

(08/11/13) wef

ASS. REC. BY: Jan

REF:

CS/SMP 23007430/RVY3

0240

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SMM 6249Mat Workshop m/s MOTOR (MAYC)of LEWIS KEE RDInsured: SHD 6228E SMP

Policy No.

Claims No. TAX/07/23/2060

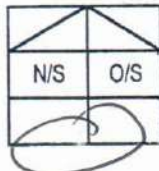
Sum Insured:

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:

113K

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SMM 6249M

Yr Regn:

2019 / July

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

Truck / Trailer or

Make:

SUBARU FORESTER 2.0I-S Eyes.c.c 1998

Colour:

BLACK

A/C: Insured / Std / NI / NA

Sp. Reading

67140

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

J FISK 7KL5K900-7493

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

225/55R18

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

21/07/23

D.O.I.

24/07/23

Survey held at

MOTOR (MAYC)

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

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

Date / Time

Action / Instruction

REPAIR LIMIT - 18K

2/8/23

Final fig \$3242.70 confirmed by email (Red 5509.70, 62%)

Date/Time, File Pass to?

☐

: Prel. Report

☐

: Final Report

Date/Time, File Return to?

2) 4/8/23-typist

Days Of Repair: 3

Resurvey No. of Trip:

Survey Fee:

Transportation:

) S + RS SI

) Photos

) Others

TOTAL

Report Format :

TP

Lump Sum / I.B.I.: (\$ 3242.70)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

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	20/07/2023 15:20 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	20/07/2023 08:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Seletar west link going to cte
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM6249M
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	Wong Wai Cheng
NRIC No	SXXXX024D
Email Address	waicheng@gmail.com
Mobile Phone No	(Phone) +65-82889015
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Forester
Variant	-
Exact purpose for which vehicle was being used at time of accident	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	2000

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1900117055-04

DRIVER

Name of Driver	Wong Wai Cheng
NRIC No	SXXXX024D
Date Of Birth	08/03/1986
Occupation	Indoor

Date Of Driving Pass	14/05/2013
Driving experience	10 YEARS AND 2 MONTHS
Gender	Female
Mobile Number	(Phone) +65-82889015
Alt. Phone Number	-
Email Address	waicheng@gmail.com
Address	Blk 335B Yishun St 31 #15-61
Address complement	-
Postcode	762335
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Cloudy
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD6228E
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	Brown
Vehicle Category	Taxi
Name of Driver	-
Contact Number	(Phone) +65-81339368

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 Authorized 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 reassess 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 based outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature (and Date & Time)

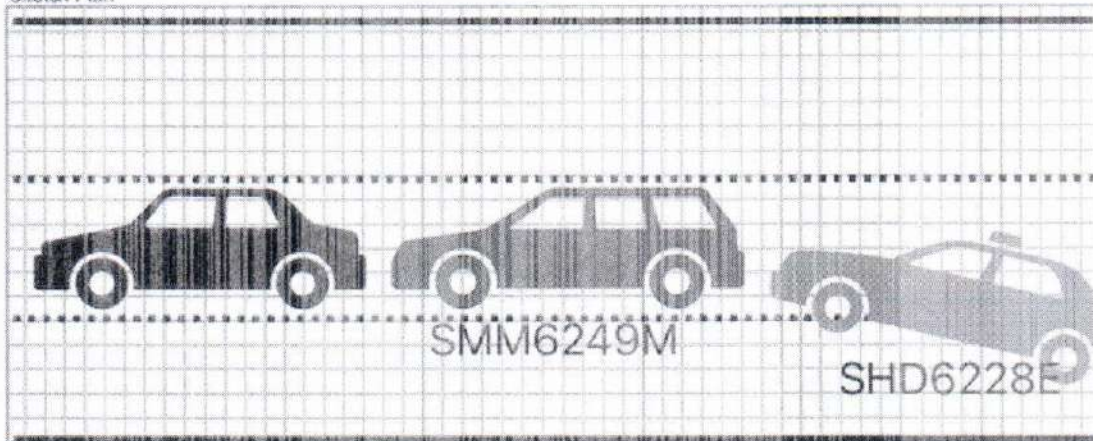
[Signature]

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

Witnessing by Reporting Centre Personnel

[Signature] 

Sketch Plan




Describe Circumstance of the Accident

This morning when going to work, travelling along Seletar West Link going up onto the CTE, there is long queue of cars. I was moving along the traffic and when the car in front stop, I stopped as well. Then the taxi, SHD6228E, who filter into my lane, hit onto my car left rear.

Declaration

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


Policyholder's Signature / Date & Time


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

 
Witnessed by Reporting Centre Personnel

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

ESTIMATE : ACCIDENT/BODY REPAIRS
WORKSHOP : LENG KEE
CONTACT NO :
REFERENCE : INS/IC/CHI/0190/2023
DATE : 20-JUL-2023

MS FIRST CAPITAL INSURANCE LIMITED
36 ROBINSON ROAD
#16-01 CITY HOUSE
S(068877)
TEL : 62222311 / 65063848
FAX : 62223547 / 65073849

OWNER'S NAME : WONG WAI CHENG (HUANG HUIZHEN)
ADDRESS : BLK 335B YISHUN STREET 31
#15-61
S(762335)
TELEPHONE NO : 8288 9015

TYPE OF CLAIM : THIRD PARTY CLAIM
POLICY NO : 1900117055-04 AIG
VEHICLE NO : SMM6249M
MODEL CODE : SK7AKFL
MODEL/YEAR : FORESTER 2.0I-S EYESIGHT AWD CVT
ENGINE NO : FB20YF56809
CHASSIS NO : JF1SK7KL5KG007493
MILEAGE : 1 KM
DATE IN : 20/07/2023
LIABILITY : 0.00
EXCESS CLAUSE : 0.00
ESTIMATE BY : DENNIS LEONG JIA HUI
ACCIDENT DATE : 20/07/2023

Print Date : 20/07/2023
Print Time : 18:43:28

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SMM6249M

S/NO	JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1	TPCLAIM	CONDUCT BODYWORK REPAIR (THIRD PARTY CLAIM) AGAINST STRIDES TAXI-SHD6228E		
2	ZZ/001	DOA:20/JUL/2023 TIME:0815 HRS LOC:SELETAR WEST LINK GOING TO CTE		
3	ZZ/002	REPLACE REAR BUMPER,BUMPER BEAM,REPAIR END PANEL AND REPAIR SPARE TYRE FLOOR	3500.00	6000 900
4	ZZ/003	RESPRAY REAR BUMPER,BUMPER BEAM,END PANEL AND SPARE TYRE FLOOR	3000.00	520 1040
5	ZZ/004	TO SUPPLY & INSTALL REVERSE SENSOR - 2 EYES	300.00	80 /
6	ZZ/005	CALIBRATION OF SRVD	350.00	Xm
7	ZZ/006	FAULT DIAGNOSTIC (RESET)	280.00	/ /
8	ZZ/007	SUNDRIES	100.00	20 /
TOTAL LABOUR CHARGES			7530.00	

MOTORIMAGE ENTERPRISES PTE. LTD.
25 HENG KEE ROAD
SINGAPORE 159097

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SMM6249M

		DAMAGED PARTS & PRICES				
S/NO	PARTS DESCRIPTION	PARTS NUMBER	NETT	LIST	S/NETT	S/LIST REMARKS
1	BUMPER FACE R HG <i>da /</i>	57704SJ310			610.50 ✓	
2	BRKT SD R RH <i>? X m</i>	57707SJ320			14.80	
3	BRKT SD R LH <i>? X m</i>	57707SJ330			14.80	
4	BEAM COMPL R EU <i>? X m</i>	57711SJ0309P			259.00	
5	COVER HOOK R <i>? X m</i>	57731SJ300			11.10	
6	BUMPER GUARD R RGD <i>sup /</i>	57734SJ310			222.00 ✓	
7	CLIP BMPR *11PCS <i>m /</i>	909140007			26.40 ✓	
8	CLIP * 2PCS <i>m /</i>	909140062			6.00 ✓	
SUB TOTAL			0.00	0.00	1164.60	0.00
LESS DISCOUNT ()			0.00	0.00	0.00	0.00
GRAND TOTAL			0.00	0.00	1164.60	0.00
OVERALL TOTAL			1164.60			

LEGEND: REMARKS(OK) = APPROVED, REMARKS(X) = NOT APPROVED

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

SUMMARY OF ESTIMATE FOR VEHICLE REGN NO SMM6249M

TOTAL LABOUR CHARGES	7530.00
TOTAL SPARE PARTS CHARGES	1164.60
GRAND TOTAL	8694.60 *

* All charges do2 not include GST.

SURVEYOR'S PARTICULARS

NAME	: Rasu - Hp 90010068
SURVEYED DATE	: 24/07/23
AUTHORIZED DATE	:
EXCESS CLAUSE	: 0.00 3 days
LIABILITY	: 0.00
REMARKS	: Resy before paint

PLS NOTE : This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges & spare parts in the process of repairs, we shall inform you accordingly.

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:

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

FINALIZED : ACCIDENT/BODY REPAIRS
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ENGINE NO : FB20YF56809
CHASSIS NO : JF1SK7KL5KG007493
MILEAGE : 1 KM
DATE IN : 20/07/2023
LIABILITY : 0.00
EXCESS CLAUSE : 0.00
ESTIMATE BY : DENNIS LEONG JIA HUI
ACCIDENT DATE : 20/07/2023

Print Date : 28/07/2023
Print Time : 08:51:52

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SMM6249M

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5	ZZ/004	TO SUPPLY & INSTALL REVERSE SENSOR - 2 EYES	300.00	80.00
6	ZZ/005	CALIBRATION OF SRVD	350.00	.00
7	ZZ/006	FAULT DIAGNOSTIC (RESET)	280.00	280.00
8	ZZ/007	SUNDRIES	100.00	20.00
		TOTAL LABOUR CHARGES	7530.00	2320.00

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			NETT	LIST	S/NETT		
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2	BRKT SD R RH	57707SJ320			14.80		X
3	BRKT SD R LH	57707SJ330			14.80		X
4	BEAM COMPL R EU	57711SJ0309P			259.00		X
5	COVER HOOK R	57731SJ300			11.10		X
6	BUMPER GUARD R RGD	57734SJ310			222.00		OK
7	FOG LAMP ASSY R RLH <i>cm</i>	84551SJ010			57.80		OK (A)
8	CLIP BMPR *11PCS	909140007			26.40		OK
9	CLIP * 2PCS	909140062			6.00		OK
SUB TOTAL			0.00	0.00	922.70		0.00
LESS DISCOUNT ()			0.00	0.00	0.00		0.00
GRAND TOTAL			0.00	0.00	922.70		0.00
OVERALL TOTAL			922.70				

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SINGAPORE 159097

SUMMARY OF OVERALL CHARGES FOR VEHICLE REGN NO SMM6249M

NETT ITEM 0.00
LESS 20 % 0.00
NETT AMOUNT 0.00

LIST ITEM 0.00
LESS 50 % 0.00
LIST AMOUNT 0.00

SPECIAL NETT AMOUNT 922.70

S/LIST ITEM 0.00
LESS 30 % 0.00
S/LIST AMOUNT 0.00

TOTAL LABOUR CHARGES 2320.00
TOTAL SPARE PARTS CHARGES 922.70

TOTAL CHARGES 3242.70
ADD 8 % GST 259.42

GRAND TOTAL 3502.12
