

ASS. REC. BY: Adrian LingREF: CO/TP18010448/Asbnz**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: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: GBF8565D Yr Regn: 2017, March

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

Truck / Trailer or

2488Make: Nissan NV350C.C. 2988

Colour

white

A/C: Insured / Std / NI / NA

Sp. Reading

49398

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

JN1MC2E26Z0007525Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: _____

AS RSC

R: _____

195 RSCBS / PUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

Rear

R/Bal. 06 mm

mm

R/Bal. 06 mm

mm

L/Bal. 06 mm

mm

L/Bal. 06 mm

mm

D.O.A. _____

D.O.I. 07/06/18

Survey held at

Cruise AntaresDes. 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

Independent.09/11/18 Confirmed HS \$3,400/- @ 5 days with Adrian.
(\$235.87 Red - 7%)

RECEIVED 09 NOV 2018

Adrian
9/11/2018

Date/Time, File Pass to?

09/11/181) Typist

Date/Time, File Return to?

2) _____

☐ : Preli. Report☒ : Final ReportDays Of Repair: 5Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

13550504380358Report Format: independentLump Sum / I.B.I. (\$) 3,400/- HS

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	05/06/2018 15:50
Date Of Accident	05/06/2018 08:30
Exact Location Of Accident	CLEMENTI TOWARDS AYE TUAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF8565D
Insured/Policyholder	
Name Of Registered Owner	C & P RENT-A-CAR PTE LTD
Co Reg No	197900477H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67366666
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV350 PANEL VAN 2.5 5MT 5DR EURO V
Exact Purpose for which vehicle was being used at time of accident	GOODS TRANSPORTATION
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

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	SD18V01469/VCZ/R05
Cover Note Number	

Driver

Name of Driver	MUHAMMAD FARIS BIN RASHID
NRIC No	S9331079I
Date Of Birth	01/09/1993
Occupation	OUTDOOR
Date Of Driving Pass	11/11/2014
Driving Experience	3 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84845409
Fax Number	
Contact Number	
EMail Address	FARIS@BEAQON.COM.SG

Address	236 BUKIT BATOK EAST AVENUE 5 #03-149
Postcode	650236
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
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

Details of Police Action

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

Circumstances of Accident

REFER ATTACHED SKETCH PLAN

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLX7908S
Vehicle Make/Model/Colour	RENAULT / MEGANE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SUDDER RICHARD
NRIC/Passport Number	G3223697P
Contact Number	90300065
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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.
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7. By the lodgment 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.
- (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 (d) 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.



Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 5/1/18

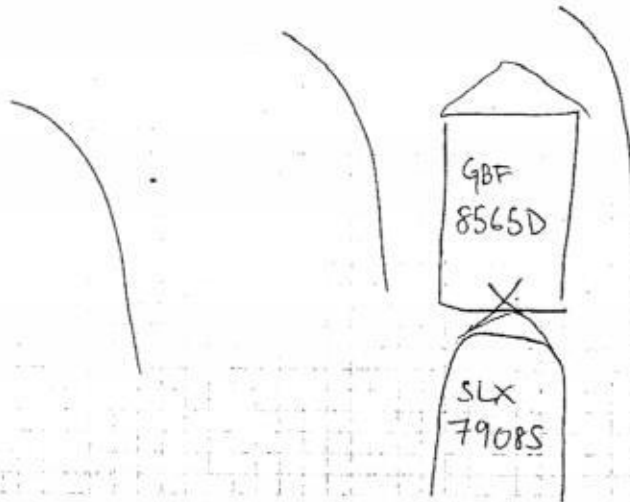
0915

IMPORTDELGRU ENGINEERING PTE LT
45 PANDAN ROAD
SINGAPORE 600033
Reporting Centre Personnel's Signature
Name: Wang Chee Wei
NRIC/FIN No.: 67280994

Sketch Plan Pg. 2

Aye Tuns

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Veh SLX 79085 hits the back door of my van.

DECLARATION

I/We declare the foregoing particulars are true in every respect



Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 5/6/18
0915

IMPORTDELGRU ENGINEERING PTE LI
45 PANDAN ROAD
SINGAPORE 609286
TEL: 6338 8778 FAX: 6262 6950

Reporting Centre Personnel's Signature
Name: Wong Chee Wei
NRIC/FIN No.: G72180994

CRUISE AUTOCARE PTE LTD

ESTIMATE

MS: WEARNES AUTOMOTIVE PTE LTD

TO: CLAIM DEPARTMENT

Fax: 6430 4710

Quotation No: QCA160186

Quote Date: 6/6/2018

Contact No: 68416760

Fax No: 68413527

Veh No.	GBF8565D	Make / Model:	NISSAN NV350
S/N.	Description	LIST PRICE	Qty Amount
PARTS			
1	REAR TAILGATE <i>Dislnd</i>	\$1,742.00	1 \$1,742.00 ✓
2	REAR TAILGATE WEATHERSTRIP <i>at</i>	\$127.50	1 \$127.50 ✓
3	REAR BUMPER <i>Delnd</i>	\$690.60	1 \$690.60 ✓
4	REAR REINFORCEMENT <i>Best</i>	\$165.50	1 \$165.50 ✓
5	REAR END PANEL <i>Repair</i>	\$246.20	1 \$246.20 ✓
6	EMBLEM, NV 350 <i>2</i>	\$87.00	1 \$87.00 ✓
7	LOGO, NISSAN <i>1</i>	\$64.60	1 \$64.60 ✓
8	EMBLEM, URVAN <i>1</i>	\$87.00	1 \$87.00 ✓

