

ASS. REC. BY:

REF:

CIP / 230073951kg

C

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 Rpt:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No:

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

Truck / Trailer or

Make:

Colour

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Rear

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

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

Date/Time, File Pass to?

☐

: Prel. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

S - RS. SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech Invs (\$)

☐

: Weekend (\$)

Report Format:

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

TP

3100



## 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	18/07/2023 17:29 (SGT)
Reported by	Actual Driver
Date of Accident	17/07/2023 14:00 (SGT)
Exact Location of Accident	Circuit Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN7765P
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KINETIC HOLDINGS PTE LTD
Company Reg No	201618392N
Email Address	support@kinetic-alliance.com
Mobile Phone No	(Phone) +65-97522779
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Axio
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1500

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNA00012202303

#### DRIVER

Name of Driver	CHAN HAN MENG
NRIC No	S7563199E
Date Of Birth	28/08/1975
Occupation	Outdoor



Date Of Driving Pass .....	20/03/2007
Driving experience .....	16 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90667483
Alt. Phone Number .....	-
Email Address .....	support@kinetic-alliance.com
Address .....	BLK 33 MARINE CRESCENT #16-103
Address complement .....	-
Postcode .....	440033
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Authorised driver
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident .....	Collision - Head to Rear
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### PASSENGER 1

Name .....	UNKNOWN
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Bukit Merah West Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18003779999
Alt. Police Station Phone No .....	(Fax) +65-63773923
Police Station Address .....	500 Bukit Merah View #01-01 Singapore 159682
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

Please refer to the police report.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	The video is with the workshop, Thiam Heng Huat Pte Ltd.

#### DETAILS OF OTHER VEHICLE PROPERTY 1



**SKETCH PLAN**

**IMPORTANT NOTICE**

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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 be 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 insurers 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 purposes 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 lawyers/law firms) which may be sited outside of Singapore for one or more of the above Purposes.



18-07-23

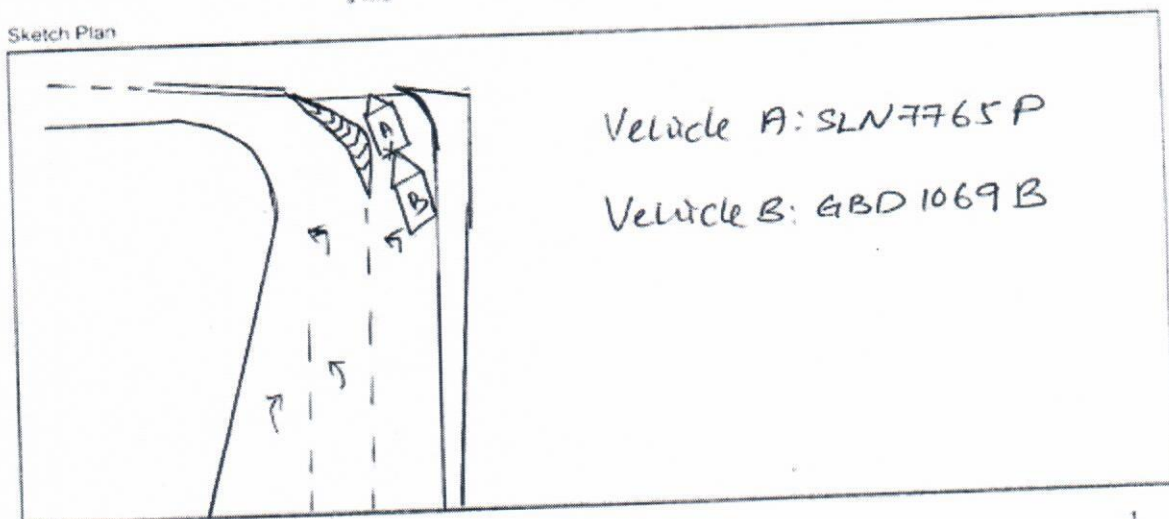
*[Signature]*

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/ID card) **BOH JIT HOON**

**Sketch Plan**



Vehicle A: SLN7765P

Vehicle B: GBD1069B



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	392N
Vehicle Details	
Vehicle No.:	SLN7765P
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Jul 2023
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA AXIO 1.5X A
Primary Colour:	Brown
Manufacturing Year:	2016
Engine No.:	2NR8644625
Chassis No.:	NRE1610019492
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$16,823.00
Original Registration Date:	17 May 2017
First Registration Date:	17 May 2017
Transfer Count:	1
Actual ARF Paid:	\$6,823.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 May 2027
PARF Rebate Amount:	\$4,434.00
Intended COE Rebate Details	
COE Expiry Date:	16 May 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$51,106.00
COE Rebate Amount:	\$19,540.00
<b>Total Rebate Amount:</b>	<b>\$23,974.00</b>

The information contained herein is correct as at 19 Jul 2023

OK



**Thiam Heng Huat Pte Ltd**

176 Sin Ming Drive #05-14 Sin Ming Autocare Singapore 575721

Mobile: 82636295 Email: thiamhenghuat@gmail.com

Make/Model: TOYOTA AXIO

Engine/Chassis No.: NRE1610019492

Date of accident: 17.07.23

Damaged area: N/S Rear

Date: 21/07/2023

Claim Type: TP

VRN: SLN7765P

*NOT Authorized*  
*11Bm & 3100h*  
*Heavy After Paint 4 days*

**List items**

S/N	Parts description	QTY	UNIT PRICE	AMOUNT
1	Bootlid <i>909.50</i>	1	\$ 1,213.00	\$ 1,213.00
2	Bootlid inner trim	1	\$ 221.00	\$ 221.00
3	Bootlid hinge	2	\$ 67.00	\$ 134.00
4	Bootlid lock	1	\$ 259.00	\$ 259.00
5	Bootlid lock striker	1	\$ 65.00	\$ 65.00
6	Bootlid key cylinder	1	\$ 194.00	\$ 194.00
7	Bootlid release cable	1	\$ 53.00	\$ 53.00
8	Bootlid weatherstrip	1	\$ 185.00	\$ 185.00
9	Licence plate lamp	2	\$ 132.00	\$ 264.00
10	Bootlid chrome garnish	1	\$ 177.00	\$ 177.00
11	Bootlid hinge garnish	2	\$ 49.00	\$ 98.00
12	Bootlid "TOYOTA" logo	1	\$ 61.00	\$ 61.00
13	Bootlid "COROLLA" emblem	1	\$ 47.00	\$ 47.00
14	Bootlid "AXIO" emblem	1	\$ 42.00	\$ 42.00
15	End panel	1	\$ 532.00	\$ 532.00
16	End panel top garnish	1	\$ 224.00	\$ 224.00
17	Rear bumper <i>565.70</i>	1	\$ 788.00	\$ 788.00
18	Rear bumper side retainer <i>N/S 2</i>	2	\$ 67.00	\$ 134.00
19	Rear bumper inner support bracket	2	\$ 176.00	\$ 352.00
20	Rear bumper sponge	1	\$ 288.00	\$ 288.00
21	Taillamp n/s	1	\$ 489.00	\$ 489.00
22	Taillamp sponge seal n/s	1	\$ 8.00	\$ 8.00
23	Taillamp lower panel n/s	1	\$ 247.00	\$ 247.00
24	Taillamp lower bracket n/s	1	\$ 33.00	\$ 33.00
25	Rear fender n/s	1	\$ 898.00	\$ 898.00
26	Rear fender inner trim n/s	1	\$ 255.00	\$ 255.00
27	Rear fender cowling n/s	1	\$ 174.00	\$ 174.00
28	Rear fender air duct n/s	1	\$ 87.00	\$ 87.00
29	Rear windscreen glass moulding	1	\$ 177.00	\$ 177.00
30	Rear bumper splash guard n/s	1	\$ 87.00	\$ 87.00
31	Rear bumper reflector n/s <i>85.10</i>	1	\$ 166.00	\$ 166.00
32	Rear bumper top bracket	2	\$ 62.00	\$ 124.00
				<b>\$ 8,076.00</b>
List discount				25.00%
Total				<b>\$ 6,057.00</b>

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:

# Repair Estimate

Special nett items				
No.	Parts description	QTY	UNIT PRICE	AMOUNT
1	Rear licence plate & frame <i>Sen</i>	1	\$ 55.00	\$ 55.00
2	Reverse camera <i>Sen</i>	1	\$ 450.00	\$ 450.00
3	Reverse sensor <i>1 hiey</i>	1	\$ 280.00	\$ 280.00
4	Bootlid inner trim clips <i>nn</i>	10	\$ 5.50	\$ 55.00
5	Rear bumper clips <i>nn</i>	12	\$ 5.50	\$ 66.00
6	Taillamp clips <i>nn</i>	6	\$ 5.50	\$ 33.00
7	Bootlid lamp clips <i>nn</i>	6	\$ 5.50	\$ 33.00
8	End panel sealant <i>nn</i>	1	\$ 100.00	\$ 100.00
9	End panel top garnish clips <i>nn</i>	6	\$ 5.50	\$ 33.00
10	Rear fender cowling clips n/s <i>nn</i>	6	\$ 5.50	\$ 33.00
11	Rear windscreen glass sealant <i>nn</i>	1	\$ 100.00	\$ 100.00
12	Rear fender inner trim clips n/s <i>nn</i>	8	\$ 5.50	\$ 44.00
13	Sundries <i>nn</i>	1	\$ 50.00	\$ 50.00
Total				\$ 1,332.00

Labour			
No.	Description	Work unit	Amount
1	To dismantle / renew accident damaged portion. To panel beat, reshape, straighten, orientate and align repair / replacement parts.	7	\$ 1,400.00
2	To disconnect rear wire harness of electrical components to facilitate repairs, reconnect and check functions including taillamp lightings.	0.25	\$ 50.00
3	To remove, refit bootlid components and replace bootlid, check and re-adjust close gap, alignment and water seepage.	0.5	\$ 100.00
4	Supply spray paint material and necessary items to respray affected area / panel.	5	\$ 1,000.00
5	To remove and refit rear windscreen to facilitate repair work.	0.75	\$ <i>nn</i> 150.00
6	To rust proof all affected portions after repair.	0.5	\$ 100.00
Total labour			\$ 2,800.00

Estimate Grand Total	\$ 10,189.00
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