	S/TP24100210/Knh3 (SNK 8113G) ASSIGNMENT
From: Date:	
Estimated Cost:	The state of the s
OD TP WS / TP RES / OD RES / EVA / INV / MV	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or
To Inspect Vehicle No:	1 (+)
AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON OF TH	Make: luy Raize c.c 1196
	Colour M. Red A/C: Insured / Std / NI / NA
of $J_{q_{10}}$ Insured:	
Policy No.	Eng/No:
designation of the second seco	CNO: A201A . 00028
Claims No.	Gen. Cond: @God'/ Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NII / SARIM / STD A/RIM or
	Tyre Size: F: 215/55R17
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	-
repair at the time of inspection.	THE STANFALL
Bal. or Market Value:	Front
DAC Accident Rport: Consistent? : Yes or No	Tear 7
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 7 mm R/Bal. 7 mm
st. Repairs: 05 days Res.: Yes or No	DOA 3 / 10/21
um Sum: 1. B. / % 3 Val.: Yes or No	Survey held at D.O.I. 0 116 1202
A / REV / REP. / 24 HRS	
Vehicle: IN / OUT	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
ate: Person Contacted:	- 0,0
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
	the state of the s
10/10 \$ 6742.45 Colo (red, \$528	34.7,43%)
The second secon	
Tkno, File Pass to? Prell. Report	Days Of Repair: 5
: Final Report	And the second s
Time, File Return to?	
Add Fee:	: Site Insp (\$) S-RS SI
	Intention (S
ort Format :	
	Tech Invs (\$) Others
p Sum / I.B.I: (\$	Weekend (\$

辉陽汽車有限公司

HUI YANG MOTOR PTE. LTD.

Contact Add: SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-09 Singapore 575721

Tel: 64515752 (2 Lines) . Fax: 64514658 GST & Reg No. 201629438M

05/10/2024

Owner:

MUHAMAD NAUFAL BIN NOORDIN

Rehmy B& paint
& 6742.45 5day

ESTIMATE TO REPAIR TOYOTA RAIZE - SNK8113G

lpc	front bonnet	\$ 1 885.00 \$
2pcs	front bonnet hinge @\$181.50	\$ 363.00 Å
1pc	front RH headlamp	M3cm \$ 1,650.00
1pc	front centre grille	148 481.50 ⊀
1pc	front "TOYOTA" logo	№\$ 98.50 X
1pc	front bumper	R \$ 1,150.00 —
2pcs	front bumper side retainer @\$121.50	em \$ 243.00
10pcs	front bumper clip @\$5.00	M \$ 50.00 —
1pc	front bumper grille	CM\$ 485.20
1pc	front bumper RH fog lamp	\$
1pc	front bumper RH fog lamp garnish	\$ Pel 280.50
1pc	front bumper RH side lamp	\$ → 321.20 X
1pc	front bumper RH parking sensor	nd\$ 280.50
1pc	front bumper RH parking sensor base	\$ J= 121.50 X
lpc	front bumper lower	CM 481.50 —
1pc	front bumper reinforcement	381.50
1pc	front support top panel	\$ / 381.50 X
1pc	front support RH side panel	\$ 7 321.20 <
1pc	front support RH side bar	\$\$ 181.50 \(\)
1pc	front radiator top panel	\$ 1 380.50 X
1pc	front radiator lower panel	C184 481.50
1pc	front RH horn	\$ h 121.20 X
1pc	front RH fender	Bn\$ 681.50
1pc	front RH fender protector	3n \$ 280.20 <u></u>
lpc	front RH fender inner shield	S 181.20 —
10pcs	front RH fender inner shield clip @\$5.00	sm 50.00 —
1pc	front RH fender inner bracket	\$ 121.50 X
		\$ 10,836.20
	1 050/	\$ 2,709.05
	less 25%	\$ 8,127.15
		Ø - 145€000000000000000000000000000000000000
1pc	front number plate casing	s.nett \$M 40.00 3512
1 set	paint protection film	Ne s.nett \$ 900.00 30010
		2 /
	wiring	\$ 80.00 201
	tuffkote	\$ 80.00 3 01
	spray painting	\$ 1,400.00 Fool
	labour charges	\$ 1,400.00 5501
	Total Total	\$ 12,027.15
	(2 / m) I	



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

 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 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

07/10/2024 15:08 (SGT) Date of First Submission Both Policyholder and Actual Driver Reported by 05/10/2024 07:35 (SGT) Date of Accident Singapore Exact Location of Accident Additional Location Information **PSA MARINE** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

SNK8113G Vehicle Registration Number

INSURED/POLICYHOLDER

No Is company? MUHAMAD NAUFAL BIN NOORDIN Name Of Registered Owner SXXXX910A NRIC No afal_pengache@icloud.com Email Address (Phone) +65-90279535 Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

Toyota Manufacturer RAIZE Model Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Private car Vehicle Category Transmission Auto 1200 CC Vehicle Fuel First Regisration Date Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Income Insurance Limited Name of Insurance Company 5136168025-01 Policy Number / Cover Note Number

DRIVER

Name of Driver	MUHAMAD NAUFAL BIN NOORDIN
NRIC No	SXXXX910A
Date Of Birth	05/04/1995
Occupation	Outdoor
Driving Pass Date	09/06/2016
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	8 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90279535
Alt. Phone Number	
Email Address	afal_pengache@icloud.com
Address	BLK 230A TENGAH DRIVE
Address complement	#02-461
Postcode	691230
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 on collision
Type of Accident Weather Conditions	Clear
Road Surface	
Road Surface	Dry
OTHER INFORMATION	
t lili i lili ika asaldani?	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident	No 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)	1
Has the driver been approached by unknown person(s)	<u> </u>
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	
200 07 00 00	
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	
CIRCUMSTANCES OF ACCIDENT	
REFER ATTACHED SKETCH PLANS	
ATTACHMENT(S)	
A	V
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes Yes
Was there any video captured by Car Camera?	165

DETAILS OF OTHER VEHICLE PROPERTY 1

SLT752R
Hyundai
-
*
-
Private car
MOHAMAD DAUD BIN ABU CHIK
SXXXX986C
•
*
-
-
-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MUHAMAD NAUFAL BIN NOORDIN
Gender	Male
Phone No	(Phone) +65-90279535
Address	973
Address Complement	
Post Code	•
Approximate Age Years Old	
Injuries Sustained	REFER POLICE REPORT
Injured person in which vehicle?	SNK8113G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 Authorised 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. The 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that ;

- (a) My insurer, my w orkshop 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 fall insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law yers/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
- (ii) investigating the accident and/or my claims;
- (ii) 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

104

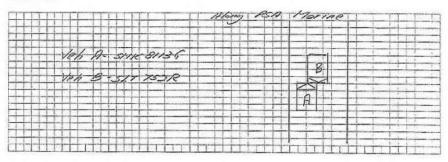
Policyholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date

Witnessed by Rep

Personnel

Sketch Plan



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Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20241007/7018

Date/Time Report Made: 07/10/2024 11:05		ade:	Vide Report No.: Station Diar			
Informan	t's Particular	3				
Name of Informant: MUHAMAD NAUFAL BIN NOORDIN		BIN NOORDIN	Address: 230A TENGAH DRIVE #02-461 SINGAPORE 691230			
ID Type / ID No.: NRIC NO / S9510910A)A	Contact No.: Home/Office:	Mobile: 90279535		
Nationalit SINGAPO	y: ORE CITIZE	N	Email: AFAL_PENGACHE@ICLOUD	сом		
Sex: Age: Date of Birth: 05/04/1995			Type of Informant: Driver			
Race: Boyanese)		Language: English	35.20		
Occupation LAUNCH	on: MASTER	The second secon	Driving Licence Information: Class: 2B,2A,2,3,3A,4	Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/10/2024 07:35	Type of Location:
Location: WEST COAST FEI Weather:	RRY ROAD	Road Surface:		
Clear Dry				
Clear				
Traffic Flow:		Traffic Control:	Traf	fic Volume:

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLT752R	Motor car		HYUNDAI	White		0
SNK8113G	Motor car	TOYOTA	RAIZE 1.2G	Red	Seriously Damaged	0

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SNK8113G	NTUC Income Insurance Co-Operative	5136168025-01	16/05/2024	15/05/2025



T/20241007/7018

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

Report No. T/20241007/7018

CONTINUATION OF REPORT

Any Pedestrian In	volved: No	180				
No. of Pedestrians	s Injured: NIL		Use of Pedestrian Crossing: NA			
Driver						
Name	MUHAMAD NAUFAL BIN NOORDIN		ID No		S9510910A	
Related Vehicle	SNK8113G (Motor car)			Conta	ect No.	90279535
Hospital/Clinic	NIL			Class Drivin Licen Expin	g	Class: 2B,2A,2,3,3A,4 Date of Expiry: NIL
Date Treatment	05/10/2024		Date Disch	narge	NIL	L
No. of Days grante	ed Medical Leave (MC)	02	Degree of	Injury	Serio	us

Brief Details.

On 05/10/2024, at about 0736, I was exiting PSA Marine in my car, vehicle A (SNK8113G). While driving towards the exit gate, I noticed a white vehicle B (SLT752R), entering my lane. I immediately slowed down and came to a full stop as vehicle B continued to approach. I honked my horn to alert the driver of vehicle B, but he did not reduce their speed. Vehicle B continued moving and collided with my front right bumper. The impact caused my head to hit the steering wheel, and I felt extreme pain on head and neck that cause me to feel dizzy and blurry vision.

The collision resulted in damage to the front right bumper of my vehicle A. I will seek medical attention due to the head and neck impact. I was given two days mc and if condition worsen i was advice to by the DR to revisit.

Vehicle B is a white hyundai and the driver is Mohamad Daud Bin Abu Chik(\$1261986C).



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



Report No. T/20241007/7018

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/10/2024 11:05
Officer in Charge Of Case: TP / AEIT / FAHKRUL RAZI BIN SUHAIME Contact No.: 65476404	Classification Of Case:
NP168	