

ASS. REC. BY:

REF:

GRZY

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

DD / TP / WS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s: ICKHIN

of _____

Insured: _____

Policy No. _____

Claims No. _____

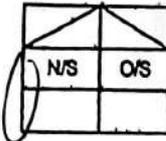
Sum Insured: _____ Excess: TBA

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: 34k

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 07 days Res.: Yes or No

Lum Sum: 1.81 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SKV 4908 Yr Regn: 09 15

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

Truck / Trailer or _____

Make: Hyundai Elastic C.G. 1591

Colour: M. Silver A/C: Insured / Std / NI / NA

Sp. Reading: 38636 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMH DH41CM GU 824316

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD / ARim or

Tyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or _____

Front R/Bal. 8 mm Rear R/Bal. 8 mm

L/Bal. 8 mm L/Bal. 8 mm

D.O.A. 21/6/23 D.O.I. 11/7/2023

Survey held at _____

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

N/S body

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

1 When unable to get 2nd & new parts at the moment.

Date/Time, File Pass to?

: Prell. Report

Days Of Repair: _____

1)

: Final Report

Resurvey No. of Trip: _____

Survey Fee:

Date/Time, File Return to?

2)

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech Invs (\$ _____)

: Weekend (\$ _____)

Transportation

S - RS. \$ _____

F. P. M.

Others

Report Format :

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

TOTAL

金興(興)汽車私人有限公司
K. KIM HIN AUTO PTE LTD
 160 Sin Ming Drive #02-18/19/20
 Sin Ming AutoCity
 Singapore 575722
 Tel: 6452 7018 (5 Lines) Fax: 6458 3895

No. : 33004

Your Reference : MOMVP000003956-03-000
 Accident Date : 21-Jun-2023

Date : 23-Jun-2023

Our Ref : 023338 / SANDRA

PAGE : 1

GREAT AMERICAN INSURANCE COMPANY
 3 TEMASEK AVE #16-01
 CENTENNIAL TOWER
 Singapore 039190

*Not Authorized
 Purvey BQ claim*

Ex TBA 7 days

ESTIMATED COST OF REPAIR FOR HYUNDAI ELANTRA 1.6 (2015) SKV4908J

1 pc rear bumper			CM 250.00 c ✓
1 pc LH rear bumper side retainer			na 20.00 c ✓
10 pcs rear bumper clips	@ S\$ 1.80		na 18.00 c ✓
1 pc LH rear bumper reflector			na 36.00 c X
1 pc LH rear bumper mudflap			wt 38.00 c ✓
1 pc LH rear fender			na 630.00 c ✓
1 pc LH rear fender inner shield			sm 35.00 c X
10 pcs LH rear fender inner shield clips	@ S\$ 1.80		na 18.00 c X
1 pc LH taillamp			Bo 190.00 c ✓
1 pc LH taillamp clips			na 5.00 c ✓
1 pc bootlid logo			na 30.00 c X
1 pc bootlid "ELANTRA" emblem			na 38.00 c X
1 pc bootlid "GLS" emblem			na 26.00 c X
1 pc fuel lid cover			na 38.00 c X
1 pc LH rear door			Bo 520.00 c ✓
1 pc LH rear door black sticker-No.1			na 24.00 c ✓
1 pc LH rear door black sticker-No.2			na 24.00 c ✓
1 pc LH rear door black sticker-No.3			na 24.00 c ✓
1 pc LH rear door lock			na 130.00 c X
1 pc LH rear door outer handle			sm 60.00 c X
1 pc LH frt door			na 630.00 c X
1 pc LH frt door black sticker No.1			na 24.00 c X
1 pc LH frt door black sticker No.2			na 24.00 c X

any key to continue...

金興(興)汽車私人有限公司

K. KIM HIN AUTO PTE LTD

160 Sin Ming Drive #02-18/19/20

Sin Ming AutoCity

Singapore 575722

Tel: 6452 7018 (5 Lines) Fax: 6458 3895

Your Reference : MOMVP000003956-03-000
Our Ref : 023338

Page : 2

No. : 33004

- 1 pc LH frt door outer handle
- 1 pc LH frt door outer handle base
- 1 pc LH frt door weatherstrip
- 1 pc LH wing mirror
- 1 pc LH wing mirror cover
- 1 pc LH wing mirror signal
- 1 pc LH rear wheel bearing

<i>sn</i>	60.00	c	X
<i>sn</i>	150.00	c	X
<i>sn</i>	75.00	c	X
<i>sn</i>	230.00	c	X
<i>sn</i>	100.00	c	X
<i>sn</i>	70.00	c	X
<i>sn</i>	160.00	c	X

3,677.00

Add 10% : 367.70

4,044.70

- 1 pc rear windscreen glass sealant
- 1 pc rear windscreen glass damping seal
- 1 pc LH rear rim
- 1 pc LH rear tyre

<i>sn</i>	40.00	sn	✓
<i>sn</i>	20.00	sn	✓
<i>sn</i>	580.00	sn	✓
<i>sn</i>	380.00	sn	X

To remove, cut out damaged parts, panel beating, welding, align, refix and to renew affected parts.

800
1,000.00

To focus taillamps. To check rear wiring and lighting operation.

50.00 *200*

To remove and refit rear windscreen glass and conduct water leak test

120.00 ✓

To remove and refit rear upholstery trimming, roof lining, seats, speaker board in order to facilitate repairing works

120.00 *1000*

200.00 *600*

To remove door's fittings

To dismantle and check rear under-carriage. To replace affected portions.

sn 120.00 X

Con't Page 3 ...

金興(興)汽車私人有限公司
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Your Reference : MOMVP000003956-03-000
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Page : 3
No. : 33004

To conduct rear wheel alignment test.

To putty and respray on affected portions.

601
100.00
800
1,400.00

Total : S\$ 8,174.70

Singapore Dollars EIGHT THOUSAND ONE HUNDRED SEVENTY FOUR AND CENTS SEVENTY Only

Note: Amount quoted above is subject to prevailing GST at time of tax invoice.

- 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 approved and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

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 willful 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	21/06/2023 20:39 (SGT)
Reported by	Actual Driver
Date of Accident	21/06/2023 16:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ANG MO KIO AVE 3 JUNCTION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV4908J
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	NG CHUAN WI
NRIC No	SXXXX220C
Email Address	CHUANWI@GMAIL.COM
Mobile Phone No	(Phone) +65-98590823
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Elantra
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1591

INSURANCE COMPANY

Name of Insurance Company	Great American Insurance Company
Policy Number / Cover Note Number	MOMVP000003956-03-000

DRIVER

Name of Driver	NG SONG LONG
NRIC No	SXXXX043D
Date Of Birth	25/02/1945
Occupation	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 truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to revoke 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

[Signature]

Policyholder's Signature / Date & Time

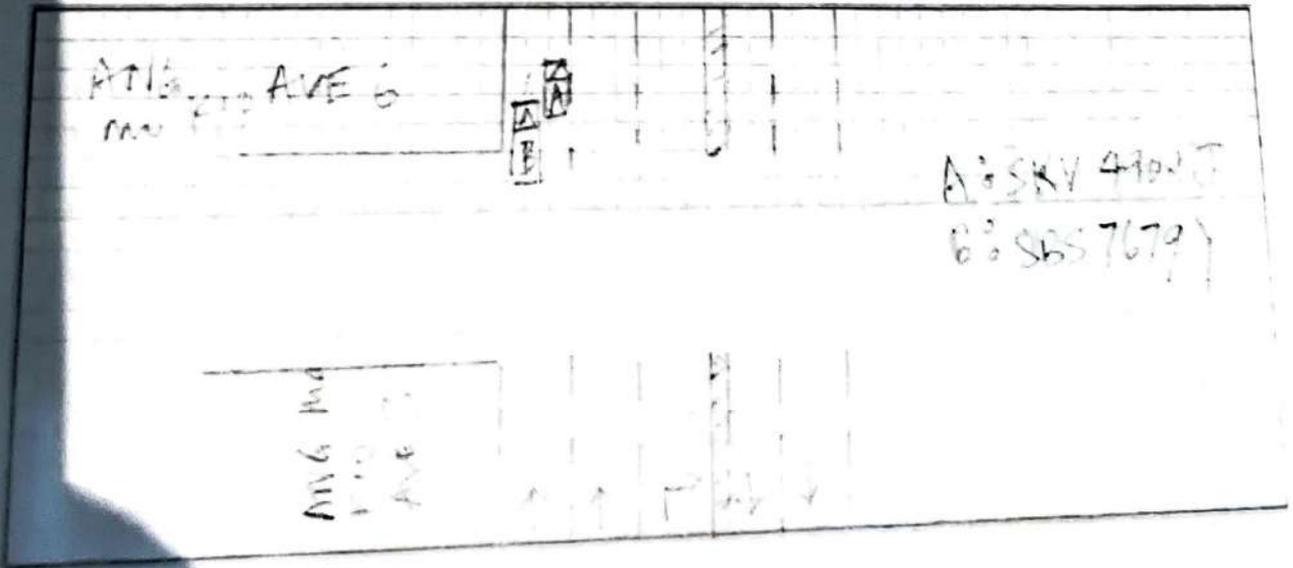
[Signature]

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



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	220C
Vehicle Details	
Vehicle No.:	SKV4908J
Vehicle to be Exported:	Yes
Intended Deregistration Date:	21 Jun 2023
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA 1.6 AT ABS D/AB 2WD 4DR
Primary Colour:	Silver
Manufacturing Year:	2015
Engine No.:	G4FGFU024184
Chassis No.:	KMHDH41CMGU624316
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$12,806.00
Original Registration Date:	21 Sep 2015
First Registration Date:	21 Sep 2015
Transfer Count:	0
Actual ARF Paid:	\$12,806.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Sep 2025
PARF Rebate Amount:	\$7,683.00
Intended COE Rebate Details	
COE Expiry Date:	20 Sep 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$57,089.00
COE Rebate Amount:	\$12,839.00
Total Rebate Amount:	\$20,522.00

The information contained herein is correct as at 21 Jun 2023

OK