

ASS. REC. BY:

REF:

C12 / 23005217/KC

Kenneth

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.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(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:

12 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:

GBJ 7886 X

Yr Regn:

08, 19

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

Truck / Trailer or

Make:

Toy Dyna

C.C.

2882

Colour:

Silver

A/C:

Insured / Std / NI / NA

Sp. Reading

130966

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JTFAT35Y70K 212918

Gen. Cnd: 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:

195R15X8

R:

155R12X8(01)

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

33

mm

L/Bal.

6

mm

L/Bal.

33

mm

D.O.A.

19/5/23

D.O.I.

24/5/2023

Survey held at

Des. of Damages: Fnt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

☐

: Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transport:

S - RS - SI

P. Parts

Others

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

TOTAL

Report Format:

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

112

REPAIR DETAILS

Reference

GBJ7866X
TP/China

Part Source: (Last Synchronised: 24 May 2023)

Parts: N/A TOYOTA DYNA 150 2.8 D 5MT (M) (Model not available in database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for GBJ7866X)

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		*1 pc rear exhaust pipe	0.00	0.00	*210.00 F 7
2	1		*1 pc LH taillamp	0.00	0.00	*105.00 F —
3	1		*1 pc LH taillamp panel	0.00	0.00	*35.00 F —
4	1		*1 pc front bumper	0.00	0.00	*230.00 F —
5	1		*2 pcs front bumper brackets @ \$105/pc	0.00	0.00	*210.00 F 4
6	1		*1 pc front grille	0.00	0.00	*220.00 F —
7	1		*1 pc front grille logo	0.00	0.00	*40.00 F —
8	1		*4 pcs front grille clips @ \$2/pc	0.00	0.00	*8.00 F —
9	1		*2 pcs headlamps @ \$320/pc	0.00	0.00	*640.00 F 4
10	1		*2 pcs headlamp clips @ \$3/pc	0.00	0.00	*6.00 F 4
11	1		*1 pc front panel	0.00	0.00	*430.00 F —
12	1		*1 pc air-con evaporator	0.00	0.00	*950.00 F 7
13	1		*1 pc air-con blower	0.00	0.00	*175.00 F 7
14	1		*1 pc front panel emblem Dyna	0.00	0.00	*35.00 F —
15	1		*1 pc front wiper panel	0.00	0.00	*145.00 F —
16	1		*1 pc front LH wiper nozzle	0.00	0.00	*25.00 F —
17	1		*1 pc front windscreen glass rubber	0.00	0.00	*95.00 F —
18	1		*1 pc front LH mirror	0.00	0.00	*210.00 F —
19	1		*1 pc front LH cornal garnish	0.00	0.00	*140.00 F X
20	1		*1 pc front chassis cross member	0.00	0.00	*130.00 F 7
21	1		*1 pc air-con condenser assy	0.00	0.00	*500.00 F 7
22	1		*1 pc front LH door	0.00	0.00	*650.00 F X
23	1		*1 pc cabin rear LH pillar emblem D4D	0.00	0.00	*40.00 F X
Sub Total (\$\$)						5,229.00
+ Margin on L,N Items 10.00% (\$\$)						522.90
Total Parts (\$\$)						5,751.90

F=Franchise part.

Report was unsubmitted during this print-out.
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Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	1	1 pc front number plate	35.00
2	1	1 pc rear number plate	35.00
3	1	1 pc rear step bar	380.00
4	1	1 set reverse sensor	200.00
5	1	2 pcs rear stoppers @ \$110/pc	220.00

LKK Auto Consultants nence 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 surveys on a "Without Prejudice" basis
- No illegal modifications (as allowed)
- Supplemental surveys must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature

Date

Sub Total (\$\$)

870.00

Estimates on Labour

(2/2)

No	Particulars	Lab.Type	Amount
Labour Items			
1	Remove & refix rear step bar,taillamps,exhaust pipe;to straighten,knocking & repair rear RH chassis,rear truck end member & realign the same	New	700.00 ✓
2	Remove & refix front windscreen glass	New	60.00 ✓
3	Remove & refix air-con,check,vacuum & refill gas	New	100.00 ✓
4	Remove & refix dashboard,meter assy & check wiring	New	250 280.00
5	Remove & refix frt bumper assy,grille,headlamps,frt wiper assy;to cutting,welding & renew frt panel,frt main chassis,crossmember;Remove & refix frt LH door,transfer lock assy,inner attachment;knocking & repair frt LH windscreen pillar & realign the same	New	800-1100 1,500.00
6	Remove & refix frt LH door glass	New	60.00 X
7	Putty & respray on frt panel,frt LH door,frt bumper,grille,wiper panel,windscreen pillar,cabin rear LH windscreen pillar,frt chassis cross member & all affected areas	New	800 1,100.00
8	1 pc freezer box RH tailgate assy	(M) New	(Bill) 3,500.00 2
9	1 pc freezer box rear frame including labour to renew freezer box rear frame and check system	New	2000 2,300.00 ?
10	Putty & respray rear RH tailgate	New	180 300.00
11	To rewrite advertisement	New	(Bill) 450.00 2
Gross Labour Cost (\$\$)			10,350.00

Report was unsubmitted during this print-out.
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< END OF ESTIMATES >

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	22/05/2023 18:33 (SGT)
Reported by	Actual Driver
Date of Accident	19/05/2023 07:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ7866X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TUAN GOU PTE LTD
Company Reg No	2XXXXXX312D
Email Address	xiaoqiang@tiantian.sg
Mobile Phone No	(Phone) +65-94358156
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2982

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPCVE002367

DRIVER

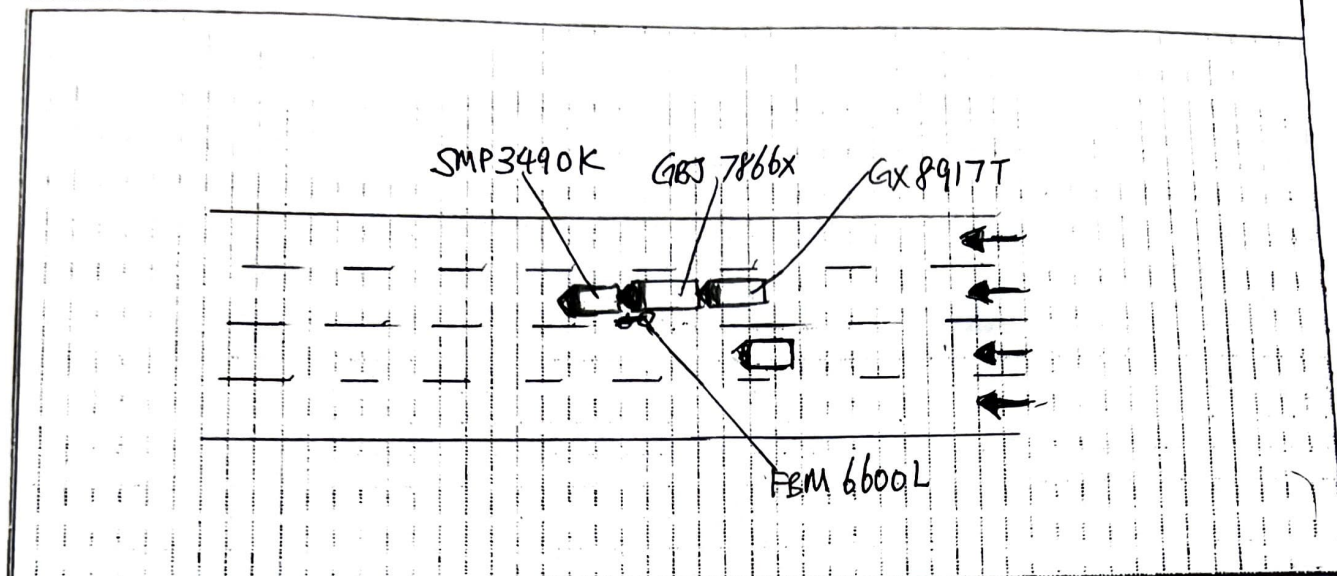
Name of Driver	WEI YANFENG
Passport No/FIN	GXXXX387T
Date Of Birth	22/02/1989
Occupation	Outdoor

Describe Circumstance of the Accident

.. NOTE PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14 DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

() Claim Own Policy (☒) Claim Third party () Reporting Only
() Claim OD/ TP at other workshop ()

Sketch Plan



ATTACHED TO POLICE REPORT

Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Signature]

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

19/5/23

[Signature]

19/5/23

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

[Signature]