

(08/11/13) Wef

ASS. REC. BY:

REF:

CS/CT124110608/Rgh3

864w

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

4R130TT

at Workshop m/s

R & S AUTOCUM

of

13, Pioneer skem

Insured:

CTI

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

11am

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

N/S	O/S

Bal. or Market Value:

71K

IDAC Accident Report:

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

Date / Time

Action / Instruction

REPAIR LIMIT - 58K

Veh No:

4R130TT

Yr Regn:

2020 APR

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

Truck / Trailer or

Make:

MITSUBISHI FEB 21 ER

c.c

2998

Colour

WHITE

AC:

Insured / Std / NI / NA

Sp. Reading

207364

T/Radio:

Insured / Std / NI / NA

Eng No:

C/No:

FEB 21 EA 304 25

Gen. Cond:

Good / Fair / Poor / Burnt

Steering:

In order / Jammed / Leaked / Burnt or

Brake:

In order / Jammed / Leaked / Burnt or

Modi:

Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195/85 R15

R:

d/p

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

5

mm

L/Bal.

6

mm

D.O.A.

27/11/24

D.O.I.

08/12/24

Survey held at

Pioneer skem

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

N/S Frt

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

Date/Time, File Pass to?

☐

Prel. Report

1)

☐

Final Report

Date/Time, File Return to?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS SI

Photos

Others

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Report Format :

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

TOTAL

日昇 R & S Autoclaim Pte Ltd

GST & Co Reg No. : 202245519N
 Tel : (65) 6264 7001
 Fax: (65) 6264 7002
 Email : rnsautoclaim@rnseng.com.sg
 Address : No.13 Pioneer Sector 1,
 Singapore 628424

ESTIMATE

MSIG INSURANCE (SINGAPORE) PTE LTD
 4 SHENTON WAY
 #21-01 SGX CENTRE 2
 SINGAPORE 068807
 Tel: 62209644
 Fax: 62256371
 Attn: MOTOR CLAIM DEPARTMENT

No. : ES.24110013
 Date : 27-11-2024
 Ref. : YR1307T
 Staff : SUSAN
 Terms : Progress Claim
 Job :

VEH NO : YR1307T MODEL : MITSUBISHI FEB21ER4SDEN CHASSIS NO : FEB21EA30425 DOA
 : 27/11/2024

SNo	Description	Quantity	Unit Price	Amount
	LIST PART ITEM:-			
1	ROUND MIRROR ASSY X	1	66.26	66.26
2	FRONT GRILLE ASSY X	1	1,185.57	1,185.57
3	FRONT GRILLE CLIPS X	1 set	80.00	80.00
4	FRONT GRILLE EMBLEM - LOGO X	1	82.54	82.54
5	FRONT GRILLE EMBLEM - CANTER X	1	78.81	78.81
6	HEADLAMP LH cm ✓	1	554.65	554.65
7	COMBLAMP LH ms ✓	1	223.53	223.53
8	SIGNAL LAMP LH cm ✓	1	294.64	294.64
9	HEADLAMP LOWER RUBBER LH ms ✓	1	20.00	20.00
10	CORNER PANEL LH X	1	505.14	505.14
11	CORNER PANEL CLIPS LH X	1 set	80.00	80.00
12	FRONT BUMPER bf ✓	1	1,307.51	1,307.51
13	FRONT BUMPER GARNISH LH cm ✓	1	340.62	340.62
14	FRONT BUMPER GARNISH COVER LH X	1	20.00	20.00
15	FRONT BUMPER STAY LH X	1	187.05	187.05
16	FRONT BUMPER BRACKET LH X	1	187.05	187.05
17	STEP LH X	1	367.62	367.62
18	FRONT DOOR LH repair	1	1,910.15	1,910.15
19	FRONT DOOR HINGE LH X	2	131.60	263.20
	TOTAL			7,754.34
	PARTS ITEM LESS 25%	0	0.00	0.00
	SUBTOTAL			7,754.34
	SPECIAL NETT PART ITEM :-			

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: 27/11/2024

SNo	Description	Quantity	Unit Price	Amount
1	FRONT NUMBER PLATE ✕	1	45.00	45.00
	SUBTOTAL			45.00
	LABOUR :-			
1	TO STRAIGHTEN AND PANEL BEAT ON ACCIDENT AREA, FRONT PORTION	1	1,200.00	500 1,200.00
2	TO PUTTY, RE-SPRAY PAINTING AND POLISH ON ACCIDENT AREA, FRONT PORTION	1	900.00	500 900.00
3	TO SPRAY RUST PROOFING ON AFFECTED AREA. FRONT PORTION	1	150.00	40 150.00
4	TO CHECK AND RECTIFY WIRING CONNECT AND DISCONNECT	1	150.00	40 150.00
5	TO REMOVE AND TRANSFER DOOR COMPONENT	1	280.00	X 280.00

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:

Rashid
Hs 90010068
4 days
H/S
02/12/24
Res after repair

Sum of Singapore Dollars Eleven Thousand Four Hundred Twenty Two And Cents Forty Eight Only

Amt S\$	10,479.34
9% GST	943.14
Total S\$	11,422.48

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 First Submission	28/11/2024 11:32 (SGT)
Reported by	Actual Driver
Date of Accident	27/11/2024 09:55 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Along Boon Keng Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YR1307T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TONG GUAN SEAFOOD PTE. LTD.
Company Reg No	2XXXXX564W
Email Address	tongguanseafoodsales@gmail.com
Mobile Phone No	(Phone) +65-96261333
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	CANTER FEB21ER4SDEN (CBU)
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2998
Vehicle Fuel	-
First Registration Date	-
Chassis no	FEB21EA30425
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2031062835-01

DRIVER

Name of Driver	Karupaiyan Palanivel
Passport No/FIN	GXXXX408X
Date Of Birth	02/04/1988
Occupation	Outdoor
Driving Pass Date	03/01/2014
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	10 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86161218
Alt. Phone Number	-
Email Address	tongguanseafoodsales@gmail.com
Address	15, Jalan Tepong, #02-09 Jurong Food Hub, Singapore
Address complement	-
Postcode	619336
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Change/cross lane
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?	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 attached sketch plan.

