

ASS. REC. BY:

REF:

FC2/23 002613/KV

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD/TP/WS/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: 854k

IDAC Accident Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: _____

6 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: SKP940YYr Regn: 01, 07

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

Truck / Trailer or _____

Make: ToyESAMPc.c. 2362Colour: M. Silver

A/C: Insured / Std / NI / NA

Sp. Reading: 205171

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

ACR 507008962Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: Nil / S/Rim / STD A/Rim orTyre Size: F: Runho 235/45 ER18R: mic

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

TOYO / YOKO or

Front

R/Bal. 7 mmL/Bal. 7 mmD.O.A. 10/3/23

Survey held at _____

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?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation

S - RS. SI

P. 1/2

Others

TOTAL

Report Format :

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

源摩哆廠 GUAN MOTOR WORKS

Business Regn. No. 081026001

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 Fax: 6453 8292 H/P: 9742 6003

REPAIR ESTIMATE SKP940Y

Not Whisk
11 May 8
Purvey After Paint
6 days

No.	Qty	List Items
1	1	Rear bumper
2	2	Rear bumper reflector
3	2	Rear bumper side retainer
4	2	Rear bumper corner retainer
5	1	Rear tailgate centre "TOYOTA" logo
6	1	Rear tailgate RH "AERAS" emblem
7	1	Rear tailgate LH "ESTIMA" emblem
8	1 set	Rear tailgate inner trim board clips
9	1	Rear tailgate weatherstrip
10	1	Rear tailgate top lock
11	1	Rear end panel
12	1	Rear end panel top garnish
13	1	Rear end panel inner garnish
14	1	Rear end panel keyless sensor
15	1	Rear end panel buzzer
16	1	Rear floor panel top board
17	1 set	Rear fender inner side garnish clips

\$ Bn	880.23	✓
\$ Pn	115.20	X
N/S \$ D.Y	78.80	✓
N/S \$ D.Y	64.80	✓
\$ M	58.90	—
\$ M	69.20	—
\$ M	66.70	✓
\$ M	80.00	X
\$	392.10	✓
\$	469.60	✓
\$ B1	669.40	✓
\$	272.60	✓
\$	198.40	✓
\$	256.40	✓
\$	186.30	✓
\$ Bcl	1,167.70	✓
\$ M	80.00	X
\$	5,106.33	
Less 25%	\$	1,276.58
Total :	\$	3,829.75

Special Nett Items	
18	1 set Rear end panel sealant
19	1 set Reverse sensors
20	1 set Reverse camera

\$	80.00	✓
\$ M	280.00	2000
\$ Pn	650.00	X
Total :	\$	1,010.00

Labour	
1	Labour Charges for remove/refit, panel beating, cutting welding and replacement of damages.
2	To putty and spray Spray Paintings charges.
3	To check wirings and lightings.
4	To remove, refit reverses and reverse camera.
5	To remove, refit rear tailgate fittings.
6	To remove, refit rear upholstery and attachments.
7	To apply anti rust treatment

\$	1,000.00	✓
\$	1,000.00	6601
\$	40.00	201
\$	150.00	601
\$	80.00	601
\$	120.00	601
\$	80.00	?
Total :	\$	2,470.00

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:

Total Parts and Labour : \$ 7,309.75

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	11/03/2023 13:00 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	10/03/2023 17:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BRADDELL ROAD TOWARDS CTE (CITY) L/P 108
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP940Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	DONNY YEO GUOWEN
NRIC No	SXXXX238H
Email Address	donnyeo81@gmail.com
Mobile Phone No	(Phone) +65-90101049
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	ESTIMA AERAS
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	2362

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMPG23001676

DRIVER

Name of Driver	DONNY YEO GUOWEN
NRIC No	SXXXX238H
Date Of Birth	23/06/1981
Occupation	Indoor

SKETCH PLAN

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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.
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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.

 11/03/2023
Policyholder's Signature / Date & Time

 11/03/2023
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

 11/03/2023
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

