

ASS. REC. BY: Taufiq

REF: Q/CT/23004056/Trp3.

**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: \_\_\_\_\_

Veh No: SLK 4521L Yr Regn: 2017/ Jan  
 Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Mitsubishi Attrage C.C. 1193  
 Colour: Meroon A/C: Insured / Std / NI / NA  
 Sp. Reading: 119132 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: MMBSTA 13AHM 003738  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: Inorder / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: Inorder / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Modi: Nil / S/Rim / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: 195/55R15  
 R: 2 -

(Policy Condition)

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

N/S	O/S
<u>X</u>	<u>X</u>

Bal. or Market Value: 942K  
 IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: \_\_\_\_\_ days Res.: Yes or No  
 Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No  
WP  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or \_\_\_\_\_  
 Front 6 mm R/Bal. 6 mm  
 L/Bal. 6 mm  
 D.O.A. \_\_\_\_\_ D.O.I. 2/4/23  
 Survey held at Rijust.  
 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?  : Preli. Report  
 : Final Report

Days Of Repair: \_\_\_\_\_  
 Resurvey No. of Trip: \_\_\_\_\_

1) \_\_\_\_\_  
 Date/Time, File Return to?  
 2) \_\_\_\_\_

Add Fee:  : Site Insp (\$ \_\_\_\_\_)  
 : Interview (\$ \_\_\_\_\_)  
 : Tech. Invs (\$ \_\_\_\_\_)  
 : Weekend (\$ \_\_\_\_\_)

Survey Fee: \_\_\_\_\_  
 Transportation: \_\_\_\_\_ \$ + RS. \_\_\_\_\_ \$  
 Photos \_\_\_\_\_  
 Others \_\_\_\_\_  
 TOTAL \_\_\_\_\_

Report Format: \_\_\_\_\_  
 Lump Sum / L.B.R. (\$) \_\_\_\_\_

# BIFROST AUTO PTE LTD

8 KAKI BUKIT AVE 4, PREMIER @ KAKI BUKIT  
#01-49 SINGAPORE 415875  
Tel: +65 64524457  
Fax: +65 64524584  
Company Reg No: 201929175W

## Repair Estimate

Vehicle number: SLK4521L  
Make & Model: Mitsubishi Attrage  
Chassis number: MMBSTA13AHH003738

No.	Description of spare parts	Qty	Amount S\$
1	Bootlid	1	\$ <i>Rep bt</i> 918.00
2	Bootlid centre emblem	1	\$ <i>net</i> 53.00
3	Bootlid "Attrage" emblem	1	\$ <i>net</i> 24.00
4	Bootlid "MIVEC" emblem	1	\$ <i>net</i> 47.00
5	Bootlid chrome moulding	1	\$ <i>x</i> 318.00
6	Bootlid chrome moulding clips	1set	\$ <i>x</i> 60.00
7	Bootlid RH hinge	1	\$ <i>x</i> 192.00
8	Bootlid LH hinge	1	\$ <i>x</i> 192.00
9	Bootlid lock	1	\$ <i>x</i> 228.00
10	Bootlid lock catch	1	\$ <i>x</i> 68.00
11	Bootlid weatherstrip	1	\$ <i>x</i> 189.00
12	Rear bumper	1	\$ <i>del</i> 704.00
13	Rear bumper clips	1set	\$ <i>net - 30</i> 80.00
14	Rear bumper RH retainer	1	\$ <i>del</i> 34.00
15	Rear bumper LH retainer	1	\$ <i>x</i> 34.00
16	Rear bumper LH reflector	1	\$ <i>del</i> 43.00
17	Rear bumper RH reflector	1	\$ <i>del</i> 43.00
18	LH taillamp assy	1	\$ <i>del</i> 435.00
19	LH taillamp panel	1	\$ <i>x</i> 102.00
20	LH taillamp lock clips	1set	\$ <i>x</i> 22.00
21	RH taillamp assy	1	\$ <i>del</i> 435.00
22	RH taillamp panel	1	\$ <i>x</i> 102.00
23	RH taillamp lock clips	1set	\$ <i>x</i> 22.00
24	End panel	1	\$ <i>bt</i> 455.00
25	End panel inner garnish	1	\$ <i>del</i> 89.00
26	End panel inner garnish clips	1set	\$ <i>20 net</i> 60.00
27	End panel air vent	1	\$ <i>x</i> 43.00
28	End panel air vent cover	1	\$ <i>x</i> 54.00
29	End panel RH side cover	1	\$ <i>x</i> 28.00
30	End panel antenna sensor	1	\$ <i>x</i> 105.00
31	End panel buzzer sensor	1	\$ <i>x</i> 98.00
32	LH rear fender inner trim board	1	\$ <i>x</i> 234.00
33	LH rear fender inner trim board clips	1set	\$ <i>x</i> 70.00
34	LH rear fender splash shield	1	\$ <i>x</i> 57.00
35	LH rear fender splash shield clips	1set	\$ <i>x</i> 30.00
36	RH rear fender inner trim board	1	\$ <i>x</i> 234.00
37	RH rear fender inner trim board clips	1set	\$ <i>x</i> 70.00
38	RH rear fender splash shield	1	\$ <i>x</i> 57.00
39	RH rear fender splash shield clips	1set	\$ <i>x</i> 30.00



