

Signature

REF:

CS/TP18002837 / Aqbez

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s _____
 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.

N/S	O/S

Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 9 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: YP 323 M. Yr Regn: 2014 / Sept.
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Mit Center. c.c. 2498
 Colour: White. A/C: Insured / Std / NI / NA
 Sp. Reading: - T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: FEB21EAO0584.
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Modi: NI S/Rim / STD A/Rim or _____
 Tyre Size: F: 195/85 R15 Doublestar
 R: 195/85 R15. BS
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or _____
 Front Rear
 R/Bal. 06 mm R/Bal. 06 mm
 L/Bal. 06 mm L/Bal. 06 mm
 D.O.A. _____ D.O.I. 27/02/18
 Survey held at People
 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
TP OBE Independent Public Liability.
MV: 63K
PV: 34.3K
Nett: 28.7K
 RECEIVED 27/02/2018
Final Fig 64280.50 (Red 62730, 39%) no lump sum

Date/Time, File Pass to? : Preli. Report
 1) 04/4/18 : Final Report
 Date/Time, File Return to? _____
 2) _____
 Report Format: TR
 Lump Sum / I.B.I: (\$ 4280.50)
 Days Of Repair: 9
 Resurvey No. of Trip: 2 Survey Fee: 150
 Transportation: 50
 Add Fee: : Site Insp (\$ _____)) \$ + RS. SI 50+50
 : Interview (\$ _____)) Photos 46
 : Tech. Invs (\$ _____)) Others _____
 : Weekend (\$ _____)) _____
 TOTAL 346

[Signature]
4/4/2018

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
 Owner ID: 0780D

Vehicle Details

Vehicle No.: YP323M
 Vehicle to be Exported: Yes
 Intended De-registration Date: 27 Feb 2018
 Vehicle Make: MITSUBISHI
 Vehicle Model: CANTER FEB21ER4SDEB
 Primary Colour: White
 Manufacturing Year: 2014
 Engine No.: 4P10B25250
 Chassis No.: FEB21EA00584
 Maximum Power Output: -
 Open Market Value: \$29,567.00
 Original Registration Date: 12 Sep 2014
 First Registration Date: 12 Sep 2014
 Transfer Count: 0
 Actual ARF Paid: \$1,479.00

Intended PARF Rebate Details

PARF Eligibility: No
 PARF Eligibility Expiry Date: -
 PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 11 Sep 2024
 COE Category: C - Goods Vehicle & Bus
 COE Period(Years): 10
 QP Paid: \$52,390.00
 COE Rebate Amount: \$34,269.00
Total Rebate Amount: \$34,269.00

The information contained herein is correct as at 27 Feb 2018

OK

strapsco Watch Straps w/ Free Ship

The best selection of watch bands with FREE Worldwide Shipping!

Post an Advertisement
Sell it yourself! Advertise it at just **\$58 until it's SOLD!**