DISCOUNT GIVEN ¹⁰15% (\$481.56)

SPECIAL NETT ITEM			
1	REVERSE SENSOR <i>2nd</i>	\$250.00	1 \$250.00 ✓
2	WINDSCREEN SEALANT <i>2</i>	\$50.00	1 \$50.00 ✓
3	70KM/H STICKER <i>1</i>	\$8.00	1 \$8.00 ✓
4	6 PAX STICKER	\$8.00	1 \$8.00 ✓

LABOUR			
1	LABOUR TO REMOVE AND REFIT REAR WINDSCREEN GLASS		\$150.00 <i>120</i>
2	LABOUR TO REMOVE DAMAGED PARTS, CUT/EWLD REAR END PANEL, ALIGN AND REPLACE PARTS.		\$700.00 <i>600</i>
3	SPRAY PAINTING ON REAR TAILGATE, REAR END PANEL AND REAR BUMPER		\$600.00 <i>550</i>
4	CHECK ELECTRICAL		\$50.00 <i>30</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

Cruise Autocare Pte Ltd. "Without Prejudice" basis Signature of Customer

- 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: 53 Ubi Avenue 1, Paya Ubi Industrial Park #03-53 Singapore 408934

TEL: 6841 6760 FAX: 6841 3527

Email: cruiseac@singnet.com.sg

LUMP SUM DISCOUNT 20%

(\$908.97)

Sub Total \$3,635.87

GST @ 7% \$254.51

Total: \$3,890.38

total: 4233.78

4/5: 3.4K ✓

05 days.

Adrian L
H/s 07/06/18

4705.36



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

CRUISE AUTOCARE PTE LTD

Ref : CS/TP18010448/Asbn2

53 UBI AVE 1 PAYA UBI IND. PARK
#03-35 SINGAPORE 408934

Date : 12-11-2018



ON BEHALF OF C & P RENT-A-CAR PTE LTD

Code : TP284

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	Veh. Inspected	GBF 8565D
Policy No.	Coverage (\$)	0.00
Claim No.	Excess (\$)	0.00
Assign From	Assign Date	07/06/2018

2. Vehicle Particulars & Condition

Make & Model	NISSAN NV350	c.c	2488
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JN1MC2E26Z0007525	Colour	WHITE
Odometer	49398	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195 R15C	DUNLOP	6 mm
L/H Front Tyre	195 R15C	DUNLOP	6 mm
R/H Rear Tyre	195 R15C	DUNLOP	6 mm
L/H Rear Tyre	195 R15C	DUNLOP	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	05/06/2018	Inspection Date	07/06/2018
Survey held at	CRUISE AUTOCARE PL 53 UBI AVE 1 PAYA UBI IND. PARK #03-53 SINGAPORE 408934		

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:	5 Working Days
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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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBF 8565D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR TAILGATE	DISTORTED	1,742.00	1,742.00
1	REAR TAILGATE WEATHERSTRIP	CUT	127.50	127.50
1	REAR BUMPER	DEFORMED	690.60	690.60
1	REAR REINFORCEMENT	BENT	165.50	165.50
1	REAR END PANEL	TO REPAIR SEE LABOUR	246.20	-
1	EMBLEM NV350	NECESSARY	87.00	87.00
1	LOGO NISSAN	NECESSARY	64.60	64.60
1	EMBLEM URVAN	NECESSARY	87.00	87.00
	LESS 10% DISCOUNT		-321.04	-296.42
			2,889.36	2,667.78
<u>SPECIAL NETT ITEMS</u>				
1	REVERSE SENSOR (SN)	DAMAGED	250.00	200.00
1	WINDSCREEN SEALANT (SN)	NECESSARY	50.00	50.00
1	70KM/H STICKER (SN)	NECESSARY	8.00	8.00
1	6PAX STICKER (SN)	NECESSARY	8.00	8.00
			316.00	266.00
<u>LABOUR</u>				
	LABOUR TO REMOVE AND REFIT REAR WINDSCREEN GLASS.		150.00	120.00
	LABOUR TO REMOVE DAMAGED PARTS,CUT/WELD REAR END PANEL,ALIGN AND REPLACE PARTS.		700.00	600.00
	SPRAY PAINTING ON REAR TAILGATE,REAR END PANEL AND REAR BUMPER.		600.00	550.00
	CHECK ELECTRICAL.		50.00	30.00
			1,500.00	1,300.00
GRAND TOTAL			4,705.36	4,233.78
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				3,400.00

Report Ref No. CS/TP18010448/Asbn2

ADRIAN LING WAI PING

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

Licensed Appraiser

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