

ASS. REC. BY:

REF: AISI

Kenneth

ASSIGNMENT

SLM 7789B Yr Regn: 04, 19

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Esplan

of _____

Insured: _____

Policy No. _____

Claims No. _____

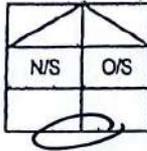
Sum Insured: _____ Excess: Good

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: 8139K

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: 1.311 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: _____

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

Truck / Trailer or Wagon

Make: Toy Voxy C.G. 1797

Colour: M.P. White A/C: Insured / Std / NI / NA

Sp. Reading: 93227 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: BWR 80 0374212

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD / RIM or

Tyre Size: F: _____ R: 195/65R15

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 8 mm R/Bal. 6 mm

L/Bal. 8 mm L/Bal. 6 mm

D.O.A. 4/3/23 D.O.I. 8/3/2023

Survey held at _____

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

Rear window shattered

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

Date / Time _____ Action / Instruction _____

Date/Time, File Pass to?

: Prell. Report

: Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Date/Time, File Return to?

Add Fee: Site Insp (\$)

Interview (\$)

Tech Invs (\$)

Weekend (\$)

Transportation

\$ - RS. \$1

Other

Other

Other

TOTAL

Report Format :

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



ESTEEM

ESTEEM PERFORMANCE PTE LTD
UEN 200005485N

HEADQUARTERS / SHOWROOM / WORKSHOP
385 Sin Ming Drive
Singapore 575718
(T) 6753 2112 (F) 6451 0394

WORKSHOP
176 Sin Ming Drive
Sin Ming Auto Care #01-14, #01-15, #01-16
Singapore 575721
(T) 6484 1221 (F) 6484 7829

Repair Estimates

SLM 7789 B

*NOT AUTHORIZED
Resurvey By paint
Ex @ 6000*

Parts	(a) Cost / List Price Items	\$	<u>15,590.70</u>
	Plus/Less 25%	\$	<u>3,897.68</u>
	Total of Cost / List	\$	<u><u>11,693.03</u></u>
	(b) Nett Price Items		_____
	Less		_____
	Total of Nett Item		_____
	(c) Special Nett Items	\$	<u>95.00</u>
Total Parts Cost		\$	<u><u>11,788.03</u></u>
Labour		\$	<u><u>3,230.00</u></u>
Total		\$	<u><u>15,018.03</u></u>

The above total will be subjected to 7% G.S.T.

Name of Surveyor : Henrich

Company : CKK

Survey conducted on : 8/13/23 at _____

Remarks By Surveyor

(a) The repair of this vehicle is ~~authorized~~ / is not authorized until further notice.

(b) Recommended Days of Repair : 5-6 day(s)

(c) Resurvey : Required / ~~Not Required~~

(d) Excess : \$ 6000

(e) Signature of surveyor : De Date: 8/13/23



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Spare Parts

Vehicle No. : _____
 Make & Model : SLM 7789 B
 : TOYOTA VOXY
 Chassis No : ZWR800374212

Submit By : Carmen Lim
 Year Manufacture : 2019 Apr
 Engine No. : _____
Cost / List

S/No.	Part Description	Qty	Unit Price	Price	Disposition by Surveyor
1	Rear windscreen <i>Shattered</i>	1	\$1,336.60		✓
2	Rear windscreen moulding	1			
3	Rear windscreen sealant <i>Ma</i>	1	\$50.00	S.N	<i>Go on</i>
4	Reverse sensor	2	\$981.60		?
5	Rear number plate <i>Pu</i>	1	\$45.00	S.N	X
6	Rear No.plate lamp LH <i>Pu</i>	1	\$69.10		X
7	Rear No.plate lamp RH <i>Lu</i>	1	\$69.10		X
8	Rear No.plate garnish <i>NJP GAA</i>	1	\$896.60		X
9	Rear bumper <i>Ry</i>	1	\$1,497.80		✓
10	Rear bumper clip <i>Ma</i>	10	\$50.00		✓
11	Rear bumper side retainer LH <i>Pu</i>	1	\$170.00		X
12	Rear bumper side retainer RH <i>Lu</i>	1	\$170.00		X
13	Rear bumper bracket LH <i>Pu</i>	1	\$84.70		X
14	Rear bumper bracket RH	1	\$84.70		?
15	Rear bumper reflector LH <i>Lu</i>	1	\$63.40		X
16	Rear bumper reflector RH <i>Lu</i>	1	\$63.40		X
17	Rear bumper tow cover <i>Pu</i>	1	\$25.30		X
18	Tail door <i>Ry</i>	1	\$1,919.30		✓
19	Tail door lock	1	\$495.40		?
20	Tail door emblem <i>Ma</i>	1	\$71.60		✓
21	Wording "hybrid synergy" <i>Ma</i>	1	\$50.80		✓
22	Tail door chrome <i>CM</i>	1	\$1,018.60		✓
23	Tail door trim	1	\$605.10		?

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

Spare Parts

Vehicle No. :
 Make & Model :
 Chassis No :

SLM 7789 B

TOYOTA VOXY
 ZWR800374212

Submit By :
 Year Manufacture :
 Engine No. :
Cost / List

Carmen Lim
 2019 Apr

S/No.	Part Description	Qty	Unit Price	Price	Disposition by Surveyor
24	Tail door trim clip <i>NW</i>	10	\$50.00		X
25	Rear wiper motor <i>PN</i>	1	\$818.10		X
26	Rear wiper blade <i>PN</i>	1	\$57.80		X
27	Third brake light <i>LN</i>	1	\$227.60		X
28	Tail end panel	1	\$779.40		7
29	Tail end panel garnish <i>Boe</i>	1	\$162.50		✓
30	Tail end panel garnish clip <i>LN</i>	10	\$50.00		✓
31	Boot weatherstrip <i>LN</i>	1	\$394.70		✓
32	Tail lamp LH <i>PN</i>	1	\$706.10		X
33	Tail lamp RH <i>LN</i>	1	\$706.10		X
34	Spare tyre well panel <i>R</i>	1	\$739.90		X
35	Spare tyre board <i>PN</i>	1	\$1,175.40		X
36					
37					
38					
39					
40					
41					
42					
43					
44					
45					
46					

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:

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.



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Labour

Vehicle No. : SLM 7789 B
Make & Model : TOYOTA VOXY

Submit By : Carmen Lim
Year of Manufacture : 2019 Apr

S/No	Labour Description	Estimated Price	Adjusted Price
1	TO RENEW DAMAGED PARTS & KNOCK OUT ACCIDENT REPAIR AREA.(TAILDOOR,REAR BUMPER,END PANEL,SPARE TYRE WELL PANEL)	\$1,200.00	?
2	TO PUTTY, RESPRAY PAINT FOR AFFECTED ACCIDENT REPAIR AREA.(TAILDOOR,REAR BUMPER,END PANEL,SPARE TYRE WELL PANEL)	\$1,200.00	660
3	To check wiring	\$50.00	20
4	To remove & refit reverse sensor	\$120.00	50
5	To tuff coat	NZ \$150.00	X
6	To remove & refit rear windscreen	\$120.00	✓
7	To remove & refit spare tyre, spare tyre board, carpet trim to assist work load.	\$150.00	60
8	To transfer boot mechanism to new boot	\$120.00	60
9	To conduct water leakage tests to ensure proper air and sealing	\$120.00	20

Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.

003 / FALCON-AIR AD SERVICES PTE LTD [S/5721]
DATE & TIME: 06/03/2023 13:50 (SGT)
SUBMITTED BY: Florence Loh
VERSION: 1 (06/03/2023 13:50 (SGT))

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	06/03/2023 13:50 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	04/03/2023 19:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CHINATOWN HAWKER CENTRE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM7789B
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHOW FOOK HING
NRIC No	SXXXX887I
Email Address	chowfookhing@gmail.com
Mobile Phone No	(Phone) +65-90888826
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Voxy
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?	-
Vehicle Category	No - Claiming third party
Transmission	Private car
CC	Auto 1797

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2001555549

DRIVER

Name of Driver	CHOW FOOK HING
NRIC No	SXXXX887I
Date Of Birth	04/08/1972
Occupation	Indoor

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

[Handwritten Signature]

[Handwritten Signature]



Policyholder's Signature / Date & Time

EE 13/23 @ 10:20

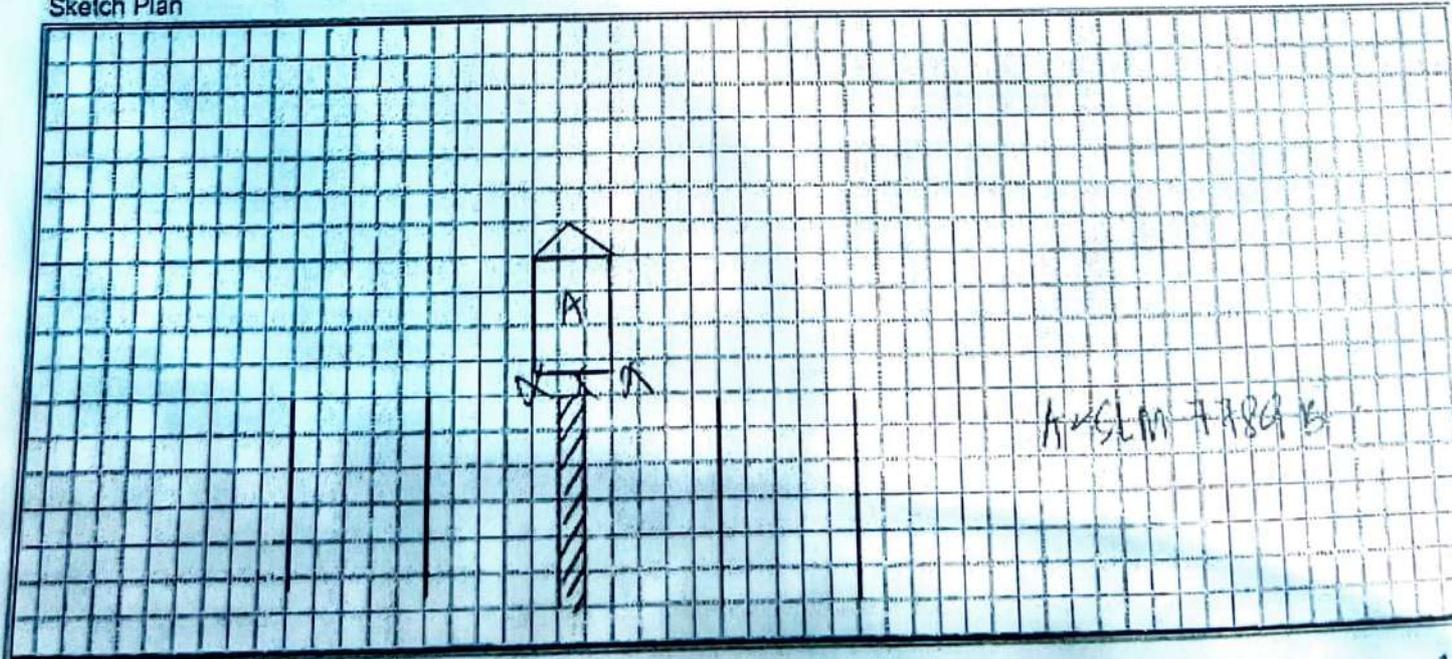
Driver's Signature (if driver is not the policyholder) / Date

& Time 06/03/23 @ 10:20

Witnessed by Reporting Centre Personnel

(Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

I was driving along Chinatown Hawker Centre 2nd floor Carpark. When I was reversing park into the Carpark lot, I accidently hit on to the wall.

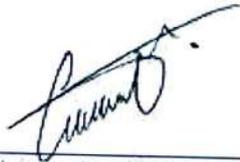
Declaration

We declare the foregoing particulars are true in every respect.



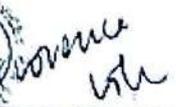
Policyholder's Signature / Date & Time

06/03/23 @ 10:20



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

06/03/23 @ 10:20.



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