ASS. REC. BY: Kenneth | REF: SPF/

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s RS

of 0521H

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: 05 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: GBF 3192D Yr Regn: 08/16

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

Truck / Trailer or _____

Make: Toy Dyna c.c 2982

Colour Silver A/C: Insured / Std / NI / NA

Sp.Reading 155475 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTFAT35Y20K 206816

Gen. Cond: Good / Fair / Poor / Burnt

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

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

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

Tyre Size: F: Yoko 195R15X8

R: Arivo 155R12X8(01)

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

Front		Rear	
R/Bal.	9 mm	R/Bal.	99 mm
L/Bal.	9 mm	L/Bal.	99 mm
D.O.A.	24/3/12	D.O.I.	31/3/2023

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) _____

☐ : Prell. Report

☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation

$ - RS. SI

Add Fee: ☐ : Site Insp ($) Parking

☐ : Interview ($) Others

☐ Tech Invs ($)

☐ Weekend ($)

TOTAL

Report Format :

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

Not Authorise
C/Slip &
Remove After Paint
5days

RS AUTO SERVICES
160, SIN MING DRIVE
SIN MING AUTOCITY # 06-01
EMAIL : rsautoservices88@gmail.com H.P 93825367

QUOTATION - THIRD PARTY CLAIM

Date : 31 Mar 2023

SINGAPORE POLICE FORCE

ATTN : MOTOR CLAIM DEPARTMENT

CLAIM : THIRD PARTY CLAIM
VEH. No : GBF 3192 D/ DYNA
INSURE : AIG ASIA PACIFIC

QTY	ITEM	AMOUNT	CONDITION
Third party vehicle :	QX 1204 U		
1	TAILGATE	$ Rp 1,985.00	✓
2	TAILGATE SIDE LATCH	$ O/S Rp 780.00	LP
2	TAILLAMP SIDE L BRACKETS	$ O/S RM 664.00	LP
~~4~~ 3	TAILGATE LOWER LATCHES	$ Rp 798.00	LAP
1	TAILGATE DYNA STICKER	$ Nil 220.00	✓
2	TAILLAMPS	$ O/S CMT 960.00	LP n/s ?
2	TAILLAMP BRACKETS	$ O/S Rp 336.00	LP
2	REAR DECK	REPAIR	
1	REAR DECK END PANEL	$ Rp 680.00	✓
2	REAR No.PLATE LAMPS	$ 280.00	?
~~4~~ /	REAR RUBBER STOPPERS	$ O/S RM 752.00	LP
1	SPARE TYRE BRACKETS	$ 420.00	?
1	REAR EXHAUST	$ 1,220.00	?
1	REAR EXHAUST BRACKET	$ R 220.00	X
1	REAR EXHAUST MOUNTING	$ Rp 223.00	X
1	REAR DECK LOWER CHASSIS	REPAIR	
8	REAR DECK LOWER CHASSIS BRACKETS	$ 1,184.00	?
2	SIDE BOARD	$ R 4,436.00	X
	TOTAL PARTS :	$ 15,158.00	
	LESS 25 %	$ 3,789.50	
	TOTAL LIST PARTS :	**$ 11,368.50**	
	SPECIAL / NETT PARTS		
1	TAILGATE ALUMIUM INNER PLATE	$ Nett 2,200.00	Boosn
1SET	TAILGATE COMPANY STICKERS	$ Nett 1,100.00	250sn
1	70KM/H STICKER	$ Nett 20.00	12sn ✓
1	13 PAX STICKER	$ Nett 20.00	12sn
1	REVERSE SENSORS	$ Short 400.00	200sn
1	REVERSE CAMERA	$ Nett 500.00	250sn
1	SPARE TYRE	$ Sn 600.00	X
1	REAR No.Plate	$ Rp 50.00	20sn
1	REAR STEP BRACKET ASSY Pr?	$ Rp 980.00	✓
	TOTAL S/N PARTS :	**$ 5,870.00**	
	TOTAL PARTS PRICE :	**$ 17,238.50**	

AMOUNT BRING FORWARD :	$	17,238.50	
LABOUR CHARGES		AMOUNT	CONDITION
LABOUR CHARGES			
Lbaour charges to repair, replace cutting wedling on rear accident affected area	$	1,400.00	Fool
To remove refix rear deck , so as to repair rear chassis , deck lower beam etc	$	~~nn~~ 500.00	X
Labour to install sticker for rear accident affected area	$	200.00	60L
Labour charges for rear accessories work	$	~~nn~~ 200.00	X
To do rear chassis body align	$	500.00	1
To check lamp wiring system for accident area	$	120.00	20L
To do anti rust	$	120.00	60L
To do spray painting for accident affected area	$	1,200.00	600L
TOTAL LABOUR :	$	**4,240.00**	
GRAND TOTAL PARTS AND LABOUR :	$	**21,478.50**	

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/alter 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:

