ASS. REC. BY: Kenneth

REF: CTZ / 23003269/lcp

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Chuy Hoe

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 Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 4-5 days Res.: Yes or No

Lum Sum: 1-B.I % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: GBA 3636S Yr Regn: 08 21

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

Make: Peugeot Partne c.c 1499

Colour Black A/C: Insured / Std / Nil / NA

Sp.Reading 40080 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: VR3EFYHZRJ958907

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or _____

Brake: In order / Jammed / Leaked / Burnt or _____

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

Tyre Size: F: _____

R: 205/60R16

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Falken

Front		Rear	
R/Bal.	9 mm	R/Bal.	9 mm
L/Bal.	9 mm	L/Bal.	9 mm
D.O.A.	14/3/23	D.O.I.	11/7/2023

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?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Survey Fee: _____

Transportation: _____ S + RS ___ SI

Parking _____

Others _____

TOTAL _____

Report Format :

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

清河

CHENG HOE MOTOR PTE LTD
Blk 1019, Yishun Industrial Park A, #01-374/382, Singapore 768761
Tel : 67556142 Fax : 67557719
Email: chmotor@singnet.com.sg

TP INSURER: China Taiping Insurance (Singapore) Pte. Ltd. (HQ)
CHEE HOE PTE LTD

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	TP/CHINA
Policy No:	DMCVSNW00067742200	Date of Loss:	14/03/2023
Vehicle Reg. No.:	GBA3636S	Driveable?	
Party At Fault:	UNKNOWN		
Driver (TP):	TAN JOON HAU	Driver (Insured):	NISHAN SINGH
Make/Model:	PEUGEOT PARTNER, 1.5 BLUEHDI EAT8 LWB (A)	Vehicle Reg. Date:	27/08/2021
Vehicle Colour:	BLACK		
Engine No:	10Q4DR0027743	Chassis No:	VR3EFYHZRLJ958907
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	0		

Not Included
Battery Bypass
4-5 days

Present Location: CHENG HOE MOTOR PTE LTD (YISHUN)

COST OF CLAIMS	Amount
Parts	4,064.50
Miscellaneous Items	640.00
Labour	1,650.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S$)	**6,354.50**
+ GST 8.00% (S$)	508.36
Nett Amount (S$)	**6,862.86**

This claim is handled by: SHARON CHIONG BENG CHOON

Generated using Merimen e-Claims Internet Estimation & Adjusting System

GBA3636S
TP/CHINA

REPAIR DETAILS

Reference

Part Source:		(Last Synchronised: 11 Jul 2023)
Parts:	N/A	PEUGEOT PARTNER 1.5 BLUEHDI EAT8 LWB (A) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:		(Unsubmitted, no print-code for GBA3636S)
Validity:		These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info:		Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr		Amount
1	1		*1 PC REAR BUMPER	0.00	0.00		*550.00 F
2	1		*1 PC REAR BUMPER REINFORCEMENT	0.00	0.00		*420.00 F
3	1		*1 PC LH TAILGATE	0.00	0.00	Rp	*1,200.00 F
4	1		*1 PC LH TAILGATE EMBLEM (PARTNER)	0.00	0.00	Rn	*45.00 F
5	1		*1 PC LH TAILGATE TRIM RUBBER	0.00	0.00		*150.00 F
6	1		*1 PC RH TAILGATE	0.00	0.00	Rp	*1,200.00 F
7	1		*1 PC RH TAILGATE EMBLEM (PEUGEOT)	0.00	0.00	Rn	*70.00 F
8	1		*1 PC RH TAILGATE LOGO	0.00	0.00	Rn	*60.00 F

F=Franchise part.

Sub Total (S$)	**3,695.00**
+ Margin on L,N Items 10.00% (S$)	**369.50**
Total Parts (S$)	**4,064.50**

Report was unsubmitted during this print-out.
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Estimates on Miscellaneous Items

No	Qty	Particulars		Amount
Miscellaneous Items				
1	1	1 PC REVERSE CAMERA		280.00
2	1	1 PC STICKER - 6 PAX	Rn	10.00
3	1	1 PC STICKER - 70KM/H	Rn	10.00
4	1	1 SET REVERSE SENSOR	Sup	200.00
5	1	1 SET TAILGATE BODY PROTECTOR	Rn	80.00
6	1	2 PCS TAILGATE GLASS GUM	Rn	60.00
			Sub Total (S$)	**640.00**

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:

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	REMOVE & REFIX REAR BOTH WINDSCREEN GLASS	New	140.00
2	REMOVE & REFIX REAR BUMPER ASSY, TAILLAMPS, TAILGATES, TO KNOCK & REPAIR REAR END PANEL AND REALIGN THE SAME	New	700.00
3	PUTTY & RESPRAY ON REAR END PANEL, TAILGATES AND REAR AFFECTED AREAS	New	700.00
4	REMOVE & REFIX REAR REVERSE SENSOR, REVERSE CAMERA, INCAR CAMERA AND RESET SYSTEM	New	50.00
5	RUSTPROOFING	New	60.00
		Gross Labour Cost (S$)	**1,650.00**

Report was unsubmitted during this print-out.
Generated using **Merimen e-Claims IEAS**

< END OF ESTIMATES >

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 witholding 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	15/03/2023 18:59 (SGT)
Reported by	Driver
Date of Accident	14/03/2023 08:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	WOODLANDS AVE 12
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA3636S

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	URBAN DESIGN AND BUILDERS PTE LTD
Company Reg No	2XXXXX655H
Email Address	urbanwinson@gmail.com
Mobile Phone No	(Phone) +65-93834451
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Peugeot
Model	PARTNER 1.5 BLUEHDI EAT8 LWB
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1499

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	MP003393

DRIVER

Name of Driver	TAN JOON HAU
NRIC No	SXXXX441Z
Date Of Birth	10/06/1961
Occupation	Outdoor

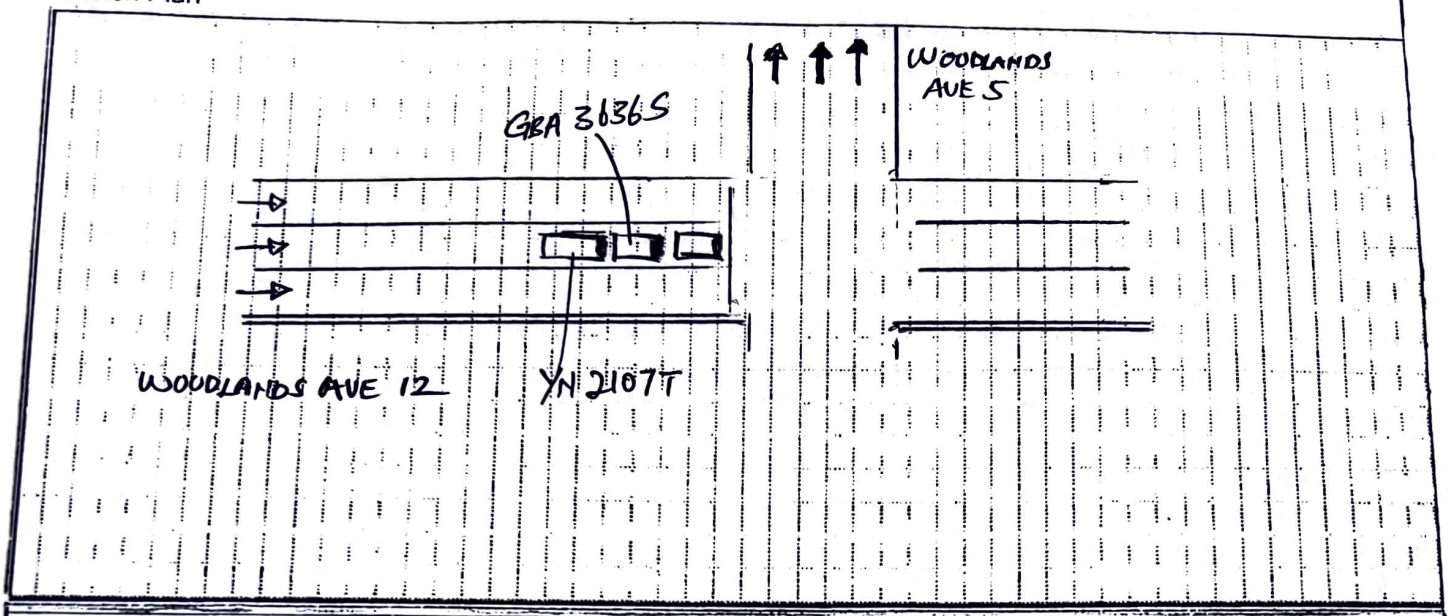
Describe Circumstance of the Accident

** NOTE : PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

( ) Claim Own Policy (✓) Claim Third party ( ) Reporting Onlly

( ) Claim OD/ TP at other workshop (_____)

Sketch Plan



14/3/23. morning 8.am. Driving GBA3636S to office. I am stop in Front of Red Light, by the time, got one Lorry hit behind my Vehicle ...

Declaration

We declare the foregoing particulars are true in every respect.

URBAN DESIGN & BUILDERS PTE LTD UEN: 201015655H

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time 15/3/23

15/3/23 (WL)

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