ASS. REC. BY: REF: SMR	· >
Renneth	
From: ASS	SIGNMENT
Estimated Cost: Date:	Veh No: SUP XIRU
OD VIP / WS / TP RES / OD RES / EVA / INV / MV To inspect Vehicle No:	Veh No: SUP SIRUL Yr Regn: OG 1 77 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover / Truck / Trailer or
To Inspect Vehicle No:	Truck / Trailer or
at Workshop m/s	Make: 11 - A , West
of Joan Say Sear	Colour /h. /6/20 A/C: Insurable statement
Insured: 2256	2 St Reading // Z // a
Policy No.	Eng/No:
Claims No.	CNO: /AMIJJ3813M.JU 490871
Sum Insured:	Gen. Cohd: Sood / Fair / Poor / Burnt
(Cflent's Record)	Steering: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Brake: Ingreder / Jammed / Leaked / Burnt or
	Modi: NII / S/RIm / STD A/RIm or
(Policy Condition)	Tyre Size: F:
Pemark: The veh had commenced to	R: 225/60R17
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM! /
	TOYO IXOKO or
Bal. or Market Value: 655/K	Econi Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 9 mm · R/Bal. 9 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 9 mm L/Bal. 9 mm
Est. Repairs: 9-5 days Res.: Yes or No	D.O.A. 13/8/24 D.O.I. 15/8/2024
Lum Sum: 1-B./ % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear O/S N/S U/C Rooftop or
- Vehicle: IN / OUT	Old I Ald I UIC I Koollop of
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
- Wisp unche to locate Ind part	, par by part
R	
11.	The second contract of
	The second secon
	The property of the contract o
Onio/Time, File Pass to? Prell. Report Da	ys Of Repair:
	survey No. of Trip: Survey Fee:
Duta/Filme, File Return to?	
,	Transportation
Add Fee:	: Site Insp (\$)s - Rssi
	: Interview (\$), Fire the
eport Format :	
ump Sum / I.B.I: (\$	Weekend (\$)
	16141
	/ • / = h 1



Sin Ming Autocity, No. 160 Sin Ming Drive, #05-13, Singapore 575722.

Tel: 6453 7511 Fax: 6453 8046 Email: sitti1@singnet.com.sg Regn. No. 05396600K

TAN CHENG LIAN APT BLK 426 BEDOK NORTH ROAD 11-503 SINGAPORE 460426 Not Nothairs
Puhoray Bapains
4-5day

Dear sir

Estimate cost of repair to vehicle no. SLP6184L

То	support
----	---------

- apport	
 Tail gate 	1 650 00 7
Tail gate rubber	1,650.00 7 235.00 X
Tail gate lock	250.00 (
4. Talk gate damper	280.00 X
Tail gate logo	
6. Tail gate badge Tucson	A 10 10 10 10 10 10 10 10 10 10 10 10 10
7. Tail gate lower garish	05.00
8. Rear w/s moulding	_00.00
9. Rear bumper top	158.00 7 By 500.00potts
10. Rear bumper bottom	Jou.bulletts —
11. Rear bumper retainer x2	350.00netts —
12. Rear bumper sensor x4′ ?	1407 632 00 44
	032.00
13. Rear bumper reflector x2	M/11m 220.00 H
14. Rear bumper reinforcement	CM 350.00 _
15. Rear bumper bracket x2	120.00
16. Rear panel	750.00 7
17. Rear exhaust box	5 1,350.00 —
Rear exhaust centre pipe	M 1,800.00 —
19. Rear end cater converter	2,985.00 7
Labour charges 20	7
Towing	80.00
Number plate n holder	Nd 80.00 4512
Panel beating	980.00 7
10	
Spray painting	
To remove and refit w/s ,cushion	250.00 7
Total	14,398.00
	14/378.0
	•

Your faithfully

Dor

ALBERT POON

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

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

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 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 Industriant 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

T. 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 First Submission Reported by **Date of Accident Exact Location of Accident** Additional Location Information Country/State of Loss

14/08/2024 14:47 (SGT) Both Policyholder and Actual Driver 13/08/2024 10:50 (SGT) Singapore ECP TOWARDS CITY BEFORE BEDOK EXIT Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLP6184L

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No Alternative Phone No.

TAN CHENG LIAN SXXXX225C tchenglian@gmail.com (Phone) +65-98522919

VEHICLE PARTICULARS

Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to vour vehicle? Vehicle Category **Transmission**

Hyundai Tucson **HYUNDAI TUCSON 2.0**

No - Claiming third party Private car

Auto 2000

Private use

Effective Date/Time of Ownership

INSURANCE COMPANY

First Regisration Date

Name of Insurance Company Policy Number / Cover Note Number Income Insurance Limited 5092000288-07

DRIVER

CC

Vehicle Fuel

Chassis no







Police Station Of Origin: Bedok NPP

15 Bedok South Road #01-117 SINGAPORE

Tel No: 1800-2419999

2 of 3

Report No. T/20240814/2003

No - (-	n Involved	Collins of the second				
Any Pedestrian Involved: No No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
A THE RESIDENCE OF THE PERSON	A TELL CONTROL OF THE PROPERTY OF THE PARTY		a transport transport	Coman	01033	
Name	tan tony			ID No.		S0036716H
Related Vehicle	NIL			Contact No.		98756009
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Disc			-	NIL	
	Date		Degree of	Butte Biberrai go Time		
Driver	ESTABLISHED AND A SERVICE AND	Secretary Services				NAME OF THE PARTY
Name	TAN CHENG LIAN		ID No.		S7325225C	
Related Vehicle	NIL			Contact No.		98522919
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc				
No. of Days granted Medical Leave NIL			Degree o	Degree of NIL		

CONTINUATION OF REPORT

Brief Details.

On 13/08/24 at about 2250hrs i was traveling along ECP towards city before Bedok exit, I was driving on the 1st lane and the 2 cars Infront of me suddenly jam break, and to avoid the accident, i jam break and horned then after I felt a rear bump on my car, and i went down to have a check, and a black police car stopped by and have a check on us. After a while Traffic Police and Ambulance came to the scene. Ambulance conveys a passenger to the hospital, and Traffic Police took my SD card.