

(08/11/13) wef  
ASS. REQ. BY: Marcus

REF: CS/40120004972/UTF3

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD (TP) WS / TP RES / OD RES / EVA / INV / MV  
To Inspect Vehicle No: XE5490A  
at Workshop m/s: moh / ien  
of \_\_\_\_\_  
Insured: \_\_\_\_\_  
Policy No. \_\_\_\_\_  
Claims No. \_\_\_\_\_  
Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
(Client's Record)  
Make of Veh: \_\_\_\_\_

Veh No: XE5490A Yr Regn: 1 120  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or (in)  
Make: HINO FSIEKND c.c 12913  
Colour: orange A/C: Insured / Std / NI / NA  
Sp. Reading: 10227 T/Radio: Insured / Std / NI / NA  
Eng/No: \_\_\_\_\_  
C/No: JHDFSIEKNXXX10000  
Gen. Cond: Good / Fair / Poor / Burnt  
Steering: In order / Jammed / Leaked / Burnt or  
Brake: In order / Jammed / Leaked / Burnt or  
Modi: M / S/Rim / STD A/Rim or  
Tyre Size: F: 295 / 80 R 22.5  
R: \_\_\_\_\_

(Policy Condition)  
Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: @ 170k.  
IDAC Accident Rpt: Consistent?: Yes or No  
GIA / PR Seen: 9 Consistent?: Yes or No  
Est. Repairs: 2 days Res.: Yes or No  
Lum Sum: 1.31 % 3 Val.: Yes or No  
CA / REV / REP. / 24 HRS  
Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_  
Vehicle: IN / OUT

BS / BUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or  
Front: 6 mm Rear: 6/6 6/6 mm  
R/Bal. 6 mm L/Bal. 6/6 6/6 mm  
L/Bal. 6 mm  
D.O.A. 26/3/20 D.O.I. 7/4/20  
Survey held at \_\_\_\_\_  
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
N/S Lnc.  
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction  
14/4/20 Conf. mech panel by @ 1427-11 w. de sicuti

Date/Time, File Pass to?  : Preli. Report  
1)  : Final Report  
Date/Time, File Return to?  
2) \_\_\_\_\_  
Report Format :  
Lump Sum / I.B.I: (\$) \_\_\_\_\_ )

Days Of Repair: \_\_\_\_\_  
Resurvey No. of Trip: \_\_\_\_\_  
Add Fee:  : Site Insp (\$ \_\_\_\_\_ )  
 : Interview (\$ \_\_\_\_\_ )  
 : Tech. Invs (\$ \_\_\_\_\_ )  
 : Weekend (\$ \_\_\_\_\_ )

Survey Fee: \_\_\_\_\_  
Transportation: \_\_\_\_\_  
S + RS, SI \_\_\_\_\_  
Photos \_\_\_\_\_  
Others \_\_\_\_\_  
TOTAL \_\_\_\_\_

# MAH LIAN MOTOR VEHICLE REPAIRER

No.38 Defu Lane 9 Singapore 539278  
 TEL: 62823336 FAX: 62893336 Email: mahlian@singnet.com.sg  
 GST:M90362564P RCB NO:201327339E

M/S : United Overseas Insurance Ltd  
 3 Anson Road  
 #28-01 Springleaf Tower  
 Singapore 079909  
 TEL: 6222 7733  
 ATTN: Motor Claim Department

FAX: claim@uoi.com.sg

Estimate No: **ES1700661**  
 Date: 26 Mar 2020  
 Policy No: DMCVSNW00004152000  
 Veh Reg No: **XE5490A**  
 Make/Model: HINO FS1EKND 28 TON  
 6X4 MT  
 Chassis No: JHDFS1EKNXXX10050  
 Engine No: E13CAT10539  
 Reg. Date: 10-01-2020

Your Ref No: HANAKO CONST P L  
 Claim Type: Third Party  
 Accident Date: 26-03-2020  
 TP Veh Reg No: YN2672C

## Estimate Repair Cost to Vehicle No :XE5490A

Description	U/Price	Quantity	List Price	Amount
			SS	SS
<b>List Price</b>				
1 Corner Panel - LH	580.30	1 PC	580.30	
2 Door Assy - LH	4,868.78	1 PC	4,868.78	
3 Front Bumper Side Protector - LH	385.68	1 PC	385.68	
			5,834.76	
		Less 10%	583.48	5,251.28
<b>Labour</b>				
4 Labour to knock & weld on corner panel , door & renew bumper side protector .	850.00	1 JOB	850.00	400
5 To spray & painting on accident affected area . incorporate stickers	680.00	1 JOB	680.00	
6 To rust proofing on accident affected area .	380.00	1 JOB	380.00	
			1,910.00	1,910.00
		Total	SS 7,161.28	
		Add GST @ 7%		501.29
		Total Amount Payable		SS 7,662.57

TOTAL: SINGAPORE DOLLAR SEVEN THOUSAND SIX HUNDRED SIXTY TWO AND CENTS FIFTY SEVEN ONLY

*Not Authorized*  
*2 days.*  
*7/4/20*

For MAH LIAN MOTOR VEHICLE REPAIRER

AUTHORISED SIGNATURE

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

385.68  
 102  
 347.11  
 1080.00  
 1427.11

Acknowledged by Repairer  
 Signature:  
 Date:

## 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	27/03/2020 16:11
Date Of Accident	26/03/2020 10:30
Exact Location Of Accident	WOODLANDS AVE 1 TO FILTER LANE TO AVE 6
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE5490A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HANAKO CONSTRUCTION PTE LTD
Co Reg No	2XXXX4516
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62662664

### Vehicle Particulars

Manufacturer	HINO
Model	FS1ELKD-12.9 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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSNW00004152000
Cover Note Number	

### Driver

Name of Driver	MUTHUKUMAR BASKAR
NRIC No	GXXXX314X
Date Of Birth	06/03/1978
Occupation	OUTDOOR
Date Of Driving Pass	06/02/2017
Driving Experience	3 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-82617189
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 31 WOODLANDS CLOSE #08-32 WOODLANDS HORIZON  
 Postcode  
 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 SIDE SWIPE  
 Weather Conditions CLEAR  
 Road Surface DRY

**Other Information**

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles (including own vehicle) 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 TO 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 YN2672C  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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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:

*[Signature]*

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

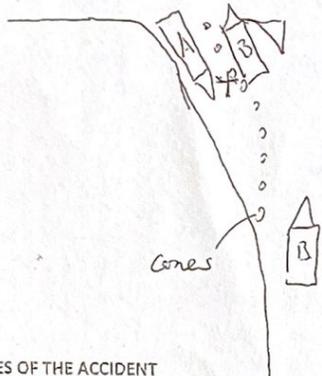
Date & Time:

*[Signature]*

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

SKETCH PLAN

woodlands Ave 6.



A: ZE5490A  
 B: YN2672C

woodlands Ave 1.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was parked at the road works site unloading sand onto the site when YN2672C drive by my side and slightly ~~over~~ mount the kerb at the right side rear wheel and ~~so~~ hit the front LH side of my vehicle.

DECLARATION

I declare the foregoing particulars are true in every respect.



Reporting Centre Personnel's Signature

Date & Time:

*[Signature]*

Driver's Signature

(If driver is not the policyholder)

Date & Time:

*[Signature]*

Reporting Centre Personnel's Signature

Name:

KRIC/FIN No.:

*[Signature]*



中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

N SN

AN0420A

Cov. Type:C

**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, 1999 (Malaysia)

CERTIFICATE No.	DMCVSNW0004152000	Engine No.: E13CAT10539 Cha. No.: JHDFS1EKNXXX10050
1. Index Mark and Registration Number of Vehicle	XE5490A	AUTOSAFE *****
2. Name of Policy Holder	HANAKO CONSTRUCTION PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	10/01/2020	Excess Sect I . S\$5,000.00 EX ON WINDSCREEN . S\$100.00
4. Date of Expiry of Insurance	09/01/2021	
5. 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 laws 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.		
6. Limitations as to use.* (1) Use in connection with the Policyholder's business. (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. (3) Use for social, domestic or pleasure purposes.  The Policy does not cover (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing. (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.		
HIRE PURCHASE CO. : DAIMLER FINANCIAL SVCS AFRICA & ASIA PACIFIC <i>* 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>		

I/We hereby Certify that the policy to which this Certificate 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).

Please see

Issued By: Ng Fong-Ling Alice  
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com

Accident Photo



> **Back to OneMotoring**

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	516K
<b>Vehicle Details</b>	
Vehicle No.:	XE5490A
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Apr 2020
Vehicle Make:	HINO
Vehicle Model:	FS1EKND 28 TON 6X4 MT
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	E13CAT10539
Chassis No.:	JHDFS1EKNXXX10050
Maximum Power Output:	-
Open Market Value:	\$94,676.00
Original Registration Date:	10 Jan 2020
First Registration Date:	10 Jan 2020
Transfer Count:	0
Actual ARF Paid:	\$4,734.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	09 Jan 2030
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$23,704.00
COE Rebate Amount:	\$23,124.00
<b>Total Rebate Amount:</b>	<b>\$23,124.00</b>

The information contained herein is correct as at 07 Apr 2020

OK