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	Video file size too big.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJW7887Y



Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Private car
Contact Number	Tan Eng Chuan
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 Actual Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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.

6. 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)

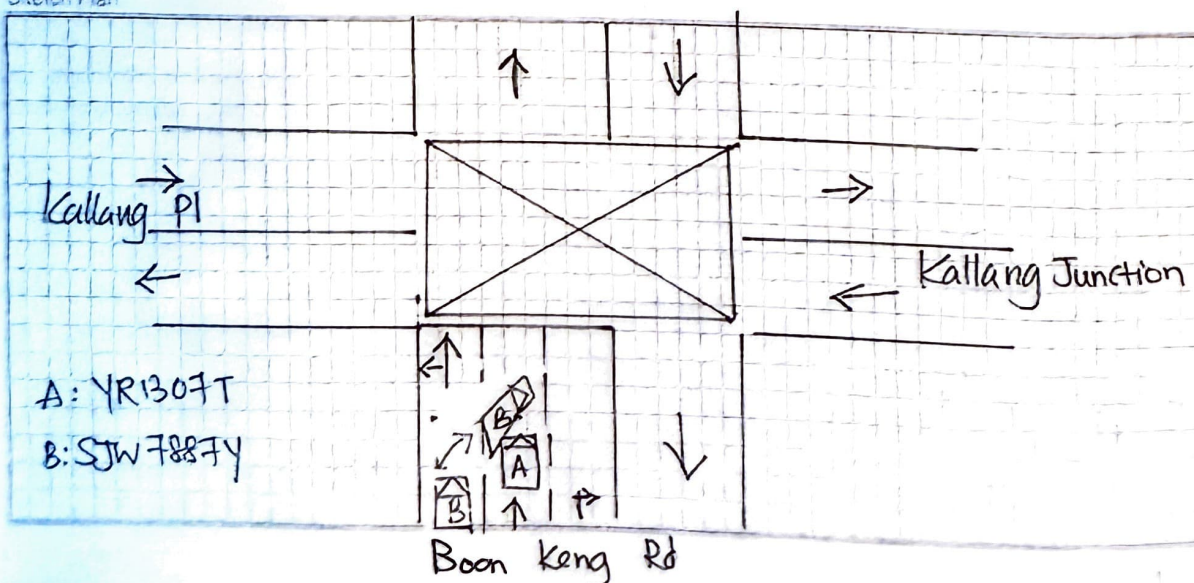
X K. Pavey

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



Witnessed by Reporting Office Personnel (Name as in NRIC/ID Card)

Sketch Plan



Describe Circumstances of the Accident

I was going straight in my center lane, when I approaching traffic light Junction a bus filter to my lane from bus stop. I stopped to give way to bus, when traffic light from red turning to green, I slowly to moving my vehicle suddenly vehicle B from my left lane cut into my lane and hit onto my left front portion damaged.

Declaration

We declare the foregoing particulars are true in every respect



Policyholder's Signature / Date & Time

Xk. Quin

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



Witnessed by Reporting Centre Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	564W
Vehicle Details	
Vehicle No.:	YR1307T
Vehicle to be Exported:	No
Intended Deregistration Date:	04 Dec 2024
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEB21ER4SDEN (CBU)
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	4P10D91427
Chassis No.:	FEB21EA30425
Maximum Power Output:	-
Open Market Value:	\$34,492.00
Original Registration Date:	17 Apr 2020
First Registration Date:	17 Apr 2020
Transfer Count:	1
Actual ARF Paid:	\$1,725.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	16 Apr 2030
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$24,202.00
COE Rebate Amount:	\$12,988.00
Total Rebate Amount:	\$12,988.00
Message	
You will not be eligible for any COE rebate from the current COE (including unused COE from any lay-up period/s), if you renew your COE.	

The information contained herein is correct as at 04 Dec 2024

OK



Mitsubishi Fuso Canter FEB21

\$75,388 Instalment \$1,213/mth

PREMIUM AD

Shortlist

Loan Calculator

- Overview
- Financial
- Photo
- Research

Depreciation	<i>i</i> \$13,500 / year
Reg. Date	06-Jul-2020 (5yrs 7mths 1day COE left)
Lifespan	<i>i</i> 05-Jul-2040
Manufactured	<i>i</i> 2019
Mileage	130,600 km (29.6k / year)
Transmission	Auto
Engine Cap	2,998 cc
Curb Weight	<i>i</i> 2,500 kg
Fuel Type	Diesel
COE	<i>i</i> \$11,917
OMV	<i>i</i> \$34,655
ARF	<i>i</i> \$1,733
Dereg Value	<i>i</i> \$6,657 as of today
No. of Owners	<i>i</i> 1
Type of Veh	Truck