SULVEYOR :	Maychua	ASSIG	1 80 6482/NO <u>ENMENT</u> (Office) ~CI			1019/16/04/27
Estimated Co	st:		Bill to:			· · ·
To Inspect V at Workshop	And the second s	Jone Aut	92629 omotive	Insured;		A 281012 6638 /6710 45
Policy No:	1.01.0() /		'Claim No: _	8180	0669	7 MFSH
Sum Insured			Excess:		1.4	
5 (C. 1) (C. 1) (C. 1)	REP. / REV 24 HRS Person Contacted: Ah bi		D.O.A. 08 09 30 18 1109 2018 H.O.D. Endorsement. Vehicle(IN) OUT			
Make of Veh (Client's Recor CA / REV Date/Time:	d) / REP. / REV 24 H	RS Person Cont	seted: Ah bi_		H.O.D. Endo	1 2018
(Client's Recor	/ REP. / REV 24 H 5-40pm @ 1019	Person Control	acted.		H.O.D. Endo	1 2018
(Client's Recor	REP. / REV 24 H 5-40pm @ 1019 Action/Instruction	Person Control (×) Esti	acted.	Ve	H.O.D. Endo	1 2018 prement:
(Client's Recor	REP. / REV 24 H 5-40pm @ 1019 Action/Instruction	Person Control (×) Esti G -× - NS NC 7	imate	Ve	H.O.D. Endo	1 2018 prement:
(Client's Recor	Action/Instruction GBD 9262 SHA 2810R	Person Control (×) Esti G -× - NS NC 7	imate	Ve	H.O.D. Endo	1 2018

*

amryon 142 REF:	pel	
amagui	ASSIGNMENT	
5.40	Veh No: 6BD 126	7 9 Yr Regn: 24 Jul 2015
From: Date:	Type: M.Car / M.Cycle / Bus / Va	
Estimated Cost:	Truck / Trailer or	
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Make: NISSAN NV	200 cc 1,597
To Inspect Vehicle No:	Colour ALACK	A/C: Insured / Std / NI / NA
at Workshop m/s	Sp.Reading 34 906	T/Radio: Insured / Std / NI / NA
of	CHEST PROPERTY AND ADDRESS OF THE PARTY AND AD	
Insured:	Eng/No:	-19012:
Policy No.		078813
Claims No.	Gen. Cond: Good / Fair / Poor /	
Sum Insured: Excess:	Steering: Inorder / Jammed / Le	
(Client's Record)	Brake: Inorder / Jammed / Le	
Make of Veh:	Modi: Nil / S/Rim / STD A/F	Rim or
	Tyre Size: F:	175/70 RI4-C
(Policy Condition)	R:	
	I/S O/S BS / DUN / EXNOVA / GY / FS	/ LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or	ontwenta (
Bal. or Market Value: 46 C. HS	Front	Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm	R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No		
. Pos: Ves or N	D.O.A. 8/9/18	D.O.I. 11/9/18 12.3
Est. Nepalis.		20NE AUTOMOTTVE
Lum Sum: % 3 Val Tes of P		OIS I NIS I UIC I Rooftop or
CA / REV / REP. / 24 HRS	icle: IN / OUT	
Date: Person Contacted:	The U/C / Chassis frame	/ Body Structure affected due to collision.
Date / Time Action / Instruction		E/1
189 Subject PRS report.		FCI
	-	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:	
1) : Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?		Transportation:)S+RSSI
2)	Add Fee: Site Insp (\$	
	: Interview (\$) Photos
Report Format : PRS	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$:Weekend (\$)