Mercedes-Benz CLA Class CLA180



Why this is your first choice...
Mercedes-Benz CLA Class CLA180
Direct Owner

Post an Ad Advertiser Login Ways of Selling

Browse by Category

Sort by Date Posted 20 results/page

11 vehicles

Canter

Advanced Search

Make	Model	Price	Depreciation	Reg. Date	Eng Cap	Mileage	Veh Type	Status	
Search Selection	Canter	Any	Any	2014	Any	Any	Any	Available	
	Mitsubishi Fuso Canter FEB21	\$59,800	\$9,980 /yr	24-Feb-2014	2,998 cc	-	Truck	Available	
Fuel Type: Diesel High COE Paper! Mitsubishi Canter Feb 21 14ft Truck, Manual Transmission Condition As Good As New, Full Canopy With Checker Plate. Non VPC And Wooden Base. Goods And Labour Transportation. Test Drive ... ABWIN (1994) Pte Ltd Posted: 29-Jan-2018 Tags: 2014 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso, Used Mitsubishi									
	Mitsubishi Fuso Canter FEB21	\$59,800	\$9,910 /yr	11-Mar-2014	2,998 cc	-	Truck	Available	
Fuel Type: Diesel 14 Foot Lorry With Ready Canopy, Vehicle Like New Condition, In House Loan Available, Trade In Are Welcome, Door Step Viewing Can Be Arranged. Call Now Before It's Gone To Avoid Disappointment! ABWIN (1994) Pte Ltd Posted: 27-Feb-2018 Tags: 2014 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso, Used Mitsubishi									
	Mitsubishi Fuso Canter FEB71	\$60,800	\$9,980 /yr	31-Mar-2014	2,998 cc	17,000 km	Truck	Available	
Fuel Type: Diesel Mitsubishi Fuso Canter FEB71, 15 Feet Wooden Deck, Can Carry Up To 4.2 Tons, Tip Top Condition Like New, 1 Owner, Very Low Mileage, Class 3 Driving License Can Drive, Silent And Powerful Engine, Call ... Posted: 14-Feb-2018 Tags: 2014 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso, Used Mitsubishi									
	Mitsubishi Fuso Canter FEB21	\$58,800	\$9,610 /yr	11-Apr-2014	2,998 cc	150,900 km	Truck	Available	
Fuel Type: Diesel Think One Automobile & Trading Posted: 18-Feb-2018 Tags: 2014 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso, Used Mitsubishi									
Car Buying	Car Selling	Car Aftermarket							
Car Ownership	On The Move	Lifestyle					▶ Buy Tyres Online! ▶ Latest Special Offers from Tyrepac		
	Mitsubishi Fuso Canter FEB21	\$58,800	\$9,610 /yr	11-Apr-2014	2,998 cc	91,589 km	Truck	Available	
Fuel Type: Diesel Think One Automobile & Trading Posted: 01-Feb-2018 Tags: 2014 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso, Used Mitsubishi									
	Mitsubishi Fuso Canter FEB71	\$54,800	\$8,870 /yr	02-May-2014	2,998 cc	-	Truck	Available	
Fuel Type: Diesel 100% No Gimmick, super Low Mileage Done Only, Fully Service At Goldbell Agent. High Deck Calss 3 Can Drive 5.2 Ton. 100% Accident Free, Super Great Tip Top Condition, Excellent Outstanding Nice And Cle... Posted: 19-Feb-2018 Tags: 2014 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso, Used Mitsubishi									
	Mitsubishi Fuso Canter FEA01	\$47,888	\$7,730 /yr	09-May-2014	2,998 cc	126,000 km	Truck	Available	
Fuel Type: Diesel Excellent Condition Vehicle, Can Deploy For Work Immediately. High Trade-In And Flexible Loan Packages Available. Call Our Friendly Sales Team Now For More Information Or To Make An Appoint. Evaluatio... Posted: 23-Feb-2018 Tags: 2014 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso, Used Mitsubishi									

Summary Copy

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 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 ability.
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 Report 19/01/2018 16:29
Date Of Accident 18/01/2018 15:15
Exact Location Of Accident 11 TUAS AVENUE 10 SINGAPORE 639135
Country/State of Loss SINGAPORE

OWN VEHICLE

Vehicle Registration Number YP323M
Name Of Registered Owner TIONG YEONG HARDWARE PTE LTD
Co Reg No 198600780D
Email Address TIONGYEONG@SINGNET.COM.SG
Mobile Phone No (LOCAL) +65-97800172
Alternative Phone No OFFICE-62926633
Manufacturer MITSUBISHI
Model CANTER-3.0 D FEB21ER4SDEB (CBU) (M)
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
If No, Please state action to be taken THIRD PARTY
Vehicle Category COMMERCIAL VEHICLE

Name of Insurance Company AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number VCA/P1652436
Cover Note Number

Name of Driver CHIA KOK KHEONG
NRIC No S1248260D
Date Of Birth 24/05/1957
Occupation OUTDOOR
Date Of Driving Pass 24/06/1982
Driving Experience 35 YEARS AND 6 MONTHS
Gender MALE
Mobile Number +65-81110389
Fax Number
Contact Number
EMail Address NOEMAIL

Address BLK 65 KALLANG BAHRU # 03-347
SINGAPORE
Postcode 330065
Was driver an employee of the Insured's Company YES
If No, Relationship of the Driver with the Insured
Vehicle Registration Number of Driver's Own Vehicle -
Insurance Company of Driver's Own Vehicle -

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions CLEAR
Road Surface DRY

Was any foreign vehicle involved in this accident? NO
Number of vehicles involved in the accident
Was any body injured in the Accident? YES
Was any injured conveyed to hospital by ambulance?
Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
Number of Passengers (Including Driver) 1

Was the accident reported to the police? YES
If Yes, Please state which Police Station
Was notice of intended Prosecution given? NO
If Yes, against whom?

REFER TO ATTACH STATEMENT RECORDED BY JIA MIN - PROGRESSIVE AUTOMOTIVE PTE LTD TEL 67415336

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

Vehicle Registration Number 6037
Vehicle Make/Model/Colour FORKLIFT
Details Of Properties
Vehicle Category
Name of Driver BOON MENG EQUIPMENT PTE LTD
NRIC/Passport Number
Contact Number 63820919
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Name CHIA KOK KHEONG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

YP323M

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan

SKETCH PLAN

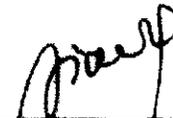
IMPORTANT NOTICE

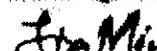
1. Please report promptly the details of the accident to speed up the claims process.
2. This Form must be completed by the Subscribing and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to question 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. Accidents involving cars are 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 lodging 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 elsewhere.
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 postages); 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/are 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 situated outside of Singapore, for one or more of the above Purposes;
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims;
- (e) the information so collected under (a) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

中安五金私人有限公司
 HOON YEE HOON MARINE PVT LTD
 1 SYED ALAM ROAD #01-01
 #01-01 SYED ALAM ROAD SINGAPORE 406451
 Tel: 6342 2222 Fax: 6342 2222
 Policyholder Signature

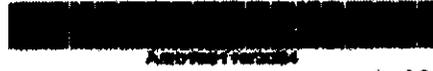

 Driver's Signature
 (If driver is not the policyholder)
 Date & Time


 Reporting Centre Representative's Signature
 Name: 
 MSC/PM No.:

19/1/18
 4 32PM



**SINGAPORE
POLICE FORCE**



Approved Version 4

1 of 3

POLICE REPORT (IP100)

Report No. A/20180119/2034

Police Station Of Origin
Rocher N.P.C
11 Kempong Kapur Road SINGAPORE
200070
Tel No: 1800-2946000

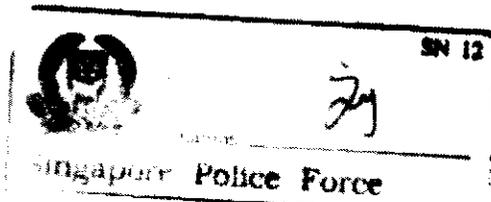
Date/Time Report Made 18/01/2018 11:21		Video Report No.		Station Diary No. 44	
Name Of Informant POH CHOON KIAT		Address APT BLK 82 NEW UPPER CHANGI ROAD #13-1188 SINGAPORE 491982			
ID Type / ID No. NRIC NO / S7304048E		Contact No. Home/Office		Mobile 91082159	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation SALES EXECUTIVE		Sex Male	Age 44	Date of Birth 28/01/1973	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 18/01/2018 15:15		Location Of Incident 11 TIAS AVENUE 10 SINGAPORE 630135			

I am Poh Choon Kiat working at Tiong Yeong Hardware Pte Ltd for about 10 years

On the 18th January 2018 about 1515hrs, I was informed by my company that one of the worker got into an accident. Therefore, I was instructed by the management to go down to the accident site to follow up. When I arrived, the victim was already in the hospital and he was seriously injured. I discovered from the workers on the ground that the victim was knocked down by a forklift from behind his back. He was standing by the side of the lorry before he was being knocked down.

Signature Of Officer Recording The Report: A / Sgt 2 BENJAMIN LOW WEI FU <i>[Signature]</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 18/01/2018 11:21
Officer In-Charge Of Case: A / Central Police Operational Investigation Branch / ADP 2841 P/L Contact No.: 66575076	Classification Of Case:

Authentication Stamp





**SINGAPORE
POLICE FORCE**



ADP/ISS/ISS/ISS

2 of 3

POLICE REPORT (NP289)

CONTINUATION OF REPORT

Report No. A/20189118/2834

The victim is my company's lorry driver (Chia Kok Kheng, S1248280D).

The lorry was damaged and I managed to take photos of it. There were some destruction caused by the forklift. However, the forklift was nowhere to be seen. I asked about the forklift driver but to no avail.

I have visited the victim at Ng Teng Fong Hospital at night but he was unconscious.

The incident location was at a construction site (lamp post 9) 11, Tass Ave 10.

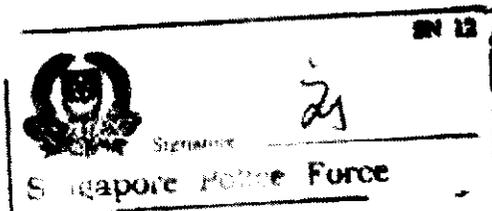
I wish to add that my manager, Henry (88944848), instructed Wong (S1280880) to send the victim to the hospital. However, the boss of Wong, William (88888887) did not seem to agree because he wants to settle the matter personally, at first. Additionally, William had towed the lorry to his own workshop.

I am making this report for MOM to follow up and insurance claim purposes. That's all.

Person Name	Chia Kok Kheng		
ID Type	NRIC NO	ID No	S1248280D
Gender	Male	Age	60-61
Nationality	SINGAPORE CITIZEN		
Language	Chinese	Occupation	LORRY DRIVER CUM DELIVERY

Signature Of Officer Recording The Report: A / Sgt 2 BENJAMIN LOW WEI FU <i>[Signature]</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 18/01/2018 11:21
Officer In-Charge Of Case: A / District Police Divisional Investigation Branch / ADP 2544 FUA Contact No.: 8876876	Classification Of Case:

Authentication Stamp





SINGAPORE
POLICE FORCE

[Redacted]

A/20180118/2034

3 of 3

POLICE REPORT (MP200)

CONTINUATION OF REPORT

Report No. A/20180118/2034

Address Type	Apt Bk	Address	APT BLK 65 Kallang Bahru #03-347 SINGAPORE 330065
Mobile No	971118389		

Signature Of Officer Recording The Report:
 A / Sgt 2 BENJAMIN LOW WEI FU *[Signature]*

Signature Of Interpreter:
 Not applicable

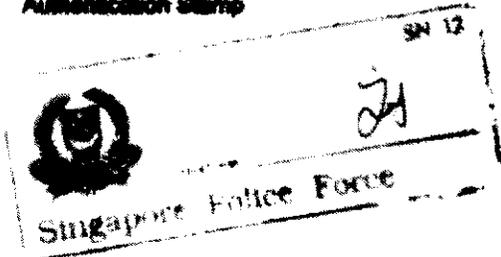
Officer In-Charge Of Case:
 A / Central Police Divisional Investigation Branch /
 ADP ZHANG PEI
 Contact No.: 66676076

Signature Of Informant:
[Signature]

Date/Time:
 19/01/2018 11:21

Classification Of Case:

Authentication Stamp



Individual Statement

Reporting Centre: Progressive Automotive Pte Ltd

INDIVIDUAL STATEMENT (Part II) Own Workshop/Not/Not Used

Handwritten: 19/11/18

Handwritten: 19/11/18

Personal

1. Occupants of your car, state all

2. Vehicle registration no. CC. If commercial vehicle, state appropriate vehicle category

3. Is driver the owner? Yes No If no, state relationship of driver with owner State the vehicle under insurance of (name of insurer and vehicle policy number)

4. Main purpose for which vehicle was being used at time of accident Private use Commercial use Hire & reward Private hire Other - please specify

5. Is the vehicle still in use? Yes No If no, state when it is parked Tel no. _____

6. Are you claiming under your own insurance policy for repair to your vehicle? Yes No If no, state action to be taken: Third Party Reporting Only Own Party (Own Workshop)

Driver or person in charge of vehicle at the time of accident (including himself)

7. Date of birth: 24/5/57 Occupation: Indoor/Outdoor: Outdoor Date of license pass: 24/6/1982 Was vehicle driven with the license holder's permission? Yes No Was driver an employee of the license holder's company? Yes No

8. Give details of any prevailing impairment of sight or hearing and of any other disability

9. Full details of all driving convictions including pending prosecutions in the last 36 months

Date	Offence	Penalty

Injured persons

10. Name(s), address(es) and approximate age(s)	Injuries sustained	If vehicle repaired, state to which vehicle	Was part taken being used?	Was injured conveyed to hospital by ambulance?
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Damage to property of vehicles other than vehicles 1 and 2

11. Name(s) and address(es) of owner(s) Vehicle registration no. or details of property Nature of damage Insurer's name and address (if known)

Police action

12. Was the accident reported to the Police? Yes No If yes, please state which Police station

13. Was notice of intended prosecution given? Yes No If yes, against whom?

Accident details

14. Weather conditions: Clear Rainy Other _____

15. Road surface: Wet Dry Other _____

16. Speed of vehicle: A _____ km/hr B _____ km/hr

17. What warnings were given by driver or other party?

18. Were street lights illuminated? Yes No

19. Were lights used displayed on your vehicle/other vehicles?

20. If your vehicle is commercial, state weight of load carried at time of accident

21. State how accident happened, with of road, speed limits, etc. (refer to attached)

22. State number of Passengers (including driver)

Declaration

I/We declare the foregoing particulars are true and correct.

