

ASS. REC. BY:

REF:

6191

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No:

at Workshop n/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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

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:

SLG 62224

Yr Regn:

10.16

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

Truck / Traller or

Make:

Toyota

c.c

1797

Colour

M. Grey

A/C:

Insured / Std / NI / NA

Sp. Reading

450659

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

ZVW50

6010136

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD / R/Rim or

Tyre Size:

F:

195/65R15

R:

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

TOYO / YOKO or

Front

R/Bal.

8

mm

Rear

R/Bal.

9

mm

L/Bal.

8

mm

L/Bal.

9

mm

D.O.A.

11/2/23

D.O.I.

20/2/2023

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or

O/S Rear

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

☐

: Final Report

Date/Time, File Return to?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

S - RS. \$

: Fuel

: Others

Report Format:

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

# 輝陽汽車有限公司 HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721  
Tel: 64515752 (2 Lines) . Fax: 64514658  
GST & Reg No. 201629438M

*Liberty*  
*20/02/23*  
*morng*  
*off. 10am.*

*Not withain*  
*6/1 day &*  
*Prunny After Paint*  
*4 days*

11/02/2023

Owner: HYMS CAR LEASING PTE LTD

## **ESTIMATE TO REPAIR TOYOTA PRIUS HYBRID 1.8S A - SLG6222H**

1pc rear bumper  
1pc rear bumper RH side retainer  
1pc rear bumper RH side lower garinsh  
1pc rear bumper towing cover  
1pc rear RH fender  
1pc rear RH lower arm  
1pc rear RH kunckle arm  
1pc rear RH adsorber  
1pc rear RH wheel bearing

*Bu/Net*  
\$ 928.35 ✓  
1pc \$ 141.40 X  
\$ 281.50 ?  
1pc \$ 61.00 X  
1pc \$ 981.50 X  
1pc \$ 381.50 X  
1pc \$ 481.50 X  
1pc \$ 280.50 X  
\$ 358.20 ?

less 25%

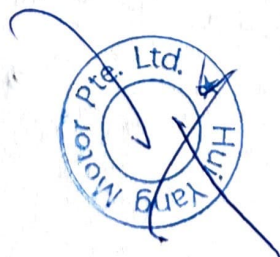
\$ 3,895.45  
\$ 973.86  
\$ 2,921.59

1pc rear RH tyre half cap  
1pc rear RH tyre

s.nett *Net* \$ 180.00 ✓  
s.nett *Net* \$ 180.00 X

remove & refit rear RH undercarriage  
alignment  
spray painting  
labour charges  
Total

\$ 380.00 ?  
\$ 80.00 *60d*  
\$ 1,000.00 *60d*  
\$ 1,000.00 *50d*  
\$ 5,741.59



**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	13/02/2023 17:40 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	11/02/2023 11:00 (SGT)
Exact Location of Accident	Geylang Rd, Singapore
Additional Location Information	turning right to Sims Way
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG6222H
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HYMS Car Leasing Pte Ltd
Company Reg No	201320561K
Email Address	hyms@live.com.sg
Mobile Phone No	(Phone) +65-83336725
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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	Etiqa Insurance Pte Ltd
Policy Number / Cover Note Number	M0016848

### DRIVER

Name of Driver	Iskandhar Shahril Bin Safari
NRIC No	S7307530J
Date Of Birth	04/03/1973
Occupation	Outdoor



## 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 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

13 FEB 2023

Sketch Plan

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

13 FEB 2023

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

*DM* • *Lim Lai Foong*

