

Simon
Cheek

23/03/2020

ASS. REC. BY:

REF: CS/CTI20004431/RT/d3

Special Instruction:

Survey:

ASSIGNMENT (Office)

From (Person): Irene Tay

of

CTI

Date/Time: 23/3/2020 @ 6:11pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

XD 639C

Insured:

YP 2376Y

at Workshop m/s

Woodlands Transport

Tel:

9299 4122

of

8 Gul Circle

Policy No:

Claim No:

SNM20D201329/YP2376Y/IRENE

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

16/03/2020

CA / REV / REP. / REV 24 HRS

1wp)

H.O.D. Endorsement:

Date/Time:

2:47pm @ 24/3/2020

Person Contacted:

Mr. Chan

Vehicle IN/OUT

Date/Time	Action/Instruction	Estimated
	XD 639C →	✓
	YP 2376Y →	

TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	721M

Vehicle Details

Vehicle No.:	XD639C
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Mar 2020
Vehicle Make:	MAZDA
Vehicle Model:	FP517DR2RDEB
Primary Colour:	Multicolor
Manufacturing Year:	2006
Engine No.:	6D24380990
Chassis No.:	FP517DA05994
Maximum Power Output:	-
Open Market Value:	\$57,690.00
Original Registration Date:	15 Sep 2006
First Registration Date:	15 Sep 2006
Transfer Count:	0
Actual ARF Paid:	\$2,885.00

Intended PARF Rebate Details

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

Intended COE Rebate Details

COE Expiry Date:	14 Sep 2021
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$24,044.00
COE Rebate Amount:	\$6,999.00
Total Rebate Amount:	\$6,999.00

Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 31 Mar 2020

OK

WTS Engineering Pte Ltd

8 Gul Circle, Singapore 629564 Tel: 65598984 Fax: 68622163
Company Registration Number: 200505706E

Quotation

DATE:	17/03/20	LOCATION:	Gul Workshop
VEHICLE NO:	XD639C	Q REF No:	Q20/03/1134
DRIVER:	MUHAMMAD SAFUAN BIN ABDULLAH	DEPARTMENT:	WTS Prime Mover Department
ATTENTION TO:		ACCIDENT DATE:	16/03/20
PREPARED BY:	Chan Soo Lye	REF No:	JW-0320-221

S/N	Description	Qty	Cost per Unit	Amount S\$
Spare Parts				
1	FRONT RHS CORNER PANEL <i>51</i>	1	548	548.00
Labour Costs				
1	TO DISMANTLE FRONT BUMPER TO PANEL BEAT KNOCK RHS DENTED PORTION AND RE-REFIT SAME. TO DISMANTLE FRONT RHS CORNER PANEL AND REPLACE PARTS.	1	500	<i>400</i> 500.00
Spray Paint				
1	Spray Painting TO PUTTY AND SPRAY PAINTING FRONT BUMPER AND RHS CORNER PANEL.	1	450	<i>400</i> 450.00
TOTAL:				1,498.00
Total Amount				SGD 1,498.00

Remarks:

AS 17/3/20
Signature of Workshop Dpt

17/3/20
Signature of Department Head

17/3/20
Signature of Claim Department

WTS Engineering Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Reps 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:

6/4/2020

Repa
Hp 90010068

3 days

4/5

31/03/2020

91310

Rey after repv

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 17/03/2020 09:50
Date Of Accident 16/03/2020 15:45
Exact Location Of Accident TUAS BASIN LINK
Country/State Of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number XD639C
Insured/Policyholder
Name Of Registered Owner WOODLANDS TRANSPORT SERVICE PTE LTD
Co Reg No 1XXXXX721M
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-98383481
Alternative Phone No OFFICE-65598954

Vehicle Particulars

Manufacturer MITSUBISHI
Model FP517DR2RDEB
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 LIBERTY INSURANCE PTE LTD
Type Of Coverage THIRD PARTY
Fleet Policy YES
Policy Number SD19V12080
Cover Note Number

Driver

Name of Driver MUHAMMAD SAFUAN BIN ABDULLAH
NRIC No SXXXX624D
Date Of Birth 25/07/1981
Occupation OUTDOOR
Date Of Driving Pass 18/11/1988
Driving Experience 31 YEARS AND 3 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-98383481
Fax Number (LOCAL) +65-68982394
Contact Number OFFICE-65598954
Email Address NOEMAIL

Sketch Plan

SKETCH PLAN

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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: 19 MAR 2020

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