

ASS. REC. BY:

REF:

ICS/ 23004112/KV

C

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

OD/TP/WS/TP RES/OD RES/EVA/INV/MY

To inspect Vehicle No:

at Workshop m/s

of

Insured:

SME 7631C

Policy No.

Claims No.

DMPC2300277H/C02/CT

Sum Insured:

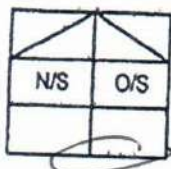
Excess:

(Client's Record)

Make of Vsh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

1 5 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SKQ 7488K

Yr Regn:

12, 14

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

Truck / Trailer or

Make:

Toy Alphard

C.C

2382

Colour

M. Grey

A/C:

Insured / Std / NI / NA

Sp. Reading

151913

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

AN1420

8348873

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F: B.S

235/50R18

R: Kumho

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

Front

Rear

R/Bal.

9

mm

R/Bal.

7

mm

L/Bal.

9

mm

L/Bal.

7

mm

D.O.A.

19/4/23

D.O.I.

28/4/2023

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

28/4 11:50 AM 847501 Carpal 21/5/23 (red 13,083.05, 73%)

Date/Time, File Pass to?



: Prell. Report



: Final Report

1)

Date/Time, File Return to?

2) 4/5/23-typist

Report Format: Merimen

Lump Sum / L.B.L: (\$ 4750)

Days Of Repair:

5

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

S + RS. \$

Fees

Others

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

TOTAL

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	430B
Vehicle Details	
Vehicle No.:	SKQ7488K
Vehicle to be Exported:	Yes
Intended Deregistration Date:	25 Apr 2023
Vehicle Make:	TOYOTA
Vehicle Model:	ALPHARD 240S CVT ABS D/AIRBAG
Primary Colour:	Grey
Manufacturing Year:	2014
Engine No.:	2AZG455348
Chassis No.:	ANH208348873
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	\$32,590.00
Original Registration Date:	23 Dec 2014
First Registration Date:	23 Dec 2014
Transfer Count:	0
Actual ARF Paid:	\$37,626.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 Dec 2024
PARF Rebate Amount:	\$20,694.00
Intended COE Rebate Details	
COE Expiry Date:	22 Dec 2024
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$70,890.00
COE Rebate Amount:	\$11,741.00
Total Rebate Amount:	\$32,435.00

The information contained herein is correct as at 25 Apr 2023

OK

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	19/04/2023 11:26 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	19/04/2023 07:35 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Along Orchard Blvd
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKQ7488K
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHANG WAI WAH RICK
NRIC No	S7174430B
Email Address	rickchangww@gmail.com
Mobile Phone No	(Phone) +65-98254388
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Alphard
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	2400

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5069315005-08

DRIVER

Name of Driver	CHANG WAI WAH RICK
NRIC No	S7174430B
Date Of Birth	20/09/1971
Occupation	Indoor

Date Of Driving Pass	16/03/1999
Driving experience	24 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-98254388
Alt. Phone Number	-
Email Address	rickchangww@gmail.com
Address	20 JALAN TELANG
Address complement	-
Postcode	S576690
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 to sketch plan

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	File size exceeding limit

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME7631C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	YIP YING EE

Contact Number	(Phone) +65-90928330
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

IMPORTANT NOTICE

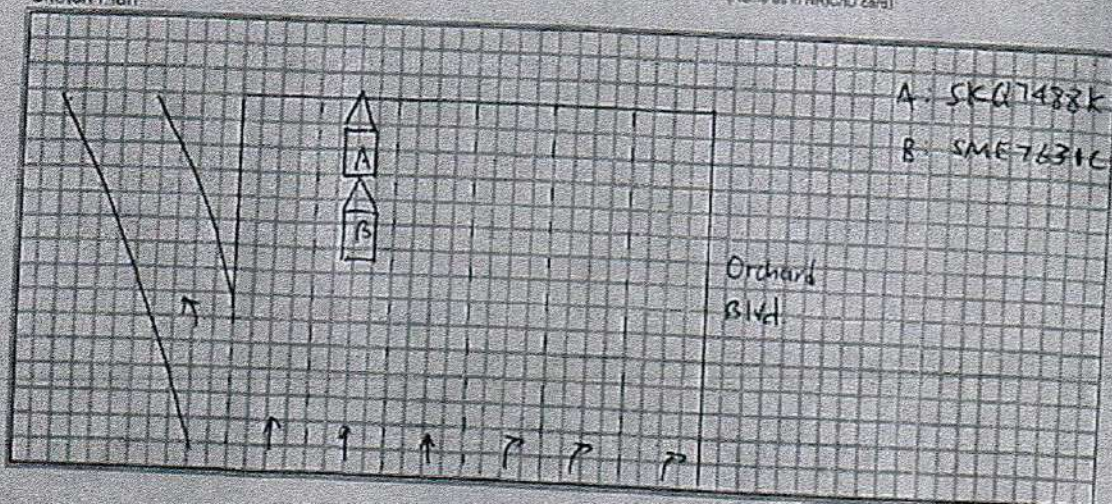
SKETCH PLAN

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.

Ricard
Policyholder's Signature / Date & Time
19/04/2023 1500 hrs
Sketch Plan

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

Icek Chong Chian
Witnessed by Reporting Centre Personnel
(Name as in NRICID card)



Describe Circumstance of the Accident

When the traffic light turns green I was about to move off, while I started to move off, out of sudden I felt an impact on my rear and upon checking I notice vehicle B collided onto my vehicle from rear

Declaration

(We declare the foregoing particulars are true in every respect.)

