ASS. REG. BY: REF: C72/	•
Wenth	SIGNMENT
From: Date:  Estimated Cost:  OD I/P I/WS / TP RES / OD RES / EVA / INV / MY  To Inspect Vehicle No: at Workshop m/s	Veh No: SIGNMENT  Veh No: SIGNMENT  Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  Truck / Trailer or  Make: Cy P, VI C.C / 798  Colour M.P. White / Mec AK: Insured / Std / NI / NA  Sp.Reading / G7 Fig T/Radio: Insured / Std / NI / NA  Eng/No:  C/No: TO KB 3FU 3 03 09 2735  Gen. Cond: Good / Fair / Poor / Burnt  Steering: Inopder / Jammed / Leaked / Burnt or  Brake: Inopder / Jammed / Leaked / Burnt or
(Policy Condition)  Remark: The veh had commenced its repair at the time of inspection.  Bal. or Market Value:  IDAC Accident Rport: Consistent?: Yes or No  GIA / PR Seen: Consistent?: Yes or No  Est. Repairs: //2 days Res.: Yes or No  Lum Sum: /-B./% 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Date: Person Contacted:  Date / Time Action / Instruction	Modi: Nii / S/Rim / STD A/Rim or  Tyre Size: Product 195/65R15  R: Fixer 85  BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM/ /  TOYO / YOKO or  Froni Rear  R/Bal. 9 mm L/Bal. 9 mm  L/Bal. 9 mm  L/Bal. 9 mm  D.O.A. 6/5/23 D.O.I. 1/5/2023  Survey held at  Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  FTO O/S  The U/C / Chasals frame / Body Structure affected due to collision.
1) Cota/Time, File Return to?  Add Fee:	ys Of Repair: survey No. of Trip:  Survey Fee: Transportation:  Site Insp (\$ ) _ \$ + RS \$!  Interview (\$ ), Fig. 35
Report Format : Lump Sum / I.B.I: (S	Tech Invs (\$ ) Ohers  Weekend (\$ )

Not Swithers Resurry B4 paint

AAD2305-038

### **Trans-cab Auto Services Pte Ltd**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel Nc Fax No. : 62571330 CO./ GST Reg. No. 201019626G

**SHC5196A** 

SHC5196A Vehicle No.: Chassis No.: JTDKB3FU303092735 1 1 MAY 2023 200303878K Co UEN .: **TOYOTA** Vehicle Make: Vehicle Model: **PRIUS GEN 4** Date of Accident: 6/5/2023 Third Party Insurer: SJR1348C/ Chine. Date of Registriation: 20/11/2020 **PART** LIST 1 COVER, FRONT BUMPER 659.40 ABSORBER, FRONT BUMPER ENERGY 100.91 7 SUPPORT, FRONT BUMPER SIDE, LH 100.49 X 1 SUPPORT, FRONT BUMPER SIDE, RH Dil 100:49 -STAY SUB-ASSY, FRONT BUMPER, LH 5m \$ 59.85 X 1 STAY SUB-ASSY, FRONT BUMPER, RH 59.85 X 1 **GRILLE, RADIATOR, LOWER NO.1** 224.70 139.76 1 BRACKET, FRONT BUMPER EXTENSION MOUNTING TOTAL \$ 1,445.44 25% \$ 361.36 1,084.08 **SPECIAL NETT** 65.00 Gesa **FRT BUMPER CLIP** FRT NUMBER PLATE WITH MOULDING 180.00 X TOTAL \$ 245.00 **TOTAL PARTS \$** 1,329.08 **LABOUR** 

To rust-proofing of the affected areas.	\$ Na 600.00	X
Putty and spray painting of the affected portion.	\$ 1,200.00	2201
Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the		
same	\$ 2,000.00	2001

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SHC5196A

To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.

\$ No 380.00 X

To Transfer Of Fender Fittings, Attachments And Perform Water Seepage Test.

\$ NN 170.00 X TOTAL \$ 4,350.00

AAD2305-038

OVERALL TOTAL \$ 5,679.08

1/rday

# 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:

# **C** 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 witholding 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.

- The Issue reporting may be referred to the Police for Investigation.
   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 Reported by **Date of Accident** 

**Exact Location of Accident** Additional Location Information

Country/State of Loss

07/05/2023 18:14 (SGT)

**Actual Driver** 

06/05/2023 17:25 (SGT)

Singapore

BLK 933 JURONG WEST STREET 91(CARPARK ENTRANCE)

Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

**SHC5196A** 

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No

**Email Address** Mobile Phone No Alternative Phone No Yes

TRANS-CAB SERVICES PTE LTD

2XXXXX878K

claims@transcab.com.sq (Phone) +65-62876666

**VEHICLE PARTICULARS** 

Manufacturer

Model Variant

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 **Transmission** 

CC

Tovota **Prius** 

Private hire

No - Claiming third party

Taxi Auto

1798

**INSURANCE COMPANY** 

Name of Insurance Company

Policy Number / Cover Note Number

HSBC Life (Singapore) Pte. Ltd

VFX/P2413997

DRIVER

Name of Driver NRIC No

Date Of Birth Occupation

ABBAS BIN BAHAROM

SXXXX428J 18/09/1960

Outdoor

Accident report SA1D23560003

MY VEHICLE WAS ALREADY STOPPED BEHIND THE SAID VEHICLE. THERE WAS A LORRY IN FRONT OF THIS SAID VEHICLE. THE LORRY HAD AN ISSUED TO ENTER THE CARPARK. HENCE THE LORRY REVERSED HIS VEHICLE, FOLLOWED BY THE SAID VEHICLE. HENCE THE BARRIER WAS ALREADY LIFTED UP AND THE LORRY SLOWLY ENTERED THE CARPARK ENTRANCE. THE SAID VEHICLE SUDDENLY REVERSED HIS VEHICLE AND AS A RESULT HIT DIRECTLY INTO MY VEHICLE FRONT PORTION. THE DRIVER FORGOT TO SHIFT BACK HIS GEAR.

ATTACHMENT(S)

Name

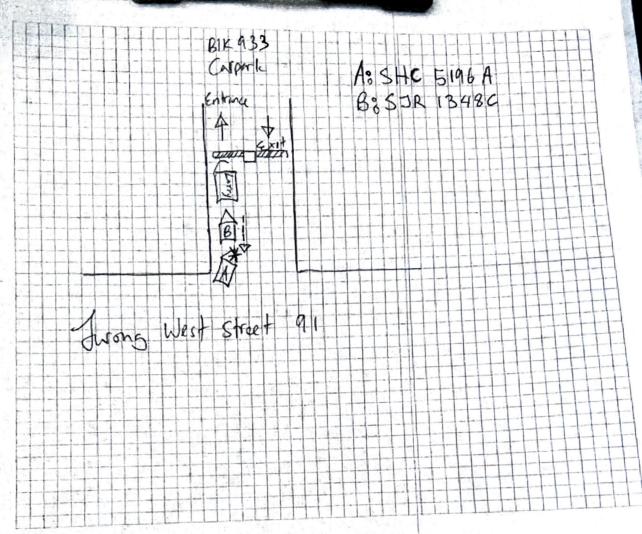
Gender

Are accident photos available for attachment? Was there any video captured by Car Camera? Yes No

Male

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

**SJR1348C** Vehicle Registration Number Toyota Vehicle Manufacturer Corolla Vehicle Model Vehicle Variant Vehicle Colour Private car Vehicle Category **ASADUZZAMAN** Name of Driver SXXXX939Z NRIC No (Phone) +65-96472701 Contact Number **Address** Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver) PASSENGER 1 Passenger 1



Policyholder's Signature Date & Time: Oriver's Signature (If driver is not the policyholder) Date & Time: VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
AIZAM BIN ATAN

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .: