	2300 6729/K
enneth	ASSIGNMENT
From: Date:	Ven No: SGP 75 P
Estimated Cost:	Transition of the second of th
OD/TP/WS/TP RES/OD RES/EVA/INV/MV	Type: McCar M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or
To Inspect Vehicle No:	////
at Workshop m/s Alan's	- C.C / 1/0
	9/1 Consumed / Std / NI / NA
Insured:	Eng/No:
Policy No.	
Claims No.	Gen. Cond: 2600/ 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 / S/Rim / STD A/Rim or
(Policy Condition)	Tyre Size: F: 245/807820
Remark: The veh had commenced its	R:
repair at the time of inspection.	BOT DON'T EANOVA / GY / FS / LIZA /MIC ] OHTSU / PIR / SUML
Bal. or Market Value: 8/96/	TOTO / YOKO or
IDAC Accident Rport: Consistent? : Yes or No	Etoni Rear
GIA / PR Seen: Consistent?: Yes or No	UBal. 5 mm R/Bal. 6 mm
Est. Repairs: O3 days Res.: Yes or No	D.O.A. 78/6/23 D.O.I. (C/7/202)
A SANT LES OL NO	Survey held at D.O.I. 70/7/2023
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date:Person Contacted: Vehicle: IN / OU	196- 116
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
8	
Oato/Time, File Pass to? Preli. Report	
I) Flori D.	Days Of Repair:
Oota/Time, File Return to?	Resurvey No. of Trip: Survey Fee:
Add Fee:	Site Insp (\$
Report Format :	: Interview (\$
Lump Sum / I.B.I: (S	Tech Invs (\$ ) Others

# ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.

Tel: 6453 8686 (3 Lines) Fax: 6459 6550 Company Reg. No.: 201113667N GST Reg. No.: 201113667N

No.: 06868

Vehicle Insured: GBF5049Y

Accident Date : 28-Jun-2023

Date: 04-Jul-2023

Our Ref: 023141 (EQ) / CHAN

CHONG KIM WHEY

BLK 741 WOODLANDS CIRCLE

#12-431

Singapore 730741

Not Norhash Russny B& pain 3day,

### ESTIMATED COST OF REPAIR FOR BMW 730LI SGP75S

Gr 900.00 1 pc Rear n/s taillamp Rear bumper fascia 1 pc CM1,250.00 1 pc Rear n/s bumper side retainer 11, 1230.00 2 pcs Rear n/s bumper parking sensor @ S\$195.00 390.00 7 Ne 180.00 1 pc Rr n/s bumper lower side chrom 1 pc Rear n/s bumper reflector 1 80.00 X 1 pc Rear bumper lower chrome Ne 180.00 -

> 3,210.00 Add: 10%: 321.00

> > 3,531.00

To putty and spray replaced parts

800.00 3001

To remove, cut-out damaged parts, panel beating, welding, align, refix and to renew above parts

700.00 25c1

Total:

\$\$ 5,031.00 =========

Singapore Dollars Five Thousand and Thirty One 0nly

# 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:

# SINGAPORE ACCIDENT STATEMENT

# IMPORTANT NOTICE

Please report <u>correctly</u> 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

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, he 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 30/06/2023 15:43 (SGT) Reported by Date of Accident Both Policyholder and Actual Driver t Location of Accident 28/06/2023 17:19 (SGT) Auuitional Location Information Singapore Country/State of Loss SLE TOWARDS BKE BEFORE MANDAI EXIT Singapore

# DETAILS OF OWN VEHICLE

Vehicle Registration Number SGP75S

## INSURED/POLICYHOLDER

Is company? Name Of Registered Owner CHONG KIM WHEY NRIC No SXXXX191J Email Address ..... PEAKTOP75@GMAIL.COM Mobile Phone No (Phone) +65-88338113 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer Model 730LI LED NAV HUD SR RCP Variant Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC

#### INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00086272304

#### DRIVER

**CHONG WEI SONG** NRIC No TXXXX357E Date Of Birth 27/06/2001 Indoor

#### 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 InAhful 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 ladgement 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)

Lunderstand, 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 daims:
- (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 pennitted 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 furposes

Policyholder's Signature / Date & Time 30.06.33

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

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

80

Sketch Plan