[Signature]
Policyholder's Signature (Date & Time)
19/04/2015 11:00 hrs

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

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



Sin Ming Autocare BFG Pte Ltd

176 Sin Ming Drive
#02-05 Sin Ming Autocare
Singapore 575721
Tel : 6455 0600 | Fax : 6455 6192
Website: www.autocare.com.sg
GST Reg. No: 20-0210033-N

ECICS Limited

Eunos Road 8

04A Singapore Post Centre, Spore 408600

Attn: Motor Claim Dept

CHASSIS NO: ANH208348873

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#09-

ESTIMATE

VEHICLE NO: SKQ7488K

MAKE/MODEL: TOTOYA
ALPHARD

DOA: 19.04.2023

*Not with claim
11 days @ 4750/hr
Heavy After Pains
5 days*

No.	Descriptions	Qty	List Price	Amount
LIST ITEM:				
1	BUMPER (REAR)	1	\$ 1,037.40	\$ <i>Am</i> 1,037.40 ✓
2	BUMPER RETAINER (RLH)	1	\$ 95.00	\$ <i>Am</i> 95.00 X
3	BUMPER RETAINER (RLR)	1	\$ 95.00	\$ <i>Am</i> 95.00 X
4	BUMPER (REAR BRACKET LH)	1	\$ 85.60	\$ <i>Am</i> 85.60 X
5	BUMPER (REAR BRACKET RH)	1	\$ 85.60	\$ <i>Am</i> 85.60 X
6	BUMPER REFLECTOR LH	1	\$ 108.35	\$ <i>Am</i> 108.35 X
7	BUMPER REFLECTOR RH	1	\$ 108.35	\$ <i>Am</i> 108.35 X
8	BUMPER (REAR CLIPS)	10	\$ 5.00	\$ <i>Am</i> 50.00 ✓
9	TAIL GATE (REAR) <i>2120.30</i>	1	\$ 2,522.00	\$ <i>Am</i> 2,522.00 ✓
10	TAIL GATE CENTRE LOGO (REAR)	1	\$ 178.15	\$ <i>Am</i> 178.15 ✓
11	TAILGATE OUTER CHROME HANDLE (REAR)	1	\$ 485.15	\$ <i>Am</i> 485.15 X
12	TAIL LOCK GATE LOCK (REAR)	1	\$ 561.30	\$ <i>Am</i> 561.30 X
13	TAILGATE OUTER GARNISH (REAR)	1	\$ 1,990.00	\$ <i>Am</i> 1,990.00 X
14	TAILGATE EMBLEM ALPHARD (REAR)	1	\$ 115.35	\$ <i>Am</i> 115.35 ✓
15	TAILGATE DAMPER (REAR RH)	1	\$ 392.30	\$ <i>Am</i> 392.30 X
16	TAIL GATE DAMPER (REAR LH)	1	\$ 392.30	\$ <i>Am</i> 392.30 X
17	TAILGATE INNER TRIM BOARD (REAR) <i>710.60</i>	1	\$ 985.15	\$ <i>Am</i> 985.15 ✓
18	TAIL LAMP LH	1	\$ 500.00	\$ <i>Am</i> 500.00 X
19	TAIL LAMP RH	1	\$ 500.00	\$ <i>Am</i> 500.00 X
20	END PANEL TOP GARNISH (REAR) <i>mg ori</i>	1	\$ 235.15	\$ 235.15 ✓
21	END PANEL (REAR)	1	\$ 915.00	\$ <i>Am</i> 915.00 ✓
22	CORNER GARNISH (REAR) RH	1	\$ 365.15	\$ <i>Am</i> 365.15 X
23	BEZA SENSOR (REAR)	1	\$ 265.15	\$ <i>Am</i> 265.15 X
24	ANTENNA SENSOR (REAR)	1	\$ 285.15	\$ <i>Am</i> 285.15 X
25	CONRNER GARNISH (REAR) LH	1	\$ 365.15	\$ <i>Am</i> 365.15 X
26	TAIL GATE RUBBER (REAR)	1	\$ 395.00	\$ <i>Am</i> 395.00 X
27	BUMPER REVESOR (REAR) RH <i>265</i>	1	\$ 425.15	\$ <i>Am</i> 425.15 ✓
28	BUMPER REVESOR (REAR) LH	1	\$ 425.15	\$ <i>Am</i> 425.15 X

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Sub Total (S\$) : 13,963.05
Total Parts (S\$) :

NETT ITEMS

1	NUMBER PLATE (REAR)	1	\$	50.00	\$	50.00	X
2	GLASS SEALANT (REAR)	1	\$	50.00	\$	50.00	40.00
3	NUMBER PLATE HOLDER (REAR)	1	\$	30.00	\$	30.00	X
4	SEALANT END PANEL AND REAR BOARD	1	\$	80.00	\$	80.00	30.00

LABOUR:

1	To dismantle & replace damaged parts, panel beat where necessary	\$	1,800.00	800.00
2	To apply rust-proofing on repaired/repalce panel	\$	200.00	30.00
3	To remove/transfer tailgate mechanism	\$	180.00	60.00
4	To remove/ refit rear tail gatye glass	\$	180.00	120.00
5	To putty, apply primer & spray-paint on the effected	\$	1,200.00	660.00
6	portion.			
7	To check wiring functions	\$	100.00	20.00

\$ 3,660.00



for Sin Ming Autocare BFG Pte Ltd

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: