

(08/11/13)

ASS. REC. BY: Akid Kamal

REF:

CSG/AIS23004094/Wnp3

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: AIS

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: 700

(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: 86k

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 7 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SMX 7101 R Yr Regn: 271012021Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Seat Toledo 1.4 c.c. 1395Colour: Grey A/C: Insured / Std / NI / NASp. Reading: 55444 T/Radio: Insured / Std / NI / NAEng/No: CZCA15788C/No: VSSZZZNHZK101 *1500Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt or _____Brake: Inorder / Jammed / Leaked / Burnt or _____Modi: Nil / S/Rim / STD A/Rim or _____Tyre Size: F: 185/60 R15R: 185/60 R15

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

TOYO / YOKO or _____

Front: _____ Rear: _____

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 11704123 D.O.I. 24104123 1140

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 _____

Without prejudice

We will be advising our principal a cost of repair of \$10,784.80
before excess \$700.00 & GST with 7 days of repair, subject to their approval

(red, \$2882.50, 21%)

Balance: 93.5 M

Yearly: \$11K

ARF 50%: \$2.5K

MV: \$86K

LTA: \$37,486

NV: \$48,514

Date/Time, File Pass to?

☐ : Preli. Report

1)

Date/Time, File Return to?

☐ : Final Report

2)

Days Of Repair: 7

Resurvey No. of Trip: _____

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

Survey Fee: _____

Transportation: _____

S + RS \$ _____

Photos _____

Others _____

TOTAL

Report Format: _____

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

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	13/04/2023 12:49 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	11/04/2023 08:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JALAN AHMAD IBRAHIM BEFORE BENOI ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX7101R
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YUEN SAI KIT IVAN
NRIC No	S9346419B
Email Address	ivanyuenski@gmail.com
Mobile Phone No	(Phone) +65-96224826
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	
Model	Seat
Variant	TOLEDO 1.4 TSI 125 STYLE 7AT
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	-
Vehicle Category	Yes
Transmission	Private car
CC	Auto
	1395

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2004251822-01

DRIVER

Name of Driver	YUEN SAI KIT IVAN
NRIC No	S9346419B

Date Of Driving Pass	01/07/2016
Driving experience	6 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96224826
Alt. Phone Number	-
Email Address	ivanyuenski@gmail.com
Address	APT BLK 41 SIMS DRIVE #14-257 (S) 380041
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER WITH ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH INSURED.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SND4329P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-

Contact Number	(Phone) +65-97386530
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

SKETCH PLAN

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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 willful 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.

6. 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 be 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 be 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 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.

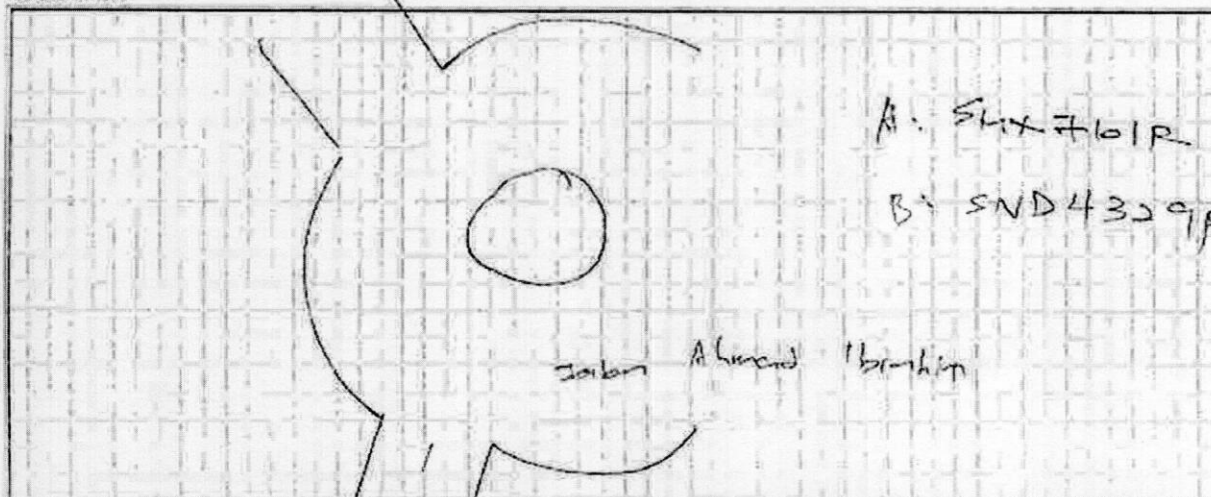


Policyholder's Signature / Date & Time

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

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

Sketch Plan



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	419B
Vehicle Details	
Vehicle No.:	SMX7101R
Vehicle to be Exported:	Yes
Intended Deregistration Date:	24 Apr 2023
Vehicle Make:	SEAT
Vehicle Model:	TOLEDO 1.4 TSI 125 STYLE 7AT
Primary Colour:	Grey
Manufacturing Year:	2019
Engine No.:	CZCA15788
Chassis No.:	VSSZZZNHZK1011500
Maximum Power Output:	92.0 kW (123 bhp)
Open Market Value:	\$19,256.00
Original Registration Date:	27 Jan 2021
First Registration Date:	27 Jan 2021
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 Jan 2031
PARF Rebate Amount:	\$3,750.00
Intended COE Rebate Details	
COE Expiry Date:	26 Jan 2031
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$43,501.00
COE Rebate Amount:	\$33,736.00
Total Rebate Amount:	\$37,486.00

