labour 1	S\$	4,530.00
		Parts	S\$	10,165.68
		Labour 2	S\$	0.00
		Excess	S\$	0.00
		Total GST @ 8%	S\$	1,175.65
Grand Total			S\$	15,871.33

The above estimates are base on visual inspection and it is possible that further materials and labour may be required upon dismantling. Should this occur, we will submit supplementary quotation for further approval. This estimate is valid for a period of 30 days only.

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 Police** within 24 hours of the accident.
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 as an offence.**
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 22/12/2022 17:16 (SGT)
Reported by Both
Date of Accident 20/12/2022 16:52 (SGT)
Exact Location of Accident 181 Orchard Rd, Singapore 238896
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFB3228J

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner HWANG SIOK LEAN DOREEN
NRIC No SXXXX240I
Email Address garyndoreentan@gmail.com
Mobile Phone No (Phone) +65-96881567
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Byd
Model ATTO 3
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 0

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd
Policy Number / Cover Note Number -

DRIVER

Name of Driver DAN TAN
NRIC No SXXXX957F
Date Of Birth 17/11/1998
Occupation Indoor



Of Driving Pass	06/04/2017
ing experience	5 YEARS AND 8 MONTHS
nder	Male
obile Number	(Phone) +65-98781502
. Phone Number	-
mail Address	garyndoreentan@gmail.com
Address	51 JALAN LIMAU BALI
Address complement	-
Postcode	468532
Is the driver the policyholder?	No
If No, Relationship of the Driver with the insured	Child
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	Raining
Road Surface	Wet

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)	2
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	-

PASSENGER 1

Name	HWANG SIOK LEAN DOREEN
Gender	Female

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

PLEASE REFER TO ACCIDENT REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKU2375P
Vehicle Manufacturer	Honda
Vehicle Model	Fit
Vehicle Variant	-

Vehicle Colour
Vehicle Category
Name of Driver
NIC No
Contact Number
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

White
Private car
ELLY HERAWATY SJARIF
SXXXX092J
(Phone) +65-96388863
9 MOUNT EMILY ROAD, #03-19
-
228492
-
-
-
-

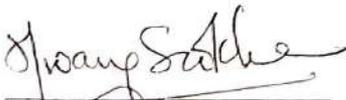
IMPORTANT NOTICE

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 Authorised 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. 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 lodgment 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:

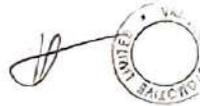
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

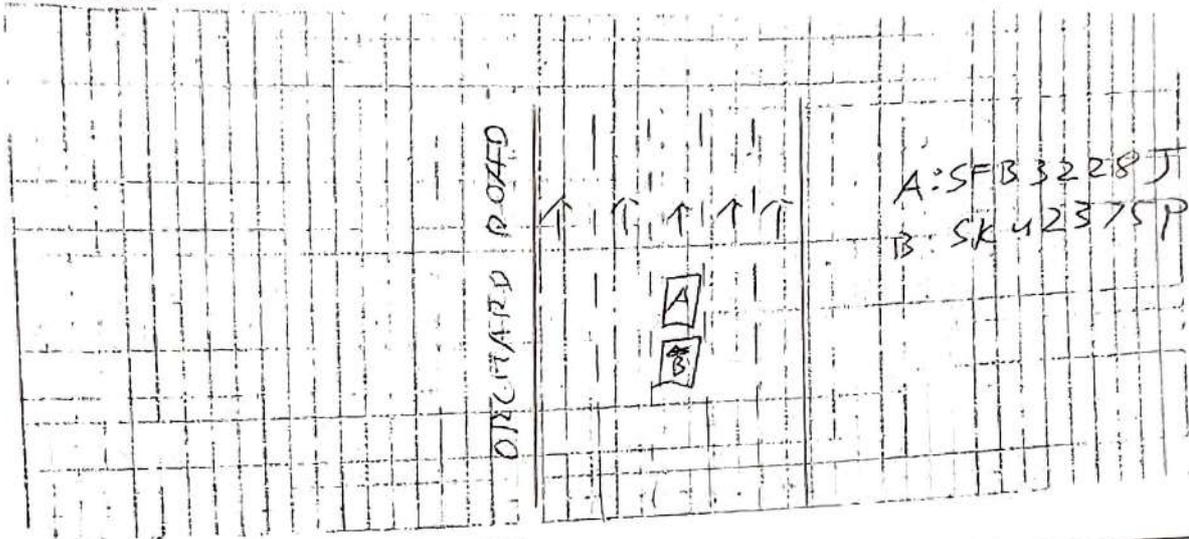


Driver's Signature
(if driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20/12/22 at about 1652, I was driving veh 'A' along Orchard Road near Orchard Gateway. As traffic was slowing down, I too had slowed down, suddenly veh 'B' hit onto my REAR causing REAR damages.

DECLARATION

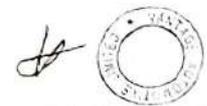
I/We declare the foregoing particulars are true in every respect.

[Signature]

Policyholder's Signature
Date & Time:

[Signature]

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



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	240I
Vehicle Details	
Vehicle No.:	SFB3228J
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Jan 2023
Vehicle Make:	BYD
Vehicle Model:	ATTO 3
Primary Colour:	White
Manufacturing Year:	2022
Engine No.:	-
Chassis No.:	LGXCE4CB2N2081245
Maximum Power Output:	150.0 kW (201 bhp)
Open Market Value:	\$34,000.00
Original Registration Date:	12 Oct 2022
First Registration Date:	12 Oct 2022
Transfer Count:	0
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	11 Oct 2032
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	11 Oct 2032
COE Category:	B - Car-Details at OneMotoring
COE Period(Years):	10
QP Paid:	\$107,001.00
COE Rebate Amount:	\$103,750.00
Total Rebate Amount:	\$103,750.00

The information contained herein is correct as at 31 Jan 2023