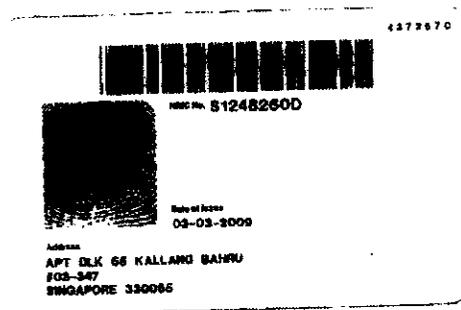
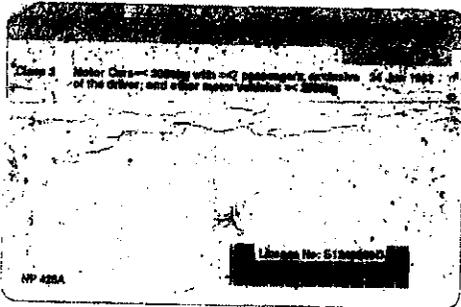
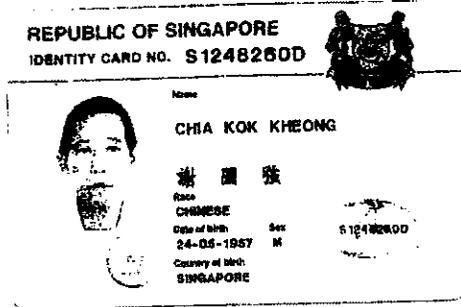
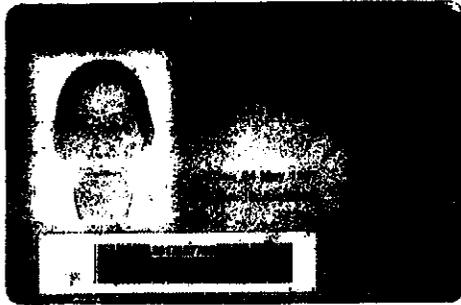
Policyholder's signature: *[Signature]* 19/11/18

Driver's signature (if driver is not the policyholder): *[Signature]*

PROGRESSIVE AUTOMOTIVE PTE LTD
10100 ALOR ROAD #01-01
SINGAPORE 778517
TEL: 6342 7785 / 6728 8888

DRIVER NRIC & LICENCE Pg. 1

Driver Particulars & Briefings Pg.2



AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Service Centre #B1-01
 Tel: (65)63367266 Fax: (65)63382522
 Website: www.axa.com.sg
 GST Registration Number: 199903512M
 Customer.service@axa.com.sg



CERTIFICATE OF INSURANCE

* Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) * Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 * Road Transport Act, 1987 (Malaysia) * Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO.	: VCA/P1652436	Account No.	: 13547
Coverage	: Comprehensive		
Sum Insured	: Market value At The Time Of Loss		
Name of Policy Holder	: TIONG YEONG HARDWARE PTE LTD		
Vehicle Registration No.	: YP323M		
Period of Insurance	: From 12/09/2017 To 11/09/2018 (Both Dates Inclusive)		

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*
 Any person who is driving on the Policyholder's order or with their permission.

 Provided that the person driving is permitted in accordance with the licensing or other law or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

LIMITATIONS AS TO USE*

- (a) Use in connection with the Policyholder's business
- (b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business
- (c) Use for social, domestic and pleasure purposes

This Policy does not cover

- (a) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing
- (b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

(01)

EXCESS

Own Damage Excess : SGD 700.00
 Windscreen Excess : SGD 100.00
 (Please refer to your policy for Additional Excess)

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/We hereby certify that the policy to which this Certification relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGMOMHA on 30/08/2017

IMPORTANT:
 Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with the obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act, (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, cover note and endorsement etc.

PEOPLE'S VEHICLE RECOVERY SERVICE

BLK 3023A UBI ROAD 1 #01-60 SINGAPORE 408717
 Tel No. : 67433246 / 67438552 Fax No. : 67430013
 E-Mail : peoplevehicle@gmail.com
 GST Reg. No. : M90001895E Buss. Reg. No. : 31800200X

QBE INSURANCE (INTERNATIONAL) LIMITED
 65, CHULIA ST. #36-01 WEST LOBBY
 S049513

Attention : Motor Claim Department
 Contact : 62246633 Fax No. : 62252148

Estimate : ES18005

Date : 18/01/2018
 Vehicle Num. : YP 323 M
 Make/Model : MITSUBISHI FUSO
 Chassis/Eng# :
 Accident Date : 18/01/2018
 Claim No. : TP 295-18
 Reference :
 Policy No. : AXA VCA/P1652436

S/N	Quantity	Particular	Unit Price	Amount S\$
1.	1	LIST ITEMS : DIESEL TANK PIPE <i>snapped</i>		365.30 ✓
		List Total S\$:		365.30
		15.00% Discount S\$:		54.80
				310.50
1.		SPECIAL NETT ITEMS : LABOUR FOR REMOVE & REPLACE ABOVE PARTS	50	120.00 50
		Special Nett Total S\$:		120.00
		LABOUR :		
ZTRIP		TOWING CHARGES	100.00	200.00 ✓
2		MAIN WOODEN FRAME <i>cracked</i>	1,350.00	2,700.00 2000
6		MAIN WOODEN FRAME U <i>split Bent</i>	120.00	720.00 480
16		MAIN WOODEN FRAME SRCEW WITH NUT <i>NEW</i>	35.00	560.00 240
1SER		REMOVE & REPLACE ACCIDENT DAMAGED PARTS	2,400.00	2,400.00 1000
		Labour Total S\$:		6,580.00

SingDollars : Seven Thousand Ten & Cents Fifty Only

E. & O.E. Total S\$: 7,010.50

total 4280.50 (P/P)
09 Day

PEOPLE'S VEHICLE RECOVERY SERVICE

Computer Generated Invoice. No Signature Required

LKK Auto Consultants hence notify the Repairer of the following:

- To display damaged part(s) during resurvey
- To display damaged part(s) during painting
- To display damaged part(s) during 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:



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile			
PEOPLE'S VEHICLE RECOVERY SERVICE		Ref : CS/TP18003837/Aqbe2	
BLK 3023-A, UBI ROAD 1 #01-60 SINGAPORE 408717		Date : 05-04-2018	
ON BEHALF OF TIONG YEONG HARDWARE PTE LTD		Code : TP202	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.		Veh. Inspected	YP 323M
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	27/02/2018
2. Vehicle Particulars & Condition			
Make & Model	MITSUBISHI CANTER	c.c	2998
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	FEB21EA00584	Colour	WHITE
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/85 R15	DOUBLESTAR	6 mm
L/H Front Tyre	195/85 R15	DOUBLESTAR	6 mm
R/H Rear Tyre	195/85 R15	BRIDGESTONE	6 mm
L/H Rear Tyre	195/85 R15	BRIDGESTONE	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	18/01/2018	Inspection Date	27/02/2018
Survey held at	PEOPLE'S VEHICLE RECOVERY SERVICE BLK 3023-A, UBI ROAD 1 #01-60 SINGAPORE 408717		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		9 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. YP 323M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	DIESEL TANK PIPE	SNAPPED	365.30	365.30
	LESS 15% DISCOUNT		-54.80	-54.80
			310.50	310.50
SPECIAL NETT ITEMS				
2	MAIN WOODEN FRAME @\$1350.00 (SN)	CRACKED	2,700.00	2,000.00
6	MAIN WOODEN FRAME U BOLT @\$120.00 (SN)	BENT	720.00	480.00
16	MAIN WOODEN FRAME SCREW WITH NUT @\$35.00 (SN)	NECESSARY	560.00	240.00
			3,980.00	2,720.00
LABOUR				
	LABOUR FOR REMOVE & REPLACE ABOVE PARTS.		120.00	50.00
	TOWING CHARGES (2 TRIP).		200.00	200.00
	REMOVE & REPLACE ACCIDENT DAMAGED PARTS.		2,400.00	1,000.00
			2,720.00	1,250.00
GRAND TOTAL			7,010.50	4,280.50

RECOMMENDED COST OF REPAIRS	4,280.50
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Report Ref No. CS/TP18003837/Aqbe2

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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