

ASS. REG. BY: Tajjiah

REF:

CS/E 9/23005/23/TVS

## 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. DMPG23003128Claims No. CDMPG23001215Sum Insured: \_\_\_\_\_ Excess: 9700

(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: 9188K

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SK4 3339M Yr Regn: 2019, March

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

Truck / Trailer or

Make: Toyota Lexus RX300 c.c. 1998Colour white A/C: Insured / Std / Nil / NASp. Reading 84 611 T/Radio: Insured / Std / Nil / NA

Eng/No: \_\_\_\_\_

C/No: JT JBAMCA 30 2067856

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: 235/55R20R: 235/55R20

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

TOYO / YOKO or

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. \_\_\_\_\_ D.O.I. 19/5/23Survey held at Vin's AutoDes. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
26/6/23	Final fig \$25,524 confirmed by email (Red 4207, 14%)

Date/Time, File Pass to?

☐ : Preli. Report

1) \_\_\_\_\_

☐ : Final Report

Date/Time, File Return to?

2) 27/6/23-typistDays Of Repair: 7

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

\_\_\_\_ \$ + RS. \_\_\_\_ \$

Photos \_\_\_\_\_

Others \_\_\_\_\_

TOTAL \_\_\_\_\_

Rep. Format: MerimenLump Sum / L.B.A. : \$25,524Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)



## Estimated Cost of Repair

Attention To : Ergo Insurance Pte Ltd  
8 Temasek Boulevard  
#04-01 Suntec Tower 3  
SINGAPORE 038988

### Claim Details

Case Ref. No. : OD/052023/6235  
Date : 17-05-2023  
Accident Date : 17-05-2023

### Vehicle Details

Make & Model : Toyota LEXUS RX300 5DR SUV  
(AT) (4WD) LUXURY  
Chassis No : JTJBAMCA302067856  
Registration No : SKU3339M

S/N	Description	Qty	Amount (\$\$)
1	FRONT BONNET (ORDER)	1.00	bt ✓ \$1,500.00
2	BONNET RH HINGE	1.00	? \$50.00
3	BONNET LH HINGE	1.00	? \$50.00
4	BONNET RH ABSORBER (ORDER)	1.00	x \$170.00
5	BONNET LH ABSORBER (ORDER)	1.00	x \$170.00
6	BONNET RUBBER	1.00	? \$60.00
7	BONNET INSULATOR	1.00	x \$260.00
8	BONNET LOCK	1.00	bt ✓ \$80.00
9	RH HEADLAMP (ORDER)	1.00	? \$3,200.00
10	LH HEADLAMP (ORDER)	1.00	cut ✓ \$3,200.00
11	FRONT TOP GRILLE	1.00	de ✓ \$650.00
12	FRONT LOWER GRILLE	1.00	cut ✓ \$160.00
13	FRONT TOP GRILLE OUTER CHROME MOULDING	1.00	cut ✓ \$280.00
14	FRONT LOWER GRILLE CHROME MOULDING (ORDER)	1.00	cut ✓ \$440.00
15	FRONT TOP GRILLE RUBBER	1.00	tri ✓ \$30.00
16	FRONT GRILLE EMBLEM (ORDER)	1.00	cut ✓ \$220.00
17	FRONT GRILLE RH COVER	1.00	mi ✓ \$40.00
18	FRONT GRILLE LH COVER	1.00	mi ✓ \$40.00
19	FRONT CAMERA (ORDER)	1.00	cut ✓ \$1,100.00
20	FRONT BUMPER (ORDER)	1.00	de ✓ \$450.00
21	FRONT BUMPER NO.PLATE GARNISH	1.00	de ✓ \$80.00
22	FRONT BUMPER LH NOZZIE GUN	1.00	? \$270.00
23	FRONT BUMPER RH NOZZIE GUN COVER	1.00	x \$20.00
24	FRONT BUMPER LH NOZZIE GUN COVER	1.00	x \$20.00
25	FRONT BUMPER RH FOG LAMP	1.00	x \$210.00
26	FRONT BUMPER LH FOG LAMP	1.00	x \$210.00
27	FRONT BUMPER RH FOG LAMP COVER	1.00	x \$50.00
28	FRONT BUMPER LH FOG LAMP COVER	1.00	x \$50.00
29	FRONT BUMPER RH FOG LAMP CHROME TRIM	1.00	x \$70.00
30	FRONT BUMPER LH FOG LAMP CHROME TRIM	1.00	x \$70.00



# Vin's

**Vin's Motor Pte Ltd**  
160 Sin Ming Drive  
#03-03 Sin Ming Autocity  
Singapore 575722  
Tel : 6453 2121 Fax : 6459 9795  
GST Registration No. 199906067G

31	FRONT BUMPER RH SIDE COVER	1.00	X	\$70.00
32	FRONT BUMPER LH SIDE COVER	1.00	?	\$70.00
33	FRONT BUMPER RH SIDE PAD	1.00	X	\$80.00
34	FRONT BUMPER LH SIDE PAD	1.00	?	\$80.00
35	FRONT BUMPER RH SIDE RETAINER	1.00	X	\$70.00
36	FRONT BUMPER LH SIDE RETAINER	1.00	del	\$70.00
37	FRONT BUMPER SPONGE	1.00	car	\$60.00
38	FRONT BUMPER REINFORCEMENT	1.00	?	\$350.00
39	FRONT REINFORCEMENT RH BRACKET (ORDER)	1.00	?	\$80.00
40	FRONT REINFORCEMENT LH BRACKET (ORDER)	1.00	?	\$80.00
41	FRONT BUMPER UNDER COVER	1.00	X	\$110.00
42	FRONT BUMPER CLIPS	10.00	neg	\$20.00
43	FRONT SUPPORT PANEL (ORDER)	1.00	bt	\$1,300.00
44	FRONT SUPPORT PANEL TOP COVER	1.00	del	\$230.00
45	FRONT SUPPORT PANEL TOP COVER CLIPS	10.00	neg	\$20.00
46	BRACE PANEL	1.00	bt	\$160.00
47	AIRCON CONDENSER (ORDER)	1.00	?	\$1,400.00
48	RADIATOR (ORDER)	1.00	?	\$1,800.00
49	RADIATOR RH SIDE GUIDE	1.00	?	\$70.00
50	RADIATOR LH SIDE GUIDE	1.00	?	\$70.00
51	INTER COOLER (ORDER)	1.00	?	\$40.00 400
52	BATTERY BRACKET	1.00	X	\$60.00
53	BATTERY TRAY	1.00	X	\$60.00
54	AIR CLEANER BOX ASSY	1.00	X	\$800.00
55	SMOG SENSOR (ECS)	1.00	car	\$210.00
56	FRONT RH FENDER	1.00	Rv	\$520.00
57	FRONT LH FENDER	1.00	bt	\$520.00
58	FRONT RH FENDER TOP COVER	1.00	X	\$110.00
59	FRONT LH FENDER TOP COVER	1.00	?	\$110.00
60	FRONT LH WHEEL ARCH GARNISH	1.00	?	\$130.00
61	FRONT RH SEAT BELT	1.00	act	\$900.00
62	FRONT LH SEAT BELT	1.00	act	\$900.00
63	AIRBAG SENSOR	2.00	act	\$360.00

\$24,110.00

Margin: 10%

\$2,411.00

\$26,521.00

64	FRONT NO. PLATE	1.00	bt	\$40.00
65	COOLANT	1.00	?	\$80.00
66	TO REFILL AIRCON GAS	1.00	neg - 100	\$150.00
67	TO RESET HEADLAMP SYSTEM	1.00	100 180	\$280.00
68	TO RESET AIRBAG SYSTEM	1.00	200	\$380.00
69	TO REPAIR DAMAGES	1.00	800	\$980.00

# Vin's

**Vin's Motor Pte Ltd**  
160 Sin Ming Drive  
#03-03 Sin Ming Autocity  
Singapore 575722  
Tel : 6453 2121 Fax : 6459 9795  
GST Registration No. 199906067G

70 TO SPRAY PAINTING

*pearl white*

1.00

*1200*

\$1,300.00

**Subtotal w/o GST:**

**\$29,731.00**

*Taufik 97445744 / 62563561*  
*Not Authorise*  
*Ex \$700*

*14/5 / 1232 4pm*

*taufik e / kuantan.com*

*P/P Resurvey before paint*  
*7 days*

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:

**Issued by Iswan**

This is a computer-generated document. No signature is required.