TOTAL



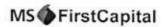
LKK Auto Consultants Pte Ltd

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

FIR	ST CAPITAL INSU	JRANCE LTD	Ref : CS3/FCI1801	6482/Ncd3	
	ROBINSON ROAD 3-01 CITY HOUSES	BINGAPORE 068877	Date: 10-09-2018 Code: FCI2		
1.	CALL STREET	Policy Particu	lars :- (THIRD PARTY CLA	JM)	
	Insured Veh.	SHA 2810R	Veh. Inspected	GBD 9262G	
	Policy No.		Coverage (\$)	0.00	
	Claim No.	D18006697MFSH	Excess (\$)	0.00	
	Assign From	CWS (MAY CHUA)	Assign Date	10/09/2018	
2.		Vehicle	Particulars & Condition	THE REPORT OF THE REST	
	Make & Model		c.c	0	
	Engine No.	HIDDEN	Year of Reg.	· · · · · · · · · · · · · · · · · · ·	
	Chassis No.		Colour		
	Odometer	¥3			
	Brakes		Modification		
	General		SW0004-30070-6450-115		
3.		Co	nditions of Tyres		
		Size	Make	Balance	
	R/H Front Tyre			mm	
	L/H Front Tyre			mm	
	R/H Rear Tyre			mm	
	L/H Rear Tyre			mm	
4.	Carlo San Carlo	Desc	ription of Damages		
5.					
	Accident Date	08/09/2018	neral Information		
	Survey held at	CESTS (1017 PASSAGES)	Inspection Date	11/09/2018	
	Survey neid at				
		5 YISHUN INDUSTRIAL ST #01-20 NORTH SPRING BI SINGAPORE 768161			
a.		Con	Remarks		
	(B) THE REPAIR ES	ON WAS CONDUCTED ON A STIMATE WAS NOT PRESEN AS TOLD TO PREPARE THE	A "WITHOUT PREJUDICE" BAS NTED AT THE TIME OF INSPE	SIS. CTION.	



MS First Capital Insurance Limited Co.Reg. No. 195000100C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims 8 Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

10-09-2018

Our Ref No. D18006697MFSH

Accident Date

08-09-2018

Claim Type. Third Party

Insured Vehicle

SHA2810R

Third Party Vehicle. GBD9262G

Survey Location

5 YISHUN INDUSTRIAL STREET#01-20 NORTH SPRING BIZHUB

Contact Person.

AH BI

Contact No.

0/94656638

Fax No. 0

Survey Type

WITHOUT PREJUDICE:

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

ONE ZONE AUTOMOTIVE

Attention, NIL

Cc: TP Solicitor

CROSSBORDERS LLC

TP Solicitor Fax No. NA

Officer Incharge

MAY CHUA

LLP

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

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 witholding 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

	ACCIDENT STATEMENT
	ACCIDENT STATEMENT
Date Of Report	08/09/2018 17:07
Date Of Accident	08/09/2018 10:05
Exact Location Of Accident	ALONG YISHUN AVE 1 TOWARDS SEMBAWANG RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBD9262G
Insured/Policyholder	
Name Of Registered Owner	DELIPAC SERVICES PTE LTD
Co Reg No	S199303576K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96196292
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200 DX 1.6 A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO

Policy Number DMCPHQ18-004402

Cover Note Number N.A

Driver

Name of Driver LIM SWEE LENG, BRYAN

 NRIC No
 \$8602542F

 Date Of Birth
 19/01/1986

 Occupation
 OUTDOOR

 Date Of Driving Pass
 21/10/2004

Driving Experience 13 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96196292

Fax Number Contact Number

EMail Address DELIPAC@SINGNET.COM.SG

Common Statement Pg. 1

With the middle.

ACCIDENT STATEMENT (2000 characters)

INFRONT TRAFFIC LIGHT TURN F	IVE 1 TOWARDS SAMBAWANG RD. WHEN RED, I WAS STATIONARY FOR WAITING ICLE B COLLIDED ONTO REAR OF MY VEHICLE.
Taxi Voucher No.:	
Are you claiming your own insurance policy for the repair of your vehicle?	No, Claim 3rd party
DECLARATION	
I/We declare that the above particulars & information	provided above are true in every aspect
VERIFIED BY AJAX MARS REPORTING OFFICER WONG JUN KEAT	
MARS Officer	
	Registered Owner or Driver's Signature
Job Complete Date/Time	Date/Time:
8 September, 2018 4:38 pm	8 September, 2018 4:38 pm

Accident Photo









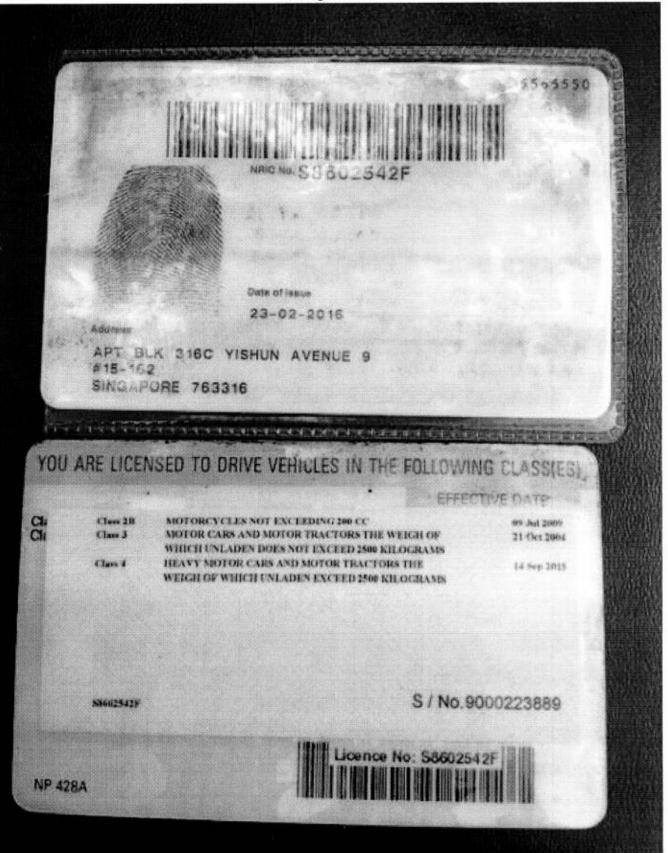








Driving License



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	3576K
Vehicle No.:	GBD9262G
Vehicle to be Exported:	No
Intended Deregistration Date:	18 Sep 2018
Vehicle Make:	NISSAN
Vehicle Model:	NV200 DX 1.6 A
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	HR16028394D
Chassis No.:	VM20078813
Maximum Power Output:	390
Open Market Value:	\$14,436.00
Original Registration Date:	24 Jul 2015
First Registration Date:	24 Jul 2015
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$722.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	929
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	23 Jul 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$50,001.00
COE Rebate Amount:	\$34,234.00
Total Rebate Amount:	\$34,234.00

The information contained herein is correct as at 18 Sep 2018

OK

MIT SA+P

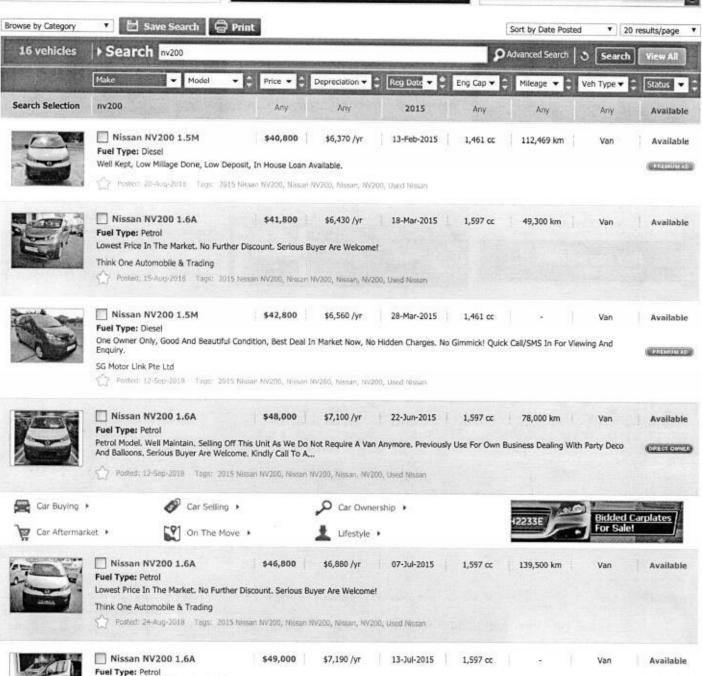
TUDY COMMERCIAL REAL ESTATE INVESTMENT ONLINE



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

2008 Honda Stream (Renewed Syrs C.O.E.) \$0 Down Payment, Low Interest Rate From 3.18%! Well ined With Low Mil StarAd

Auto Inn click here to view our PRISTINE USED CARS at GREAT PRICES





Petrol, Price Can Be Negotiate. Thanks.

CORECT CONNER

Powted: 14-Aug-7018 Tags: 2015 Nissan NV200, Nissan NV200, Nissan, NV200, Used Nissan



Nissan NV200 1.5M

\$45,800

\$6,660 /vr

03-Aug-2015

1.461 cc

71.700 km

Available

Fuel Type: Diesel

100% Loan Avail! Low Interest Rate And Low Installament, With High Paper Value. Cheapest And Best Condition In Market, Door Step Service Avail For Viewing, View And Test Drive To Believe, Fast Approva...

PREMIUNIA







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

			INSPECTION REPORT	
FIRST CAPITAL INSURANCE LTD			Ref. CS3/FCI18016482	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date: 19-09-2018		
			Code: FCI2	Merceden Crick II Cov VI follows Cir.
1.		Policy Particu	ulars :- (THIRD PARTY CLAIN	1)
	Insured Veh.	SHA 2810R	Veh. Inspected	GBD 9262G
	Policy No.		Coverage (\$)	0.00
	Claim No.	D18006697MFSH	Excess (\$)	0.00
,	Assign From	MAY CHUA	Assign Date	10/09/2018
2.		Vehicle	Particulars & Condition	
	Make & Model	NISSAN NV200	c.c	1597
	Engine No.	HIDDEN	Year of Reg.	2015
	Chassis No.	VM20078813	Colour	BLACK
	Odometer	34906 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
	General	FAIR		
3.		C	onditions of Tyres	THE NAME OF STREET
		Size	Make	Balance
	R/H Front Tyre	175/70 R14-C	CONTINENTAL	6 mm
	L/H Front Tyre	175/70 R14-C	CONTINENTAL	6 mm
	R/H Rear Tyre	175/70 R14-C	CONTINENTAL	6 mm
	L/H Rear Tyre	175/70 R14-C	CONTINENTAL	6 mm
4.		Des	cription of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT TH	E REAR PORTION.	
5.	METER MARKET	G	eneral Information	经验的过去分类。
	Accident Date	08/09/2018	Inspect Date / Time	11/09/2018 (12:36 PM)
	Survey held at	ONE ZONE AUTOMOTIVE	LLP	
		5 YISHUN INDUSTRIAL ST #01-20 NORTH SPRING B SINGAPORE 768161		
5a.	Sherry Hall		Remarks	
	B) THE REPAIR E: THE REPAIRER W	STIMATE WAS NOT PRESE WAS TOLD TO PREPARE TH EASE FIND DAMAGED VEH		

Report Ref No. CS3/FCI18016482/Ncd3s2

Inspected By

MUHAMMAD NAZRIL BIN ABDULLAH

K.K.LAU CPT(RET)

Automotive Assessor

 ${\sf BEng(Hons), B.Bus, MBA, PEng, PE, MInstAEA, MASME, MIRTE}$

REGD Auto Consultant-SAE, Licensed Appraiser

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