

ASS. REC. BY:

REF: AIS/Kennerth

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: \$238k

IDAC Accident Report: _____

Consistent?: Yes or No

GIA / PR Seen: _____

Consistent?: Yes or No

Est. Repairs: 3-6 days

Res.: Yes or No

Lum Sum: 1-B-1 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No: SUB 6224EYr Regn: 09, 21

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

Truck / Trailer or _____

Make: Mercedes

GLA 200

c.c

1332

Colour: Dark Silver

AC: _____

Insured / Std / NI / NA

Sp. Reading: 35314

T/Radio: _____

Insured / Std / NI / NA

Eng/No: _____

C/No: WIN 247787.2 J306408Gen. Cohd: Good / Fair / Poor / BurntSteering: Inoper / Jammed / Leaked / Burnt orBrake: Inoper / Jammed / Leaked / Burnt or

Mod: NI / S/Rlm / STD / Rlm or

Tyre Size: F: _____

R: _____

235/55R18BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

Rear

R/Bal. 7 mmR/Bal. 7 mmL/Bal. 7 mmL/Bal. 7 mmD.O.A. 4/9/23D.O.I. 17/4/2023

Survey held at _____

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?



: Prell. Report



: Final Report

1)

Date/Time, File Return to?

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Add Fee: ☐

: Site Insp (\$ _____)



: Interview (\$ _____)



: Tech Invs (\$ _____)



: Weekend (\$ _____)

Transportation: _____

S - RS, SI

: Fuel

: Others

TOTAL

Report Format:

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



TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

PAGE: 1

M/S : MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE P1
1 GATEWAY DRIVE #15-08
WESTGATE TOWER
SINGAPORE 608531

TEL :
ATTN : ACCOUNTS DEPT

FAX : *Perhary B9 Pain*

5-6 days

YOUR REF NO :
CLAIM TYPE : THIRD PARTY
TP INS. CO. : ALLIANZ INSURANCE SINGAPORE PTE TLD
ACCIDENT DATE : 04/04/2023
TP VEH REG NO : SNC4689E

ESTIMATE

NO : QUOT202304-000030(00)
DATE : 13/04/2023
POLICY NO : SP2003907937
VEH REG NO : SNB6224E
MAKE/MODEL : MERCEDES BENZ GLA200 SUV
PROGRESSIVE
CHASSIS NO : W1N2477872J306408
ENGINE NO : 28291480657913
REG. DATE : 2021

Estimate Repair Cost to Vehicle No : SNB6224E

Description	Quantity	Unit Price	Amount
		S\$	S\$
NET PRICE			
1 Tailgate	1	<i>By</i> 2,455.00	2,455.00 <i>—</i>
2 Tailgate "GLA200" emblem	1	<i>me</i> 95.00	95.00 <i>—</i>
3 Tailgate centre logo	1	<i>me</i> 57.00	57.00 <i>—</i>
4 Tailgate reflector - LH	1	<i>Per</i> 3,170.00	3,170.00 <i>X</i>
5 Rear end panel	1	1,142.00	1,142.00 <i>7</i>
6 Rear end panel top garnish	1	92.00	92.00 <i>7</i>
7 Taillamp assy - LH	1	<i>Per</i> 712.00	712.00 <i>X</i>
8 Rear bumper - upper	1	<i>Bu</i> 1,368.00	1,368.00 <i>—</i>
9 Rear bumper - lower	1	<i>me</i> 232.00	232.00 <i>—</i>
10 Rear bumper top chrome	1	<i>cm</i> 345.00	345.00 <i>—</i>
11 Rear bumper reinforcement	1	524.00	524.00 <i>7</i>
12 Rear bumper centre inner frame	1	174.00	174.00 <i>7</i>
13 Rear bumper lower chrome	1	<i>cm</i> 340.00	340.00 <i>—</i>
14 Rear bumper reflector - LH	1	46.00	46.00 <i>7</i>
15 Rear bumper sensor	3	220.00	660.00 <i>7</i>
16 Rear bumper centre lower bracket	1	103.00	103.00 <i>7</i>
17 Rear bumper lower side bracket - RH / LH	2	<i>N/S/DIT</i> 88.00	176.00 <i>—</i>
18 Front bumper	1	<i>Bu</i> 1,253.00	1,253.00 <i>—</i>
19 Front bumper reinforcement	1	505.00	505.00 <i>7</i>
20 Front bumper sponge	1	145.00	145.00 <i>7</i>
21 Front bumper inner support - top	1	86.00	86.00 <i>7</i>
22 Front bumper inner support - bottom	1	72.00	72.00 <i>7</i>
23 Front bumper centre garnish	1	109.00	109.00 <i>7</i>
24 Front bumper lower chrome	1	305.00	<i>me</i> 305.00 <i>—</i>
25 Front grille	1	630.00	630.00 <i>7</i>
26 Front grille beam	1	245.00	245.00 <i>7</i>
27 Front number plate garnish	1	113.00	<i>me</i> 113.00 <i>—</i>
			15,154.00
		Less 10%	1,515.40
			13,638.60
SPECIAL NET			
28 Rear windscreen sealant	1	60.00	<i>me</i> 60.00 <i>40.00</i>
29 Tailgate "C&C" emblem	1	38.00	<i>me</i> 38.00 <i>—</i>



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Estimate Repair Cost to Vehicle No : SNB6224E

Description	Quantity	Unit Price	Amount
		S\$	S\$
30 Front number plate	1	40.00	40.00 ✓
			138.00
LABOUR			
31 To transfer damaged tailgate interior mechanism to new tailgate	1	180.00	180.00 60h
32 To remove and refit rear windscreen glass	1	150.00	150.00 120l
33 To remove and refit front & rear bumper sensor	1	200.00	200.00 120l
34 To check and rectify wiring system	1	160.00	160.00 40l
35 To panel beat and straighten rear floorboard panel, rear chassis frame, front wupport panel, front chassis frame, to cut and weld rear end panel, including replacement of parts and align where necessary, to refit and adjust the same	1	1,800.00	1,800.00 7
36 To putty and spray on affected areas (front & rear)	1	1,800.00	1,800.00 800l
37 To apply rust-proofing on replaced and repaired panels	1	220.00	220.00 7
			4,510.00
TOTAL			S\$ 18,286.60
ADD GST @ 8%			1,462.93
GRAND TOTAL			S\$ 19,749.53

SINGAPORE DOLLAR NINETEEN THOUSAND SEVEN HUNDRED FORTY-NINE AND CENTS FIFTY-THREE ONLY

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:

FOR TONG LUCK AUTO PTE LTD

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	06/04/2023 15:15 (SGT)
Reported by	Actual Driver
Date of Accident	04/04/2023 17:45 (SGT)
Exact Location of Accident	Pasir Ris Dr 12, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB6224E
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE PTE LTD
Company Reg No	1XXXXX778Z
Email Address	too_tong.tan@mercedes-benz.com
Mobile Phone No	(Phone) +65-96879099
Alternative Phone No	(Office) +65-82821711

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Gla200
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	1595

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2003907937

DRIVER

Name of Driver	TYE YOKE FOONG, GRACIA
NRIC No	SXXXX805B
Date Of Birth	08/02/1973

SKETCH PLAN

IMPORTANT NOTICE

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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.

**FLASH ACCIDENT
REPORTING OFFICER**

FRO KHAMARAJ



[Handwritten Signature]

Policyholder's Signature / Date & Time

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

04/04/2023 - 18:20HRS

Witnessed by Reporting Centre Personnel

Sketch Plan