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	738N
<b>Vehicle Details</b>	
Vehicle No.:	SKU3339M
Vehicle to be Exported:	No
Intended Deregistration Date:	19 May 2023
Vehicle Make:	TOYOTA
Vehicle Model:	LEXUS RX300 5DR SUV (AT) (4WD) LUXURY
Primary Colour:	White
Manufacturing Year:	2018
Engine No.:	8ARW996745
Chassis No.:	JTJBAMCA302067856
Maximum Power Output:	175.0 kW (234 bhp)
Open Market Value:	\$56,318.00
Original Registration Date:	29 Mar 2019
First Registration Date:	29 Mar 2019
Transfer Count:	0
Actual ARF Paid:	\$73,373.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Mar 2029
PARF Rebate Amount:	\$55,029.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	28 Mar 2029
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$35,310.00
COE Rebate Amount:	\$20,213.00
<b>Total Rebate Amount:</b>	<b>\$75,242.00</b>

The information contained herein is correct as at 17 May 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	17/05/2023 16:38 (SGT)
Reported by	Actual Driver
Date of Accident	17/05/2023 08:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG WOODLANDS ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU3339M
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CHENG FONG ENTERPRISES (S) PTE LTD
Company Reg No	1XXXXX738N
Email Address	info.chengfong@gmail.com
Mobile Phone No	(Phone) +65-83388888
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	LEXUS RX300 5DR SUV (AT) (4WD) LUXURY
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1998

#### INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMPG23003128

#### DRIVER

Name of Driver	ANG BANG YAO
NRIC No	SXXXX601B
Date Of Birth	17/09/1982
Occupation	Indoor

Date Of Driving Pass .....	24/01/2003
Driving experience .....	20 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-83388888
Alt. Phone Number .....	-
Email Address .....	info.chengfong@gmail.com
Address .....	34C CORONATION ROAD
Address complement .....	-
Postcode .....	269447
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	DIRECTOR
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

SAME AS SKETCH

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBA5050T
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Goods vehicle
Name of Driver .....	ALAGAR SEKAR
NRIC No .....	GXXXX564T

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



**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:

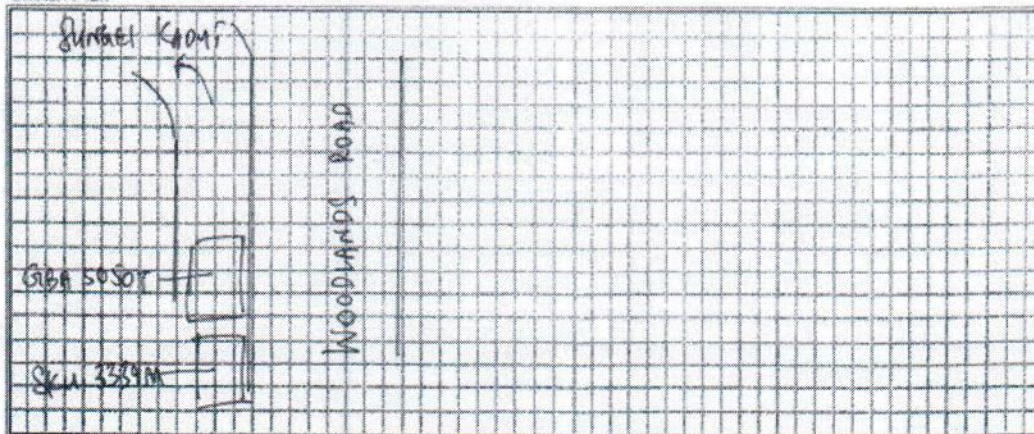
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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/are 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**



vJun2022

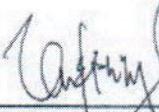


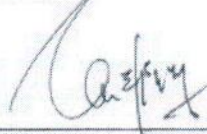
**Describe Circumstances of the Accident**


830 am, I was driving along Woodlands Road and could not  
stop on time, and knock onto the back of GBA 50507.

**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  
& Time

  
Witnessed by Reporting Centre  
Personnel