	_
ASS, REC. BY	: Tauph
	A A

REF:

CS/1C523005671/T945

ASSIGNMENT SICVIS4T Yr Regn: 20151 Ang From: Date: Veh No: Estimated Cost: Type:/M.Car / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover / OD ITPY WS ITP RES ! OD RES ! EVA ! INV ! MV Truck / Traller or To Inspect Vehicle No: Make: at Workshop m/s Colour Insured / Std / NI / NA Sp.Reading T/Radio: Insured / Std / NI / NA Insured: Eng/No: Policy No. Claims No. Gen. Cond: Good/Fair/Poor/Burnt Sum Insured: Excess: Steering: Inorder / Jammed / Leaked / Burnt or (Client's Record) Brake: Inorder / Jammed / Leaked / Burnt or Make of Veh: Modi: NII / SIRim / STD A/Rim or Tyre Size: (Policy Condition) Remark: The veh had commenced its N/S O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU/ PIR/ SUMI / repair at the time of inspection. TOYO / YOKO or Bal. or Market Value: Front Rear Consistent? : Yes or No IDAC Accident Rport R/Bal. mm mm Consistent?: Yes or No GIA / PR Seen: L/Bal. UBal. mm Est. Repairs: Res.: Yes or No days D.O.A. D.O.I. 3 Val.: Yes or No Lum Sum: Survey held at WOO Des. of Damages : Frt / Rear / O/S / N/S / U/G / Rooftop or CA / REV / REP. / 24 HRS Vehicle: IN / OUT Person Contacted: Dale: The U/C / Chassis frame / Body Structure affected due to collision. Date / Time Action / Instruction Date/Time, File Pass to? : Preli. Report Days Of Repair: : Final Report Resurvey No. of Trip: Survey Fee: Date/Time, File Return to? Transportation: Add Fee: :Site Insp (\$ _S+RS__SI : Interview (\$ Pholos Reported: : Tech. Invs (\$ Others Lump Sum / LBJ: (% Weellend (\$

TOTAL

Bifrost Auto Pte Ltd

8 Kaki Bukit Ave 4 #01-49, Premier @ Kaki Bukit Singapore 415875 Tel: 93290237 Email: claims_rar@bifrostauto.com

SJE :	Vehicle Nos:	SKV 154T
	Made :	Volkswagen
Date of Survey :	Model:	Golf A7 1.4 TSI AT
Date of ReSurvey:	Chassis No :	
Contacts:	_	
* AGREED Cost Of Repair and Repair Day/s with SJE *		
Amount:	Working Day	

Nos	PARTS	Qty	Unit S\$	TOTAL	S\$
Nos.	Rear Tailgate	1	\$ 1,828.60	\$ 66	1,828.60
1776	Rear Tailgate "Golf" Emblem	1	\$ 90.90	\$ na-	90.90
2	Rear Tailgate "TSI" Emblem	1	\$ 105.30	\$ ner	105.30
3	Rear Tailgate "Bluemotion" Emblem	1	\$ 103.80	\$ ner-	103.80
5	Rear Tailgate Weatherstrip	1	\$ 337.40	\$ ×	337.40
	Rear Tailgate Lock Assembly	1	\$ 673.70	\$ X	673.70
7	Rear Tailgate Damper RH	1	\$ 117.50	\$ ×	117.50
	Rear Tailgata Damper LH	1	\$ 117.50	\$ X	117.50
8	Rear Tailgate Reflector Lamp RH	1	\$ 331.90	\$ X	331.90
9	Rear Tailgate Reflector Lamp LH	1	\$ 331.90	\$ 691X	331.90
10	Rear Tailgate Inner Trim Board	1	\$ 528.10	\$ X	528.10
11	Rear Bumper	1	\$ 1,441.30	\$ de/	1,441.30
12	Rear Bumper Sensor Bracket	2	\$ 17.50	\$ non	35.0
13	Rear Bumper Sensor	2	\$ 194.60	\$ 1W/	389.2
14	Rear Bumper Lower Diffuser	1	\$ 365.60	\$ art	365.6
15	Rear Bumper Reinforcement	1	\$ 814.60	\$ 61-	814.6
16	Rear Bumper Centre Bracket	1	\$ 85.40	\$ de-	85.4
	Rear Bumper Side Bracket Upper RH	1	\$ 51.90	\$ X	51.9
18	Rear Bumper Side Bracket Upper LH	1	\$ 51.90	\$ X	51.9
19	Rear Bumper Side Bracket RH	1	\$ 50.60	\$ X	50.6
20	Rear Bumper Side Bracket LH	1	\$ 50.60	\$ X	50.6
21	Rear Bumper Reflector RH	1	\$ 78.80	\$ X	78.8
22	Rear Bumper Reflector LH	1	\$ 78.80	\$ cua-	78.8
24	Rear Bumper Number Plate Lamp RH	1	\$ 45.00	\$ X	45.0
25	Rear Bumper Number Plate Lamp LH	1	\$ 45.00	\$ X	45.0
26	Rear Taillamp Assembly RH	1	\$ 385.60	\$ <	385.6
27	Rear Taillamp Assembly LH	1	\$ 385.60	\$ X	385.6
28	Rear End Panel	1	\$ 790.50	\$ ht-	790.5
29	Rear End Panel Top Garnish	1	\$ 135.60	\$ de	135.6
30	Rear Spare Tyre Panel Top Board	1	\$ 325.10	\$ X	325.1
31	Rear Fender Inner Shield RH	1	\$ 107.10	\$ X	107.1
31	Rear Fender Inner Shield LH	1	\$ 107.10	\$ X	107.3

	B. Frader Inner Trim Board BH	1	5	425.80	\$	×	425.80
33	Rear Fender Inner Trim Board RH	-	4		4	,	425.00
34	Rear Fender Inner Trim Board LH	1	\$	425.80	\$	X	425.80
35	Rear Exhaust Pipe Assembly	1	\$	1,022.10	\$	X	1,022.10
36	Rear Exhaust Pipe Heat Shield	1	\$	102.10	\$	1	102.10
37	Rear Exhaust Pipe Mounting	2	\$	24.00	\$	1	48.00
	43.7569 DAKE 17000		Par	ts Sub Total :	\$		12,410.70
		10%		Discount	\$		1,241.07
			P	ARTS TOTAL :	\$		11,169.63

Nos.	SPECIAL NETT	Qty		Unit S\$	TOTAL S	\$
1	Rear Number Plate	1	\$	50.00	\$ 45 Mis-	50.00
2	Rear Bumper Clips - Set	1	\$	50.00	\$ 30m/	50.00
3	Rear Bumper Lower Diffuser Clips - Set	1	\$	50.00	\$ 20 W/	50.00
4	Rear Tailgate Inner Trim Board Clips - Set	1	\$	50.00	\$ X	50.00
5	Rear Tailgate Reflector Taillamp Clips - Set	1	\$	30.00	\$ ×	30.00
6	Rear Taillamp Assembly Clips - Set	1	\$	30.00	\$ <	30.00
7	Rear End Panel Top Garnish Clips - Set	1	\$	50.00	\$ 20 nev-	50.00
8	Rear Fender Inner Shield Clips - Set	1	\$	30.00	\$ X.	30.00
9	Rear Fender Inner Trim Board Clips - Set	1	\$	100.00	\$ ×	100.00
10	Rear Tailgate Windscreen Glass Sealant	1	\$	150.00	\$ 60mg/	150.00
11	Rear Tailgate Sealant	. 1	\$	150.00	\$ X	150.00
12	Rear End Panel Sealant	1	\$	150.00	\$ 40ner	150.00
13	Rear Bumper Reverse Camera - Set	1	\$	550.00	\$ X	550.00
		SP	ECIA	L NETT TOTAL :	\$ 1	1,440.00

Nos.	LABOUR	TOTA	L S\$
1	To Panel Beat, Remove & Refix Parts	\$ 600	1,400.00
2	To Spray Paint Affected Areas	\$ 600	1,200.00
3	Wiring & Bulb Check	\$ 30	100.00
4	To Transfer Rear Tailgate Mechanism	\$ 60	150.00
5	To Remove & Refix Rear Tailgate Windscreen Glass	\$ 120	150.00
6	To Remove & Refix Rear Bumper Reverse Sensors	\$ 30	150.00
7	To Remove & Refix Rear Bumper Reverse Camera	\$ X	150.00
8	To Remove & Refix Interior Upholstry to facilitate repairs	\$ 60	150.00
9	To Remove & Refix Rear Exhaust Pipe	\$ X	200.00
10	To Remove & Refix Fuel Tank	\$ \times	200.00
11	To Conduct Water Leak Test	\$ X	100.00
12	To apply anti rust on affected parts	\$ 30	180.00
13	To Send for Diagnostic and Reset Control Unit. Programming & Calibration	\$ X	480.00
50,000	LABOUR TOTAL :	\$	4,610.00

Taym 97495749 6/6/73 C 12pm
L/5 Rosurvey after neport
fenfilm C/Manforwan
5 days
- To cheek consistency of accident
- To cheek part prices

11,169.63 PARTS TOTAL: \$

ISRECIAIONERS HEADER hence notify the Repairer of the following:

To resulte OUR TENTAL Spray Sainting

1,440,00 4,610,00

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

Acute Medged by Repairer

GRAND TOTAL : \$ 17,219.63

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID:
Vehicle Details

Vehicle No.: SKV154T

Vehicle to be Exported: Yes
Intended Deregistration Date: 05 Jun 2023

Vehicle Make: VOLKSWAGEN

Vehicle Model: GOLF A7 1.4 TSI AT 5G13GZ W/O HID

739B

Primary Colour: Grey
Manufacturing Year: 2015
Engine No.: CXS258240

Chassis No.: WVWZZZAUZFW352485

Maximum Power Output: 90.0 kW (120 bhp)
Open Market Value: \$19,158.00

Original Registration Date: 26 Aug 2015
First Registration Date: 26 Aug 2015

Transfer Count: 1

Actual ARF Paid: \$9,158.00 Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 25 Aug 2025
PARF Rebate Amount: \$5,494.00

Intended COE Rebate Details

COE Expiry Date: 25 Aug 2025

COE Category: A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years): 10

QP Paid: \$56,209.00

COE Rebate Amount: \$12,480.00

Total Rebate Amount: \$17,974.00

The information contained herein is correct as at 05 Jun 2023

OK

Date of Accident	01/06/33 Accident Time: 1555 (24-HR-FORMAT)
Accident Place	Woodlands Are 6
	StV1547 CC: 1.4 Vehicle Make/Model: Volkswagen Goff
Vehicle Reg. No (Car plate No.)	EQ Policy No. OM PIPHQ 23 - 006448
Insurance Company	
Name of Registered Owner	: Company / Individual Kon's Loh Siew Goh
ID of Registered Owner	: Co Reg No: Owner's NRIC No: \$6933739B
OWNER EMAIL ADDRESS:	: Co Contact No: Owner's Contact No: 9899 SSII
reporting. gt agread. 10m	Jan Teck Soun DRIVER'S NRIC No: 3,5786090
DRIVER'S Name	
DRIVER'S Date of Birth	: 18/11/63 DRIVER'S License Pass Date 08/11/86
Relationship bet. Owner & Driver	: Spouse \ Parents \ Children\ Sibling \ Employee\ Others: _ Riend
DRIVER'S Address	: Block 250 Tompines St 21 Hof-514 P(520520)
DRIVER'S Contact No./ Alt No.	:1) 9185 2133 2)
DRIVER'S Occupation	: INDOOR \OUTDOOR (eg. working inside or outside of an ofc)
Email Address	reporting gt @ gmay. 10m
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including D Was the accident reported to the po Was there any video Captured by co Exact purpose for which vehicle wa Any injuries, if yes(name of the i	as being used at the time of accident: Private use \ Work purpose injured person)
Othe	r Party Driver's Particulars (if any)
Vehicle Reg No: Pt7199211	Vehicle Reg No:
Vehicle Make Model:	Vehicle Make\Model:
Name DRIVER:	Name DRIVER:
IC No. DRIVER:	IC No. DRIVER:
DRIVER'S Contact & add:	DRIVER'S Contact & add:
REPORT FORM EXPLAINED IN : ENGLIS	SH / CHINESE / MALAY / TAMIL OTHERS:

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.
- 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.
- 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:

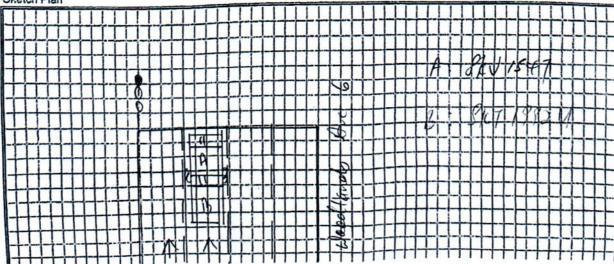
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

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

Witnessed by Reporting Centre Personnel (Name as in NRICAD card)

Sketch Plan



Scanned with CamScanner



Describe Circumstance of the Accident
Lefer do TP Report T/20230603/2058
T/ 2030603/ 2058
, /

Declaration

We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre Personnel

Scanned with CamScanner



扫描全能王 创建





Report No. 1 202 KH00 2028

Plying Station Of Origin Haugand N P C 60 Holidand Avenue 9 SINGAFORE 538775 Tel No. 1800-4800000

REPORT OF A TRAFFIC ACCIDENT

CONTROLLER MANAGER

Date Time Report Made

Vide Report No.

Station Diary No.

03/06/20	231341			
Informat	nt's Partic	ulars		
Name of Informant TAN TECK SOON			Address APT BLK 250 TAMPINES ST 520250	REET 21 #09-514 SINGAPORE
ID Type	ID No 5 515786	69D	Contact No.: Home/Office	Mobile 91852133
National	Nationality. SINGAPORE CITIZEN		Email	
Sex Male	Age. 59	Date of Birth 18/11/1963	Type of Informant, Driver	
Race: Chinese			Language:	
Оссира		ANAGER	Driving Licence Information Class: 3	Date of Expiry

Seneral Informage Type of Accident:	Injury Others	Drink Drive No	Date/Time of Accident: 01/06/2023 15:55	Type of Location X-Junction
Location: WOODLAND	S AVENUE 6			
Weather		Road Surface: Dry		- m N.L.
Traffic Flow: Two Way		Traffic Control: Traffic Light - Wo	orking	Traffic Volume: Light
Type of Collis	ion ang Vehicles - Head			Anyone conveyed by ambulance: No

Details of V	1		LL dal	Color	Condition	No of Passenge
Vehicle No.	Type	Make	Model	Color	The second secon	140 Or 1 basserige
SKT1992U	Car				Slightly Damaged	1
SKV154T	Car				Slightly Damaged	0

Details of Person Involved	建设于 以下,他们还是一些,但是一些人的人的人的。
Any Pedestrian Involved: No	
No. of Pedestrians Injured NIL	Use of Pedestrian Crossing: NA







31 - 4 N 1 T 202 V 6/13 2023

A THE DESIGNATION OF SING ACCURATION

CONTINUATION OF REPORT

Date Treatment	reatment NIL Days granted Medical Leave NIL		Date Discharge Degree of Injury		-		
Hospital Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry NIL	
Related Vehicle	NIL			Contact No.		97247925	
Vane	LIM XUAN LE SHAUN			ID No.		592197991	
Date Treatment vo. of Days gran	ted Medical Leave	04	Degree of	Injury	Sligh		
	Date De			Expiry Date charge 01/06/2023			
toxpital Chine	POW FAMILY CLINIC & SURGERY			Class of Driving		Class 3 Date of Expiry NIL	
ceinted Vehicle	SKV1541 (Car)			Contact No.		91852133	
17796	INNTEL K = JON			ID No		\$1578609D	

Brief Details.

On 01/06/2023 at about 1555hrs, I was driving along Woodlands Avenue 6 with my car vehicle (SKV154T) heading towards SLE. I stopped at the Cross Junction as the traffic light was red.

However, ten seconds after I stopped, the car vehicle behind me (SKT1992U) did not stop and hit the back of mine causing a head to rear collision.

After the accident I felt pain at the back of my neck and my lower back due to the impact of the collision.

After the incident, I met up with the driver of SKT1992U and fold him that I wanted to claim insurance, I then proceeded to take down his particulars.

No police and ambulance attended my incident. After the incident, I went to POW FAMILY CLINIC & SURGERY to make a check on my injuries sustained from the accident. The clinic then gave me a fourday MC.

I wish to add that I am making this report for record purposes. That is all.







30/3

Rep. 4% - T202305032028

Police Station Of Origin
Holdang N F G
60 His band Avenue 9 SINGAPORE 538711
Tel No. 1800-4890999

CONTINUATION OF REPORT

Signature of Officer Recording The Report F /

SGT 2 AFIF FIKRI BIN ABDULLAH JUNAIDI

Signature Of Interpreter Not applicable

Officer In Charge Of Case TP | AEIT / SLANG YLTING, STEPHANIE Contact No. 65476414

NP168

Signature Of Informant



Date/Time 03/06/2023 13 41

Classification Of Case.