Working days: \_\_\_\_\_

Spare Parts:	\$	6,510.60
Special Nett:	\$	1,350.00
Labour:	\$	2,120.00

**Total Amount: \$ 9,980.60**

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 032E

### Vehicle Details

Vehicle No.: SLK4521L  
Vehicle to be Exported: Yes  
Intended Deregistration Date: 19 Apr 2023  
Vehicle Make: MITSUBISHI  
Vehicle Model: ATTRAGE 1.2 CVT  
Primary Colour: Red  
Manufacturing Year: 2016  
Engine No.: 3A92UDP1789  
Chassis No.: MMBSTA13AHH003738  
Maximum Power Output: 57.0 kW (76 bhp)  
Open Market Value: \$13,630.00  
Original Registration Date: 18 Jan 2017  
First Registration Date: 18 Jan 2017  
Transfer Count: 1  
Actual ARF Paid: \$5,000.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 17 Jan 2027  
PARF Rebate Amount: \$3,250.00

### Intended COE Rebate Details

COE Expiry Date: 17 Jan 2027  
COE Category: A - Car up to 1600cc & 97kW (130bhp)  
COE Period(Years): 10  
QP Paid: \$48,000.00  
COE Rebate Amount: \$17,974.00  
**Total Rebate Amount: \$21,224.00**

The information contained herein is correct as at 19 Apr 2023

OK

VEHICLE NO: SLK 4521L

MAKE & MODEL: Mitsubishi Attrage  AUTO /  MANUAL

DATE OF ACCIDENT	18 / 04 / 2023	CC 1,200
TIME OF ACCIDENT	1925 hrs	AM / PM
LOCATION OF ACCIDENT	Tampines Ave 8 turn right to Tampines street 85	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	Tay Jun Xiang	
EMAIL	TERRY TAY JUN XIANG @gmail.com	OFFICE: — MOBILE: 8128 1906
NRIC	S8826032E	
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY	
FLEET POLICY	YES / NO	
INCURANCE CO.	Budget Direct	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	P1066623R01	
NAME OF DRIVER	AS ABOVE / IF NO:	
NRIC	- As Above -	
DATE OF BIRTH	14 / 07 / 1988	
ANY PASSENGER	YES / NO: 01	
NAME OF PASSENGER	Foo S Minn	
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	25 / 04 / 2008	
GENDER	MALE / FEMALE	
CONTACT NO.	Mobile: 8128 1906 Office: — Home: —	
EMAIL	TERRY TAY JUN XIANG @gmail.com	
ADDRESS	Blk 874C Tampines Street 85 #05-26 (S) 523874	
DOES DRIVER OWN OTHER VEHICLES?	<input checked="" type="checkbox"/> NO / If yes, Reg No: INSURE: —	
RELATIONSHIP	Employee / If No: Owner	
WEATHER CONDITION	Clear / Raining / Other:	
ROAD SURFACE	Dry / Wet / Other:	
ANY INJURIES	No / If yes, Who? Vehicle A - Driver and Passenger.	
CONTACT NO.	9749 7265 - Passenger	
POLICE REPORT	<input checked="" type="checkbox"/> NO / If yes, Where?	
NOTICE OF INTENDED PROSECUTION?	<input checked="" type="checkbox"/> No / If yes, Who?	
VEHICLE B NO.	STU 1762Z	Any Passenger: 01
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / <input checked="" type="checkbox"/> NO	
WAS THERE ANY AUDIO RECORDED?	YES / <input checked="" type="checkbox"/> NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / <input checked="" type="checkbox"/> NO	
WHO IS REPORTING	DRIVER / <input checked="" type="checkbox"/> OWNER / BOTH	
Original Language Used	English / Mandarin / Others:	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / <input checked="" type="checkbox"/> NO	



**SKETCH PLAN**

**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 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

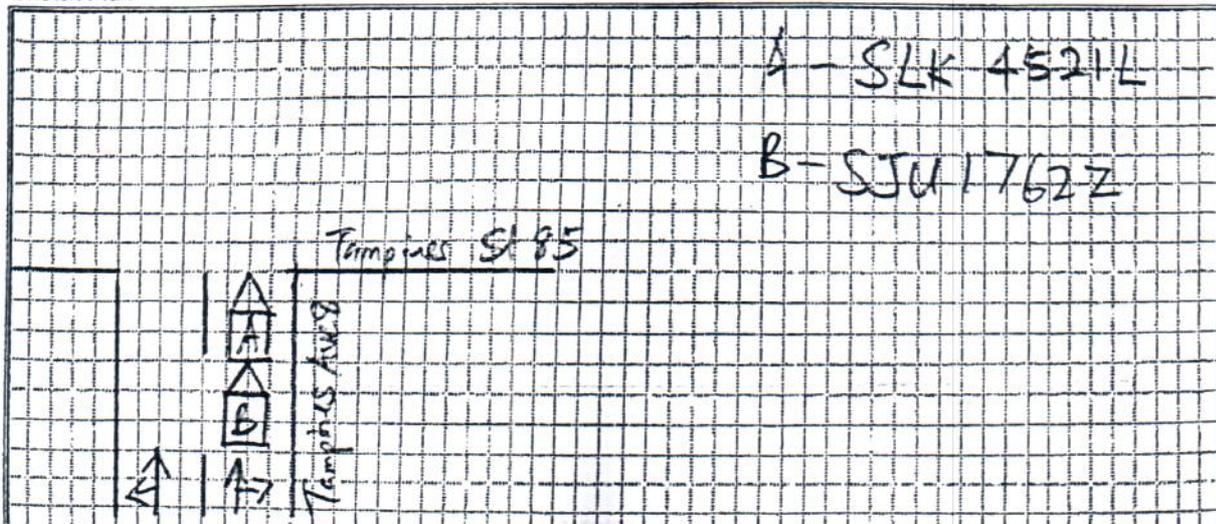
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

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

**Sketch Plan**



Describe Circumstance of the Accident

On the stated date and time, I was stationary along the stated  
Road waiting for the traffic light to turn green when suddenly I felt a  
huge impact from the rear of my vehicle. When I alighted my vehicle, I  
saw SJU 1762 Z had collided onto the rear of my vehicle.

Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

