

ASS. REC. BY:

REF: CNB / 23004763/K

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 160 02-01 8308

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Vch:

2.30pm

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs: 03 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:

SCP 6666U Yr Regn: 01.10

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

Truck / Trailer or

Make:

Lexus GS300 c.c. 2995

Colour

M. Silver A/C: Insured / Std / NI / NA

Sp. Reading

139747 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JT17B14965105088928

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm or

Tyre Size:

F: 215/55R17

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

7 mm

R/Bal.

7 mm

L/Bal.

7 mm

L/Bal.

7 mm

D.O.A.

215/23

D.O.I.

22/3/2023

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

Action / Instruction

Date/Time, File Pass to?

Prell. Report

1)

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transport:

Add Fee: Site Insp (\$

Interview (\$

Tech Invs (\$

Weekend (\$

Fees

Others

Report Format:

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

TOTAL

# Quotation Details - Quotation No SN-002012-23-20008

Date Created: 14/8/2019

## Customer Details:

Lee Lip Kok Joseph  
Lee Lip Kok Joseph  
NIL  
Singapore

## Vehicle Details

Vehicle No : SCP 6666 U  
Vehicle Make : LEXUS  
Vehicle Model : GS300 2011  
Vehicle Engine No :  
Engine Chasis No :  
Mileage :

## Owner's Accident Details

Job No : SN-002012-23-20008  
JobCategory : TP - Lump Sum  
Date of Accident :  
Owner's Insurer :  
Location of Accident :

## Surveyor's Details

Surveyor Name :  
Surveyor Company :  
Surveyor ContactNo :  
Surveyor FaxNo :  
Quotation Submission Date :  
Surveyor Approve Date :  
Supplementary Date :  
Supplementary Approve Date :

View Photo Accident Photo

*Not withstanding  
1/1/2020  
Resurvey After Repair  
3 days  
HennoethKong@lkkauto.com*

Item No	Ref No	Description	QTY	Unit List Price	Mark Up / Discount %	Mark Up / Discount Price	Total Price	Rev Qty	Rev Unit Price	Remarks	Final Total Price	Surveyor Approval
<b>Materials</b>												
1	1	Rear Bumper	1	\$1,526.00	-10.00	\$1,373.40	\$1,373.40	0	0	Am	\$0.00	✓
2	2	Rear Bumper Clips	10	\$10.00	-10.00	\$9.00	\$90.00	0	0	Am	\$0.00	✓
3	3	Rear Bumper Retainer RH	1	\$125.00	-10.00	\$112.50	\$112.50	0	0	Am	\$0.00	✓
4	4	Rear Bumper Retainer LH	1	\$125.00	-10.00	\$112.50	\$112.50	0	0	Am	\$0.00	✓
5	5	Rear End Panel	1	\$850.00	-10.00	\$765.00	\$765.00	0	0	Am	\$0.00	✓
6	6	Exhaust Pipe	1	\$1,250.00	-10.00	\$1,125.00	\$1,125.00	0	0	Am	\$0.00	✓
7	7	Rear Bumper Reinforcement	1	\$950.00	-10.00	\$855.00	\$855.00	0	0	Am	\$0.00	✓
8	8	Bootlid	1	\$1,350.00	-10.00	\$1,215.00	\$1,215.00	0	0	Am	\$0.00	✓
9	9	Bootlid Logo	1	\$95.00	-10.00	\$85.50	\$85.50	0	0	Am	\$0.00	✓
10	10	Bootlid Garnish	1	\$550.00	-10.00	\$495.00	\$495.00	0	0	Am	\$0.00	✓

Material Total: \$6,228.90 Final Sub-Total : \$0.00

## Special Nett Items

1	11	Reverse Sensor	1	\$220.00	0.00	\$220.00	\$220.00	0	0	Am	\$0.00	✓
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Special Nett Items Total: \$220.00 Final Sub-Total : \$0.00

## Labour

1	12	Straighten and Panel Beat Accident Area	1	\$600.00	0.00	\$600.00	\$600.00	0	0		\$0.00	250k
2	13	Respray Accident Area	1	\$500.00	0.00	\$500.00	\$500.00	0	0		\$0.00	400k

Labour Total: \$1,100.00 Final Sub-Total : \$0.00

## Others

**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 part(s) must be resurveyed and subject to final approval from Insurance Company

Others Total: \$0.00 Final Sub-Total : \$0.00

Total Price: \$7,548.90 Final Total Price : \$0.00

Accepted by Repairer



## 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	03/05/2023 08:58 (SGT)
Reported by	Actual Driver
Date of Accident	02/05/2023 10:28 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG CTE, NEAR 195 LAMPOST
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCP666U
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE LIP KOK JOSEPH
NRIC No	S1631830B
Email Address	ELSIETSW@YAHOO.COM
Mobile Phone No	(Phone) +65-94503900
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	LEXUS GS300 AUTO
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	2995

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00011212303

#### DRIVER

Name of Driver	THIEN SOOK WAH
NRIC No	S6829326Z
Date Of Birth	31/07/1968
Occupation	Indoor



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- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Traffic Police Department for investigation.**
- 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.
- 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

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

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



**Sketch Plan**