

ASS. REC. BY:

REF:

AWA 230027591/c

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

OD / PAWS / 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:

11-30cm

(Policy Condition)

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

Bal. or Market Value:

862k

IDAC Accident Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

07

days

Res.: Yes or No

Lump Sum:

1-B1

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SMK 1987E

Yr Regn:

12, 17

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

Truck / Trailer or

Make:

Honda

Ekonos c.c

1591

Colour:

M-Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

91113

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

KMHD841CMJU 591358

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:

R:

205/55R16

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

6

mm

L/Bal.

5

mm

L/Bal.

6

mm

D.O.A.

14/3/23

D.O.I.

17/3/2023

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

1) / Wesp unable to locate the parts for now.

Date/Time, File Pass to?

☐

: Prell. Report

Days Of Repair:

1)

☐

: Final Report

Resurvey No. of Trip:

Survey Fee:

Date/Time, File Return to?

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Transportation

S - RS - SI

: Fixing

: Others

Report Format :

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

TOTAL

**CARWORKZ SG PTE LTD**

10 SIN MING IND EST SECTOR C, #01-06, SINGAPORE 575645

H/p: 81184734 (Soon Ng) / 98766876 (Anna Chua)

Co. Reg. No: 202039874Z GST No: 202039874Z

Email: carworkzws@gmail.com

*Not Noted  
Survey B4 part  
Today***ESTIMATED REPAIR COST DETAILS****ACC-23-0014**

**To:** ALLIED WORLD ASSURANCE COMPANY LTD  
60 ANSON ROAD  
#08-01 MAPLE TREE ANSON  
SINGAPORE 079914

**Date:** 16/03/2023  
**Vehicle No.:** SMK-1997-E  
**Make:** HYUNDAI  
**Model:** ELANTRA AD 1.6GLS  
AT

**Attention:** Motor Claim Department

QTY	DESCRIPTION	REPAIR AMOUNT	SURVEYOR APP.
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**List Item**

1	REAR DOOR RH	By \$1,775.00	✓
1	REAR DOOR OUTER CHROME MOULDING RH	Per \$186.40	X
1	REAR DOOR OUTER CHROME HANDLE RH	Per \$128.60	✓
1	REAR DOOR OUTER CHROME HANDLE SIDE COVER RH	Per \$49.30	✓
1	REAR DOOR FRAME OUTER STICKER TOP RH	Per \$34.50	✓
1	REAR DOOR FRAME OUTER SIDE STICKER RH	Per \$29.80	✓
1	REAR DOOR INNER WEATHERSTRIPE RH (ON DOOR)	Per \$138.90	X
1	REAR DOOR STICKER RH	Per \$198.50	X ✓
1	REAR FENDER RH	By \$1,796.00	✓
1	REAR FENDER LOWER STICKER RH	Per \$176.40	✓
1	REAR FENDER INNER TRIMBOARD RH	Per \$246.30	X
10	REAR FENDER INNER TRIMBOARD CLIPS RH	Per \$100.00	X
1	REAR FENDER INNER SHIELD RH	Per \$95.00	✓
10	REAR FENDER INNER SHIELD CLIPS RH	Per \$100.00	✓
1	TAILLAMP RH	Per \$946.80	✓
1	TAILLAMP LOWER BRACKET RH	Per \$180.00	X
1	TAILLAMP LH	Per \$946.80	X
1	TAILLAMP LOWER BRACKET LH	Per \$180.00	X
1	REAR WINDSCREEN GLASS MOULDING	Per \$58.00	✓
1	REAR BUMPER	CM \$785.00	✓
10	REAR BUMPER CLIPS	Per \$100.00	50/50
1	REAR BUMPER RETAINER RH	Per \$65.00	✓
1	REAR BUMPER RETAINER LH	Per \$65.00	X



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**ESTIMATED REPAIR COST DETAILS**

ACC-23-0014

1	REAR BUMPER BRACKET RH	1	\$45.00	X
1	REAR BUMPER BRACKET LH	1	\$45.00	X
1	REAR BUMPER REFLECTOR RH	1	\$86.40	X
1	REAR BUMPER LOWER GARNISH	1	\$450.80	—
10	REAR BUMPER LOWER GARNISH CLIPS	10	\$100.00	—
1	REAR BUMPER INNER LOWER COVER RH	1	\$65.00	X
1	REAR MUDFLAP RH	1	\$78.40	—
1	REAR WHEEL BEARING RH	1	\$395.00	?
1	REAR ABSORBER C/W MOUNTING RH	1	\$256.80	X
1	TORSION AXLE	1	\$1,318.00	X
	<b>Sub Total</b>		<b>\$11,221.70</b>	
	<b>Discount 20% on Parts</b>		<b>(\$2,244.34)</b>	
			<b>\$8,977.36</b>	

**Special Nett**

1	REAR SPORTS RIM RH - 16"	1	\$680.00	—
1	REAR TYRE RH (205/55R16)	1	\$350.00	X
1	REAR DOOR GLASS SEALANT RH	1	\$50.00	X
1	REAR WINDSCREEN GLASS SEALANT	1	\$50.00	405N
1	REVERSE SENSOR (2 EYE)	1	\$240.00	2005N
	<b>Sub Total</b>		<b>\$1,370.00</b>	

**Labour & Misc**

LABOUR TO FACILITATE REPAIR	\$1,400.00	8001
R & R RHR DOOR COMPONENTS	\$120.00	7601
R & R RHR DOOR GLASS	\$120.00	✓
R & R REAR WINDSCREEN GLASS	\$120.00	✓
R & R RHR UNDERCARRIAGE PARTS	\$280.00	?
R & R REAR AXLE	\$250.00	X
R & R REVERSE SENSOR	\$60.00	501
R & R RHR SPORTS RIM INCLUDING TYRE BALANCING	\$20.00	2
TO CHECK & RECONNECT WIRING	\$60.00	201
CONDUCT WHEEL ALIGNMENT	\$60.00	✓

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**ESTIMATED REPAIR COST DETAILS****ACC-23-0014**

RUST PROOF ON AFFECTED AREA	\$120.00	601
LABOUR TO SPRAY PAINT AFFECTED AREAS	\$1,000.00	6001
<b>Sub Total</b>	<b>\$3,610.00</b>	

<b>Sub Total</b>	<b>\$13,957.36</b>
<b>GST 8%</b>	<b>\$1,116.59</b>
<b>Total</b>	<b>\$15,073.95</b>

**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	14/03/2023 16:10 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	14/03/2023 08:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TRAFFIC LIGHT JUNCTION ALONG JURONG WEST AVE 2
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMK1997E

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM LEONG KWAN
NRIC No	S1736615G
Email Address	limleongkwan@yahoo.com
Mobile Phone No	(Phone) +65-93213210
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	ELANTRA AD 1.6 GLS AT
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	1591

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNA00260282202

#### DRIVER

Name of Driver	LIM LEONG KWAN
NRIC No	S1736615G
Date Of Birth	15/05/1966
Occupation	Indoor



**IMPORTANT NOTICE****SKETCH PLAN**

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.

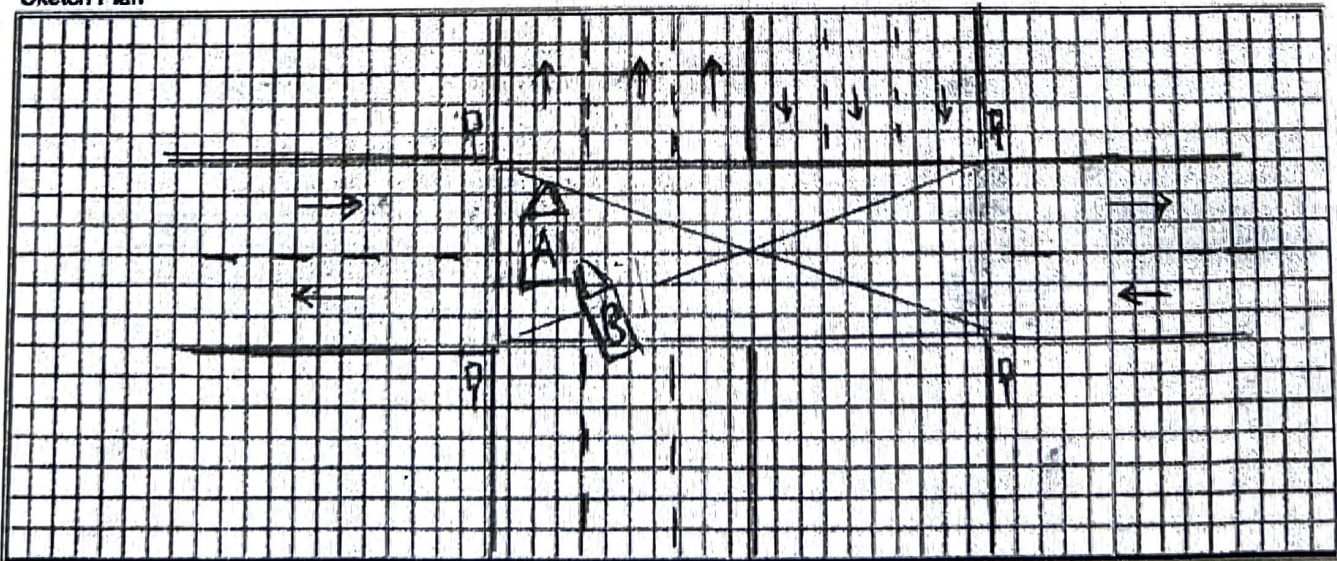
Policyholder's Signature / Date & Time

14/3/23 @ 3:50 pm

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

Kiana

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

**Sketch Plan**

vJun2022

A - SMK 1997E

B - XE 1799 L