The information contained herein is correct as at 24 Apr 2023

OK

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\$0 Drive Away! 3 Years
Warranty, Trade In \$5000 More!
Showroom Condition!
Dynamic Motoring StarAd




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1 vehicles



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	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	SEAT Toledo		Any	Any	2021	Any	Any	Any	Available
	SEAT Toledo 1.4A TSI DSG Style		\$91,000	\$11,200 /yr	19-Mar-2021	1,395 cc	65,000 km	Sedan	Available
(1 Owner) Full Agent Service Since Day 1 At SEAT Singapore. Low Mileage, Agent Warranty Till 2026. If You Are Looking For A Conti Se...									
Posted: 02-Mar-2023									

PREMIUM AD

Save this search criteria, to get email alerts whenever a match is found.

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
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SME MOTOR PTE LTD

1 Kaki Bukit Ave 6 #02-15, AutoBay @ Kaki Bukit, Singapore 417883

Tel: 6747 6106 (6 Lines) Fax: 6744 2368

Email: service@smemotor.com.sg Website: www.smemotor.com.sg

Co. & GST Reg. No: 201119451E

INSURER: **Allianz Insurance Singapore Pte. Ltd. (HQ)****PARTICULARS OF CLAIM**

Claim Type:	OD (OWN DAMAGE)	Ref. No:	23/AL/OD-215 (04)
Policy No:	SP2004251822-01	Date of Loss:	11/04/2023
Vehicle Reg. No.:	SMX7101R	Driveable?	
Driver Age/Info:	29 / MALE	Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	YUEN SAI KIT IVAN	Contact No:	+6596224826
Driver:	YUEN SAI KIT IVAN		
Make/Model:	SEAT TOLEDO, 1.4 (A)	Vehicle Reg. Date:	27/01/2021
Vehicle Colour:	BLACK		
Engine No:	CZCA15788	Chassis No:	VSSZZZNHZK1011500
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	7		
Remarks:	VEHICLE NOT IN.		
Present Location:	SME MOTOR PTE LTD (KAKI BUKIT)		

COST OF CLAIMS

	Amount
Parts	5911.2
Miscellaneous Items	11,872.30
Labour	30 65.00
Paintwork Labour	600 1,730.00
Towing	0.00
	0.00
Gross Total (S\$)	6541.2 13,667.30
+ GST 8.00% (S\$)	523.3 1,093.38
Nett Amount (S\$)	7064.5 14,760.68

This claim is handled by: **CHIA PEI YING**

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS**Reference****Part Source:** (Last Synchronised: 20 Apr 2023)**Parts:** N/A SEAT TOLEDO 1.4 (A) (Model not available in database)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** SME Motor Pte Ltd/SMX7101R/20/04/2023 11:49**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		*FRT BONNET	0.00	0.00	1600 *1,950.00 F ?
2	1		*FRT GRILLE	0.00	0.00	*395.00 F ?
3	1		*FRT GRILLE CHROME	0.00	0.00	*350.00 F ?
4	1		*FRT GRILLE LOGO	0.00	0.00	*85.00 F ?
5	4		*FRT GRILLE CLIP	0.00	0.00	*8.00 F ?
6	1		*FRT BUMPER	0.00	0.00	1600 *1,850.00 F ?
7	2		*FRT BUMPER RETAINER	0.00	0.00	*160.00 F ?
8	10		*FRT BUMPER CLIP	0.00	0.00	*20.00 F ?
9	1		*FRT BUMPER INNER SPONGE	0.00	0.00	*195.00 F ?
10	1		*FRT BUMPER REINFORCEMENT	0.00	0.00	*720.00 F ?
11	2		*HEADLAMP	0.00	0.00	*1,900.00 F ?
12	1		*HEADLAMP SUPPORT PANEL	0.00	0.00	*850.00 F ?
13	2		*HEADLAMP PANEL	0.00	0.00	*270.00 F ?
14	1		*AIRCON CONDENSER	0.00	0.00	*600.00 F ?
15	1		*RADIATOR	0.00	0.00	*550.00 F ?
16	1		*FRT RH FENDER	0.00	0.00	*495.00 F ?
17	1		*FRT BONNET LOCK	0.00	0.00	*395.00 F ?

F=Franchise part.

Sub Total (\$\$)	10,793.00
+ Margin on L,N Items 10.00% (\$\$)	1,079.30
Total Parts (\$\$)	11,872.30

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Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	1	NUMBER PLATE	3040.00 ¹³⁷¹
2	1	RADIATOR COOLANT	25.00 X
Sub Total (S\$)			3065.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	WIRE CHECKING	New	30.00 ✓
2	REMOVE & REFIX AIRCON AND GAS	New	100.00 X
3	LABOUR CHARGE	New	700.00 ⁶⁰⁰
4	SPRAY PAINTING	New	900.00 ⁶⁰⁰
Gross Labour Cost (S\$)			1200 1,730.00

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< END OF ESTIMATES >

04 days ^{1/2}
Akid 8700 5631
2410412023 1224hrs

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: