

22/03/2020

ASS. REC. BY:

REF: CS/CTI 20004037/Elf3

Special Instruction:

Surveyor: Steve

ASSIGNMENT (Office)

From (Person): Chong boon Sen of CTI Date/Time: 16/03/20 @ 10.11a

Estimated Cost: Bill to:

OD/TP/WS/TP RES/OD RES/EVA/INV/MV/CS

To Inspect Vehicle No: XE1779U Insured: YN 9495B

at Workshop m/s ASM Automotive Tel: 9226 8218 / 6265 0026
of NO. 13 Pioneer Sector 1

Policy No: Claim No:

Sum Insured: Excess:

Make of Veh: D.O.A. 24/07/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS lwp

H.O.D. Endorsement:

Date/Time: 16/03/20 @ 11.49am Person Contacted: Jaclyn Lai Vehicle IN/OUT

Date/Time	Action/Instruction	Estimate
	XE 1779U -X	(✓)
	YN 9495B CS/CTI 20003735/Tlof3. D.O.A: 24/07/20	

Nivitha (LKK Auto)

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Sent: Monday, 16 March 2020 10:11 AM
To: ASM Jaclyn
Cc: Tan Kah Leong; 'assignments'; Chong Boon Sen
Subject: RE: OUR REF: c/ YN9495B/TKL - Third Party Claim: XE1779U and YN9495B (your ref.); DOA: 24.02.2020

WITHOUT PREJUDICE

Dear Sir,

We will be assigning M/s **LKK** Auto Consultants Pte Ltd to survey your client's vehicle.
;b

Aside to **LKK**,

Please proceed to survey the third party vehicle on WP basis.

Thank you.

Self note,

To put pri in system.

*rel = in
h = 16/3/20 @ 11.42am
E = ✓
Jaclyn*

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG 3 Anson Road
#16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

From: ASM Jaclyn [mailto:jaclynlai@asmauto.com.sg]
Sent: Monday, March 16, 2020 9:42 AM
To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Cc: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>
Subject: RE: OUR REF: c/ YN9495B/TKL - Third Party Claim: XE1779U and YN9495B (your ref.); DOA: 24.02.2020

Dear Boon Sen,

Is this case have been assigned to LKK? We have yet to receive their call.

Best Regards,
Jaclyn Lai

Assistant Manager
Claims & Operation

ASM Automotive Services Pte Ltd

No. 13, Pioneer Sector 1, Singapore 628424.

Hp: 9236 8218 | DID: 6265 0026 | Fax: 6265 6068

Web: www.asmauto.com.sg

From: ASM Jaclyn

Sent: Friday, 13 March 2020 4:14 PM

To: Chong Boon Sen

Cc: Tan Kah Leong

Subject: RE: OUR REF: SNM20D201060/ YN9495B/TKL - Third Party Claim: XE1779U and YN9495B (your ref.); DOA: 24.02.2020

Dear Boon Sen,

We would like to choose LKK.

Thank you

Best Regards,

Jaclyn Lai

Assistant Manager
Claims & Operation

ASM Automotive Services Pte Ltd

No. 13, Pioneer Sector 1, Singapore 628424.

Hp: 9236 8218 | DID: 6265 0026 | Fax: 6265 6068

Web: www.asmauto.com.sg

From: Chong Boon Sen [<mailto:boonsen.chong@sg.cntaiping.com>]

Sent: Friday, 13 March 2020 3:46 PM

To: ASM Jaclyn

Cc: Tan Kah Leong

Subject: Re: OUR REF: SNM20D201060/ YN9495B/TKL - Third Party Claim: XE1779U and YN9495B (your ref.); DOA: 24.02.2020

Without prejudice

Save as to costs

Dear Sir,

LKK

LBS

STA

ACCIDENT INVOLVING _____

We refer to your letter of _____.

Kindly note the following:-

1. We would like to conduct pre-repair survey of the vehicle at the appointed workshop.
2. We do not agree to the list of surveyors nominated by you.
3. We propose the following list of surveyors to be nominated as the Single Joint Expert to conduct survey of the claimant's vehicle:-
 1. ADRIAN LING 6. KENNETH KONG
 2. Kelvin Ang 7. SIMON HO
 3. SEE CHEW SENG 8. CHUA WEIJIE
 4. MOHD FADHILAH BIN OSMAN 9. MARCUS CHUA
 5. XING QUO QIANG 10. HENRY NG
4. If we do not hear from you within two days of this letter, you shall have deemed to have agreed that the surveyor appointed by us shall be Single Joint Expert for this matter.
5. As per the NIMA Protocol, the survey by our appointed surveyor would include survey of your vehicle pre-repair, after it is dismantled, and post repairs. Hence, you need to provide us / our surveyors with the list of items that were damaged and required to be replaced or repaired to facilitate an effective survey.
6. As stated above, please inform us and our surveyor after the claimant's vehicle had been repaired so that our surveyor can carry out post repair inspection before the vehicle is returned to your client. Please co-ordinate with our surveyor immediately after the repair is completed. If you have any queries, please contact ____ at ____ and email us at ____.

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909
DID: (65) 63896116 | F: (65) 62247175

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG

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jaclynlai@asmauto.com.sg

Cc: Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Subject: OUR REF: SNM20D201060/ YN9495B/TKL - Third Party Claim: XE1779U and YN9495B (your ref.); DOA: 24.02.2020

Dear Kah Leong,

Please conduct PRS for XE1779U.

Note : officer in charge – Kah Leong 63896193.

*** Kindly quote our reference number when replying.

Thank you

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

DID: (65) 63896116 | F: (65) 62247175

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: 太平獅城 Taiping SG

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From: ASM Jaclyn <jaclynlai@asmauto.com.sg>

Sent: Friday, March 13, 2020 11:09 AM

To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Subject: Third Party Claim: XE1779U and YN9495B (your ref.); DOA: 24.02.2020

Dear Sir / Madam,

Our client, the owner of XE 1779 U wishes to file claim for the damages sustained from the above-stated accident, against your insured, YN 9495 B.

We hereby append a copy of our estimate and SAS for your kind perusal.

Kindly advise on liability and arrange for survey. Thank you.

Best Regards,

Jaclyn Lai

Assistant Manager

Claims & Operation

ASM Automotive Services Pte Ltd

No. 13, Pioneer Sector 1, Singapore 628424.

Hp: 9236 8218 | DID: 6265 0026 | Fax: 6265 6068

Web: www.asmauto.com.sg

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	045Z
Vehicle Details	
Vehicle No.:	XE1779U
Vehicle to be Exported:	No
Intended Deregistration Date:	16 Mar 2020
Vehicle Make:	ISUZU
Vehicle Model:	CYH52T
Primary Colour:	Silver
Manufacturing Year:	2015
Engine No.:	6WG1427103
Chassis No.:	JALCYH52TG7000158
Maximum Power Output:	-
Open Market Value:	\$94,150.00
Original Registration Date:	26 May 2016
First Registration Date:	26 May 2016
Transfer Count:	0
Actual ARF Paid:	\$4,708.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	25 May 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$37,258.00
COE Rebate Amount:	\$23,065.00
Total Rebate Amount:	\$23,065.00

The information contained herein is correct as at 16 Mar 2020

OK

RENTAL CAR

DEALS



2015 Volkswagen Jetta

\$1,450/mth 2015 Volkswagen Jetta available for both short term and long term lease. Contact Jeannie @ 9786 7033 for more info.

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3 vehicles

Isuzu CYH52T

Advanced Search



	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Isuzu CYH52T		Any	Any	Any	Any	Any	Any	Availabl
	Isuzu CYH52T (New 10-yr COE)		\$135,800	\$13,570 /yr	02-Mar-2010	15,681 cc	-	Truck	Availabl
	Fuel Type: Diesel Only 1 Previous Owner! 21 Tonnage FASSI Crane Lorry! Powerful, Durable Efficient. Call Now For An No Obligations Discussion! Net Link Partners Pte Ltd Posted: 05-Mar-2020 Tags: 2010 Isuzu CYH52T, Isuzu CYH52T, Isuzu, CYH52T								
	Isuzu CYH52T		\$108,600	N.A	10-Jun-2010	15,681 cc	-	Truck	Availabl
	Fuel Type: Diesel Posted: 18-Feb-2020 Tags: 2010 Isuzu CYH52T, Isuzu CYH52T, Isuzu, CYH52T								
	Isuzu CYH52T		\$94,800	\$18,700 /yr	10-Apr-2015	15,681 cc	-	Truck	Availabl
	Fuel Type: Diesel Please Contact For Viewing. Posted: 09-Feb-2020 Tags: 2015 Isuzu CYH52T, Isuzu CYH52T, Isuzu, CYH52T								

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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 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 Report	25/02/2020 09:45
Date Of Accident	24/02/2020 15:00
Exact Location Of Accident	ALONG AYE TWDS TUAS 22.2KM (L/P 431)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE1779U
Insured/Policyholder	
Name Of Registered Owner	BUILDING RESOURCES INDUSTRIES PTE LTD
Co Reg No	1XXXXX045Z
Email Address	OPERATION@BRI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-68623376

Vehicle Particulars

Manufacturer	ISUZU
Model	CYH52T-15.7 D (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

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	VCA/P1795531
Cover Note Number	

Driver

Name of Driver	TAN KIM KOON
NRIC No	SXXXX795J
Date Of Birth	19/04/1962
Occupation	OUTDOOR
Date Of Driving Pass	03/11/1983
Driving Experience	36 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98439844
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	APT BLK 732 JURONG WEST STREET 73 #02-38
Postcode	640732
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	- - -

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JQT5765 (BUS)
Number of vehicles (including own vehicle) involved in the accident	3
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?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO: 67912972
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE ATTACHED STATEMENT.

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	YN9495B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	RAMAIAH RAGHUVARAN
NRIC/Passport Number	GXXXX007W
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

JQT5765

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

BUS

Name of Driver

MUHAMAD SYARIF ZUL AINI BIN ISMAIL

NRIC/Passport Number

AXXXX4015

Contact Number

0175106135

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

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 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: 25/3/20

ID: 000000




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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the police report T/26200328/2158

DECLARATION

We declare the facts are true in every respect


Policyholder's Signature

Date & Time 25/2/20

10 000 m




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

Reporting Centre Personnel's Signature
Name
NRIC/ID No

Police Report



**SINGAPORE
POLICE FORCE**



T/20200224/2158

1 of 4

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No: T/20200224/2158

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/02/2020 19:34	Vide Report No.: J/20200224/0079	Station Diary No.: 107
--	-------------------------------------	---------------------------

Informant's Particulars			
Name of Informant: TAN KIM KOON		Address: APT BLK 732 JURONG WEST STREET 73 #02-38 SINGAPORE 640732	
ID Type / ID No.: NRIC NO / S1561795J		Contact No.: Home/Office: Mobile: 98439844	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 57	Date of Birth: 19/04/1962	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident: Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 24/02/2020 15:00	Type of Location: Straight Road	
Location: Along Road 1 AYER RAJAH EXPRESSWAY TOWARDS TUAS 22.2KM Lamp Post Number: 431				
Weather: Clear		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passengers
JQT5765	Bus/Coach/Minibus				Seriously Damaged	10
XE1779U	Lorry	ISUZU	CYH52T	Silver	Slightly Damaged	0
YN9495B	Lorry	MITSUBISHI	CANTER FEB21ER4S DEB		Seriously Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20200224/2158

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

2 of 4

Report No: T/20200224/2158

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	RAMAIAH	ID No.	G8103007W
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TAN KIM KOON	ID No.	S1561795J
Related Vehicle	NIL	Contact No.	98439844
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	SYARII	ID No.	017-5106135
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 24/02/2020 at about 1500hrs, I was driving my company lorry bearing license plate XE1779U along AYE. The traffic was heavy during there time thus the vehicles were moving slowly. When the vehicle infront of me came to a stop, I did the same and came to a stop. Suddenly, I heard a long bang and an impact on the rear of my lorry. I alighted and saw that there was a collision between 2 other vehicles. The vehicle bearing license plate YN9495B collided into my rear while JQT5765 collided into YN9495B.

My vehicle suffered dents and scratches on the rear
YN9495B Lorry suffered dents on the front of the lorry, the bumper had fallen off and the windscreen was

Police Report



**SINGAPORE
POLICE FORCE**



T/20200224/2158

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 4

Report No. T/20200224/2158

CONTINUATION OF REPORT

shattered.

JQT5765 bus suffered dent on the left front and cracked windscreen

No one was injured. Police was at scene and issued me a case card reference to J/20200224/0079. No government property was damaged. I did obtain the other parties' particulars

Police Report



SINGAPORE
POLICE FORCE



T/20200224/2158

4 of 4

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No: T/20200224/2158

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J / SC2 HAGEN FONG HAO JIE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 24/02/2020 19:34
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No: 65476414	Classification Of Case:
Authentication Stamp: NP158	



ASM Automotive Services Pte Ltd

No 13, Pioneer Sector 1, Singapore 628424
Main Line: 6265 0980 Fax: 6265 6068
Email: enquiry@asmauto.com.sg
Co / GST Reg No.: 201203813C



FROM : Jaclyn Lai
TEL. NO. : 6265-0026 / 9236-8218
EMAIL : jaclynlai@asmauto.com.sg

TO : China Taiping Insurance (Sg) P/L
ATTN : Motor Claim Department
TEL. NO. : 6389-6111 (main)
EMAIL : claimsdept@sg.cntaiping.com

CC : Building Resources Industries P/L
ATTN : Ms. Yen Yen

DATE : 13.03.2020

VEHICLE NO. : XE 1779 U
MODEL NO. : ISUZU CYH52T
CHASSIS NO. : JALCYH52TG7000158
ENGINE NO. : 6WG1427103
LTA REG DATE : 26/5/2016 - 25/5/2026

CLAIM TYPE : Third Party - YN 9495 B
D.O.A : 24.02.2020
CLAIM REF NO. : asm/AC20023/JL

Quotation for Accident Repair

S/N	SPARE PARTS (SPECIAL NETT)	QUANTITY	UNIT PRICE	AMOUNT
1	Rear number plate lamp ✓ DR	2	\$ 45.00	\$ 90.00
2	Rear number plate ✓ DT	1	\$ 15.00	\$ 15.00
3	Rear number plate bracket ✓ DT	1	\$ 35.00	\$ 35.00
4	Rear crossmember x R	1	\$ 420.00	\$ 420.00
5	Rear underun bumper ✓ DD	1	\$ 500.00	\$ 500.00
6	Tailamp assy, RH x	1	\$ 55.00	\$ 55.00
SUB-TOTAL :				\$ 1,115.00

LABOUR CHARGES

1 To remove and replace damaged parts. (\$350 x 4 days)	\$ 1,400.00	700
2 Spray painting	\$ 300.00	150
TOTAL LABOUR :	\$ 1,700.00	

GRAND TOTAL : **\$ 2,815.00**

Steve (LKK)
8322 8813

17/3/2020
16/3/20 3.29pm

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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: