

(08/11/13) wof

ASS. REC. BY: /

Tayfiku

REF:

CS/CT/23006309/TPP2

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 Rpt: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: _____

days

Res.: Yes or No

Lump Sum: _____

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: _____

SN J87566 Yr Regn: 2023, March.

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

Truck / Trailer or

Make: _____

Honda Vezel

c.c. 1496

Colour _____

Grey

A/C: Insured / Std / NI / NA

Sp. Reading _____

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

RV 31009646

Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: _____

F: _____

215/60R16

R: _____

7 -

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

TOYO / YOKO or

Front

Rear

R/Bal. _____

mm

R/Bal. _____

mm

L/Bal. _____

mm

L/Bal. _____

mm

D.O.A. _____

D.O.I. _____

23/6/23

Survey held at _____

R/first

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

N/S, O/S U/C

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

Date / Time

Action / Instruction

Safety week.

Date/Time, File Pass to?

☐

Prel. Report

1)

Date/Time, File Return to?

☐

Final Report

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

Lump Sum / I.B.I. (\$) _____

BIFROST AUTO PTE LTD

8 KAKI BUKIT AVE 4, PREMIER @ KAKI BUKIT

#01-49 SINGAPORE 415875

Tel: +65 64524457

Fax: +65 64524584

Vehicle number: SNJ8756G

Make & Model: Honda Vezel

Chassis number: RV31009646

No.	Description of spare parts	Qty	Amount S\$
1	Bonnet	1	\$ <i>Rp</i> 967.00
2	Bonnet lock	1	\$ <i>X</i> 145.00
3	Front bumper	1	\$ <i>de</i> 987.00
4	Front bumper clips	1set	\$ <i>de</i> 80.00
5	Front bumper RH side retainer	1	\$ <i>X</i> 68.00
6	Front bumper LH side retainer	1	\$ <i>an</i> 68.00
7	Front bumper upper garnish	1	\$ <i>X</i> 287.00
8	Front bumper RH side PDC sensor	1	\$ <i>X</i> 301.00
9	Front bumper LH side PDC sensor	1	\$ <i>X</i> 301.00
10	Front bumper centre lower grille	1	\$ <i>X</i> 246.00
11	Front bumper centre lower grille RH PDC sensor	1	\$ <i>X</i> 301.00
12	Front bumper centre lower grille LH PDC sensor	1	\$ <i>X</i> 301.00
13	Front bumper RH day light lamp	1	\$ <i>X</i> 651.00
14	Front bumper RH day light lamp garnish	1	\$ <i>X</i> 204.00
15	Front bumper LH day light lamp	1	\$ <i>X</i> 651.00
16	Front bumper LH day light lamp garnish	1	\$ <i>X</i> 204.00
17	Front bumper reinforcement	1	\$ <i>X</i> 710.00
18	Front bumper lower spoiler	1	\$ <i>X</i> 356.00
19	Front bumper tow cover	1	\$ <i>X</i> 43.00
20	Front grille	1	\$ <i>X</i> 936.00
21	Front grille emblem	1	\$ <i>X</i> 66.00
22	Front grille clips	1	\$ <i>X</i> 60.00
23	RH headlamp	1	\$ <i>X</i> 1,993.00
24	RH headlamp lower bracket	1	\$ <i>X</i> 78.00
25	LH headlamp	1	\$ <i>an</i> 1,993.00
26	LH headlamp lower bracket	1	\$ <i>X</i> 78.00
27	Front RH fender	1	\$ <i>bt</i> 409.00
28	Front RH fender arch moulding	1	\$ <i>de</i> 128.00
29	Front RH fender arch moulding clips	1set	\$ <i>de</i> 60.00
30	Front LH fender	1	\$ <i>bt</i> 409.00
31	Front LH fender arch moulding	1	\$ <i>de</i> 128.00
32	Front LH fender arch moulding clips	1set	\$ <i>de</i> 60.00
33	Front LH sport rim	1	\$ <i>cut</i> 908.00
34	Front LH wheel bearing	1	\$ <i>?</i> 155.00
35	Front LH lower arm	1	\$ <i>?</i> 378.00
36	Front LH knuckle arm	1	\$ <i>?</i> 405.00
37	Front LH shock absorber	1	\$ <i>X</i> 322.00
38	Front LH tie rod end	1	\$ <i>X</i> 81.00
39	Front LH drive shaft	1	\$ <i>X</i> 1,347.00
40	Front LH linkage	1	\$ <i>X</i> 96.00
41	Steering rack and pinion	1	\$ <i>X</i> 1,425.00
42	Front undercarriage crossmember	1	\$ <i>X</i> 1,009.00
43	Front RH sport rim	1	\$ <i>cut</i> 908.00
44	Front RH wheel bearing	1	\$ <i>?</i> 155.00

45	Front RH lower arm	1	\$ 7	378.00
46	Front RH knuckle arm	1	\$ 7	405.00
47	Front RH shock absorber	1	\$ X	322.00
48	Front RH tie rod end	1	\$ X	81.00
49	Front RH drive shaft	1	\$ X	1,347.00
50	Front RH linkage	1	\$ X	96.00

\$ 23,087.00
 Parts less 20% \$ 4,617.40
 Total: \$ 18,469.60

No.	Special Nett Items	Qty	Amount S\$
1	Front number plate	1	\$ X 70.00
2	Front RH tyre	1 <i>80%</i>	\$ <i>220</i> 480.00
3	Front LH tyre	1	\$ X 480.00
4	Brake fluid	1	\$ X 85.00

Total: \$ 1,115.00

No.	Labour and painting	Amount S\$
1	Labour charges to remove, check, replace and reinstall damages bodyparts. To panel beating, cut/weld and realign all affected panels and areas	\$ <i>700</i> 1,500.00
2	Spray painting on affected areas and panels	\$ 1200 1,200.00 ✓
3	Check wiring and lighting system on affected areas	\$ <i>30</i> 80.00
4	Apply rust coating chemical on affected areas and panels	\$ <i>30</i> 60.00
5	Refocus and adjust headlamps assy	\$ <i>30</i> 60.00
6	Test drive and adjust wheel alignment system	\$ <i>80</i> 180.00
7	Remove and replace front undercarriage parts to assist repair	\$ <i>150?</i> 550.00

Total: \$ 2,130.00

Agreed Amount: _____ (Part by Part / Lump sum)

Working days: _____

Tanpin 6749574
wp 23/6/13 211am
1/3 busy after repair
Tanpin 6749574
6 days

- To check consistency of accident
 - To check part prices.

Spare Parts: \$ 18,469.60
 Special Nett: \$ 1,115.00
 Labour: \$ 2,130.00

Total Amount: \$ 21,714.60

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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 942F

Vehicle Details

Vehicle No.: SNJ8756G
Vehicle to be Exported: Yes
Intended Deregistration Date: 21 Jun 2023
Vehicle Make: HONDA
Vehicle Model: VEZEL 1.5G CVT
Primary Colour: Grey
Manufacturing Year: 2022
Engine No.: L15Z1011284
Chassis No.: RV31009646
Maximum Power Output: 87.0 kW (116 bhp)
Open Market Value: \$19,062.00
Original Registration Date: 03 Mar 2023
First Registration Date: 03 Mar 2023
Transfer Count: 0
Actual ARF Paid: \$5,000.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 02 Mar 2033
PARF Rebate Amount: \$3,750.00

Intended COE Rebate Details

COE Expiry Date: 02 Mar 2033
COE Category: A - Car-Details at OneMotoring
COE Period(Years): 10
QP Paid: \$86,556.00
COE Rebate Amount: \$69,244.00
Total Rebate Amount: \$72,994.00

The information contained herein is correct as at 21 Jun 2023

OK

VEHICLE NO: SNJ87566

MAKE & MODEL: HONDA VEZEL 1.5G CVT

AUTO/MANUAL

DATE OF ACCIDENT	20 / 06 / 2023	CC / 1500
TIME OF ACCIDENT	20:40	AM / PM
LOCATION OF ACCIDENT	61MS AVE TOWARDS PAYA LEBAR RD	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	LIM EU CHAI	
EMAIL	SG86116300@GMAIL.COM	OFFICE: MOBILE: 93803796
NRIC	S8163942F	
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY	
FLEET POLICY	YES / NO	
INCURANCE CO.	INDIA INTERNATIONAL INSURANCE	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	D23MPC0002002	
NAME OF DRIVER	AS ABOVE / IF NO:	
NRIC	AJ ABOVE	
DATE OF BIRTH	26 / 11 / 1981	
ANY PASSENGER	YES / NO	
NAME OF PASSENGER	-	
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	19 / 08 / 2002	
GENDER	MALE / FEMALE	
CONTACT NO.	Mobile: AS ABOVE Office: Home:	
EMAIL	AJ ABOVE	
ADDRESS	19 CHAI CHEE RD #07-314 (S) 46/019	
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No: INSURE:	
RELATIONSHIP	Employee / If No: OWNER	
WEATHER CONDITION	Clear / Raining / Other:	
ROAD SURFACE	Dry / Wet / Other:	
ANY INJURIES	No / If yes, Who? DRIVER	
CONTACT NO.	AJ ABOVE	
POLICE REPORT	No / If yes, Where? ONLINE	
NOTICE OF INTENDED PROSECUTION?	NO / If yes, Who?	
VEHICLE B NO.	SLD0483E Any Passenger:	
NAME		
CONTACT NO.	Any Passenger:	
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / NO	
WAS THERE ANY AUDIO RECORDED?	YES / NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / NO	
WHO IS REPORTING	DRIVER / OWNER / BOTH	
Original Language Used	English / Mandarin / Others:	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO	

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 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 invalidate 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

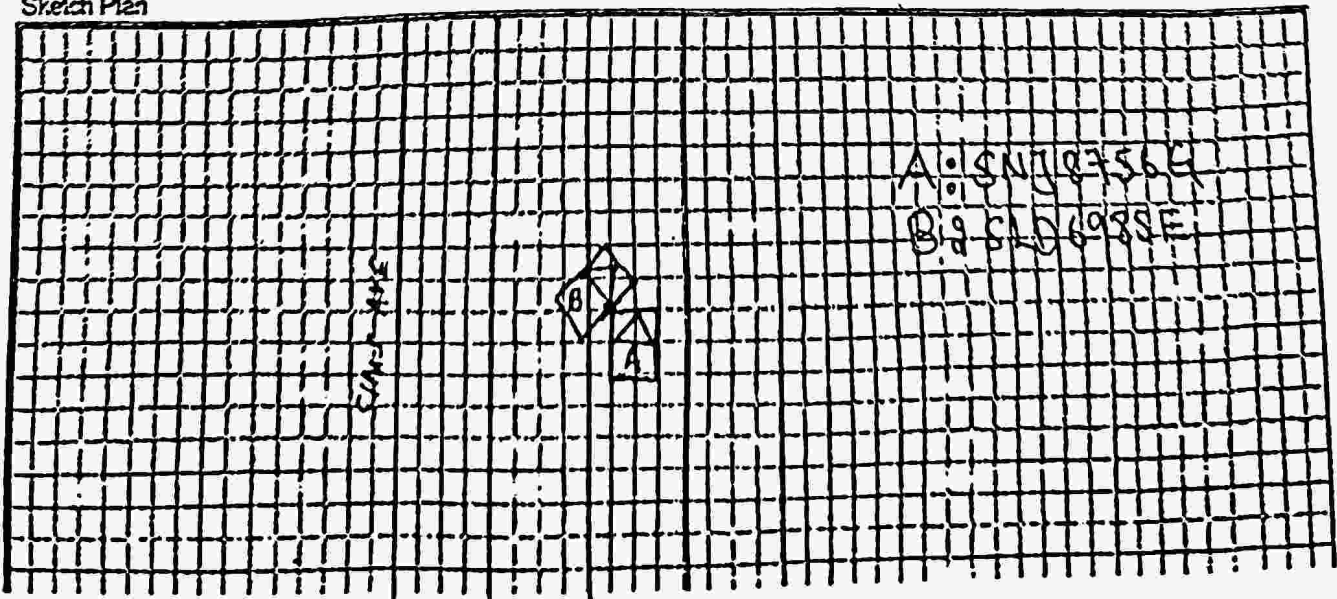
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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

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

Sketch Plan



扫描全能王 创建

Describe Circumstance of the Accident

REFER TO
POLICE REPORT

Declaration

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

KIM
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20230620/7078

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20230620/7078

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/06/2023 22:30		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: LIM EU CHAI			Address: 19 CHAI CHEE ROAD #09-314 SINGAPORE 461019		
ID Type / ID No.: NRIC NO / S8163942F			Contact No.: Home/Office: Mobile: 93803796		
Nationality: SINGAPORE CITIZEN			Email: HYXSOL@GMAIL.COM		
Sex: Male	Age: 41	Date of Birth: 26/11/1981	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: TADA DRIVER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 20/06/2023 20:40	Type of Location: Straight Road
Location: LORONG 41 GEYLANG				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLD6985E	Car				Seriously Damaged	1
SNJ8756G	Car	HONDA	VEZEL 1.5G CVT	Grey	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20230620/7078

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20230620/7078

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNJ8756G	INDIA INTERNATIONAL INSURANCE PTE LTD	D23MPC0002002	02/03/2023	01/03/2024

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM EU CHAI	ID No.	S8163942F
Related Vehicle	SNJ8756G (Car)	Contact No.	93803796
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY	Class of Driving Licence & Expiry	Class: 2B,2A,2,3 Date of Expiry: NIL
Date	20/06/2023	Date	20/06/2023
No. of Days granted Medical Leave	05	Degree of	Serious

Brief Details.

ON THE STATED VENUE, DATE AND TIME, I, VEHICLE A, BEARING CAR PLATE SNJ8756G WAS TRAVELLING STRAIGHT IN MY LANE ON LANE 2 ALONG SIMS AVE TOWARDS PAYA LEBAR RD.

SUDDENLY, VEHICLE B, BEARING CAR PLATE SLD6985E DASH INTO MY LANE FROM LANE 3 AND BANG ONTO THE LEFT PORTION OF MY VEHICLE.

MY VEHICLE PROPEL AND HIT ONTO THE KERB.

AFTER THE ACCIDENT, WE EXCHANGED PARTICULARS AND TOOK PHOTOS OF THE ACCIDENT SCENE.

I FELT PAIN ON MY NECK, LOWER BACK, CHEST, RIGHT LEG, LEFT HAND, RIGHT FINGER. SO I WENT TO OUR FAMILY PHYSICIAN CLINIC & SURGERY TO CONSULT A DOCTOR. I RECEIVED 5 DAYS OF MC.



**SINGAPORE
POLICE FORCE**



T/20230620/7078

3 of 3

Report No. T/20230620/7078

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP1B /
TAY CHUN KEEN
Contact No.: 65476436

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
20/06/2023 22:30

Classification Of Case:

NP168