SL0M233R0001 / Lai Huat (Meng Kee) Motor Pte Ltd
ENTRY DATE & TIME: 27/03/2023 17:37 (SGT)
SUBMITTED BY: LHMK -3
VERSION: 1 (27/03/2023 17:37 (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 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	27/03/2023 17:37 (SGT)
Reported by	Actual Driver
Date of Accident	24/03/2023 11:30 (SGT)
Exact Location of Accident	Woodlands Ave 2, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF3192D

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Join Power M&E Pte Ltd
Company Reg No	201120052H
Email Address	jpme@joinpower.sg
Mobile Phone No	(Phone) +65-67333233
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
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	Manual
CC	2982

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070116170-02

DRIVER

Name of Driver	LAU CHIN SENG
Passport No/FIN	F7227173N
Date Of Birth	15/05/1971
Occupation	Outdoor

[illegible]

1. Please report [illegible] the details of the accident to speed up the claims process.
2. This form [illegible]
3. Information provided must be [illegible] and [illegible]. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate [illegible] 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 the 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 collected 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 any 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 connection with 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.

JOH POWER M&E PTE LTD

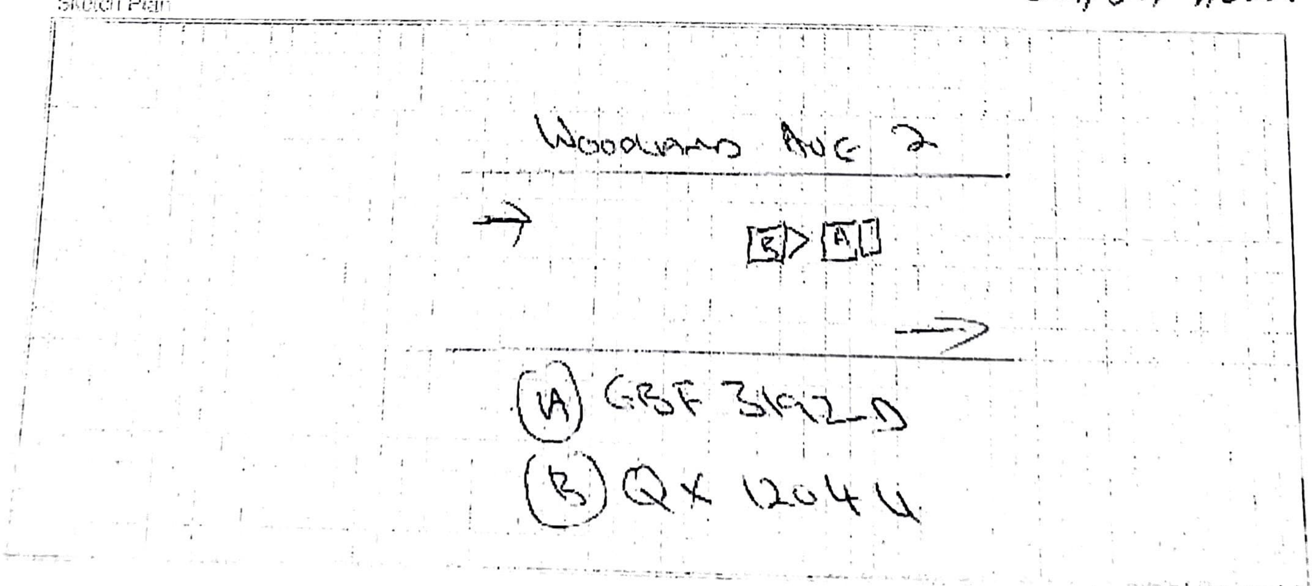
27/3/23

Policyholder's Signature/Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/FIN card) SOH JIT HOON

Sketch Plan



POLICE REPORT

SINGAPORE POLICE FORCE

Police Station Of Origin:
Jurong NPP
158 Yung Loh Road #01-58 SINGAPORE
610158
Tel No: 1800-2658888

Report No: L/20230324/0060

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.
24/03/2023 14:37	L/20230324/0060	12

Informant's Particulars

Name of Informant: LAU CHIN SENG		Address:	
ID Type / ID No.: FIN NO / F7227173N		Contact No.: Home/Office:	Mobile: 83600501
Nationality: MALAYSIAN		Email:	
Sex: Male	Age: 51	Date of Birth: 15/05/1971	Type of Informant: Driver
Race: Chinese			Language
Occupation: CONSTRUCTION			Driving Licence Information: Class: 2B,3 Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Police Vehicle	Drink Drive:	Date/Time of Accident:	Type of Location:
		No	24/03/2023 11:30	X-Junction

Location:

WOODLANDS AVENUE 2

Weather:	Road Surface:	
Clear	Dry	
Traffic Flow:	Traffic Control:	Traffic Volume:
	Not Controlled	Heavy
Type of Collision:		Anyone conveyed by ambulance:
Between Moving Vehicles - Head To Rear		No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passengers
GB*3192D	Car	TOYOTA	TOYOTA DYNA 150 MANUAL			0
QX1204U	Car	CHEVROLET	CRUZE NB 1.6D 6AT (P)		Seriously Damaged	3