

ASS. REC. BY:

REF:

AIS/ 23007572/Kn

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

Arthur &amp; Ezz

of

Insured:

Policy No.

Claims No.

Sum Insured:

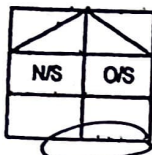
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

856k

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

6-9 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SKX101K

Yr Regn:

11, 15

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

Truck / Trailer or

Make:

Toy Harrie

C.C.

1986

Colour:

MOBIAK

A/C:

Insured / Std / NI / NA

Sp. Reading:

162484

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

ZSU60 - 0063063

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / SKRM / STD A/Rim or

Tyre Size:

F:

R:

255/40R20

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

TOYO / YOKO or

Front

Rear

R/Bal.

8

mm

R/Bal.

8

mm

L/Bal.

8

mm

L/Bal.

8

mm

D.O.A.

21/7/23

D.O.I.

26/7/2023

Survey held at

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

Rear O/S

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

Date / Time

Action / Instruction

Date/Time, File Pass to?



: Prel. Report

1)



: Final Report

Date/Time, File Return to?

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.I. (\$

Estimated Cost:

Date:

Weekend (\$

1) Office

Not Notwithstanding  
 1/1 Sep &  
 Running After Paint  
 6-8 days

# Authorize Workshop Pte Ltd

160 Sin Ming Drive, (Sin Ming Autocity), #03-19, Singapore 575722

Tel: 6456 0226 Fax: 6458 4500

Vehicle number: SKX101K

Vehicle Made & Model: TOYOTA HARRIER

Qty	List Items	Amount \$
1	Rear bumper	1,310.63 ✓
1	Rear bumper difusser	499.66 ✓
2	Rear bumper reflectors - L/R @ 112.43	224.86
1	Rear bumper sponge	241.53 ?
2	Rear bumper side retainers - L/R @ 110.25	220.50 X
2	Rear bumper top nuts - L/R @ 41.10	82.20 X
1	Rear end panel	1,006.41 ✓
1	Rear end panel garnish	538.52 ?
1	Rear exhaust silencer	821.66 ✓
2	Rear exhaust mountings @ 28.60	57.20 ✓
1	Rear floor top board	781.90 ?
1	Rear floor tools board - CTR	496.55 ?
2	Rear floor tools boards - L/R @ 391.60	783.20
2	Rear floor side pockets - L/R @ 366.50	733.00
1	Rear floor compartment panel	991.65 ?
1	Rear fender - RH	1,257.60 X
2	Rear fender inner trim boards - L/R @ 1013.59	2,027.18
2	Rear fender inner shields - L/R @ 114.75	229.50 X
1	Rear spare wheel retainer lock	68.85 ?
1	Rear spare wheel sponge	155.90 ?
1	Rear smart keyless antenna	199.85 X
1	Rear shock absorber - RH	481.60 ?
1	Rear lower arm - RH	760.90 ✓
1	Tailgate	2,126.80 X
1	Tailgate emblem "HARRIER"	89.95 X
1	Tailgate inner lock	954.93 X
1	Tailgate w/strip	441.31 X
1	Taillamp - RH	581.72 X
Sub-total		18,165.56
Less 25%		4,541.39
Total List		13,624.17

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:



Vehicle number: SKX101K

Vehicle Made & Model: TOYOTA HARRIER

Special Nett Items

- 1 set Tailgate glass sealant
- 1 set Rear bumper clip
- 1 Rear bumper top chrome plate
- 1 set Rear reverse sensors - 4Pcs
- 1 Rear tyre - RH
- 1 set Rear floor panel sound proofing

nn	80.00	X
nn	50.00	✓
nn	350.00	1200
sn	420.00	X
	400.00	?
	180.00	?

**Total Special Nett** 1,480.00

Labour charges

- To check rear electrical wiring
- To remove, refix rear interior trims to assist repair
- To remove, refix rear undercarriage
- To check wheel alignment
- To respray undercoating
- To remove, refix rear reverse sensor
- To remove, refix rear exhaust system
- To remove, refix tailgate glass
- To respray painting and etc
- Panel beating, cut, weld remove & replacing above parts

50.00	200
150.00	1000
200.00	1400
120.00	600
150.00	?
80.00	600
120.00	800
nn 180.00	X
1,200.00	6000
1,800.00	?

**Total Labour** 4,050.00

**ESTIMATE PARTS AND LABOUR GRAND TOTAL \$ 19,154.17**

## 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	21/07/2023 17:56 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	21/07/2023 14:00 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	Before Bukit Timah exit
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX101K
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SUZANNA NICOLETTE SUAN JINN WEE
NRIC No	S7633758F
Email Address	suzannawee@gmail.com
Mobile Phone No	(Phone) +65-82923060
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Harrier
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	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01019470

#### DRIVER

Name of Driver	SUZANNA NICOLETTE SUAN JINN WEE
NRIC No	S7633758F
Date Of Birth	01/10/1976
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 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 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

21 Jul 2023

Sketch Plan

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

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

BOH JI T HOON

Sketch Plan

CTE → Orchard Direction

A) SKX 101K  
B) SLK 8444A