	and the state of t
ASS. REC. BY:	2000 7806 /Ksf3
, .C/(1/2/)	SSIGNMENT
From: Date:	
Estimated Cost:	Veh No: GBJ 8063P Yr Regn: 08, 19
OD MP WS I TP RES I OD RES I EVA LINVI MY	_ Type. M.Car / M.Cycle / Bus / Yan / Lorry / Taxl / Prime Mover /
To Inspect Vehicle No:	Truck / Trailer or
	Make: NIS NV200 c.c 1461
- VW MOVIA	Colour _ Cores A/C: Insured / Std / NI / NA
of 03-35,36	Sp.Reading 53466 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	CNO: VSKYBAM 207017879
	Gen. Cond: Geod' Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record) Make of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
make of yen:	Modi: MI I SIRIM I STD AIRIM or
	Tyre Size: F: 175/70R16
(Policy Condition)	R:
Remark: The veh had commenced its  repair at the time of inspection.	BS / DUN / EXNOVA / SY FS / LIZA / MIC / OHTSU / PIR / SUMI /
	TOYO/YOKO or
Bal. or Market Value:	Fronj Rear
01774E0100007 <del>157100</del>	R/Bal. 2 mm R/Bal. 2 mm
	U/Bal. 2 mm U/Bal. 2
Est Repairs: Od days Res.: Yes or No	D.O.A. 26/7/20 D.O.I. 28/7/2020
Lum Sum. W 3 Val. Van an II.	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date:Person Contacted: Vehicle: IN / OUT	CIS 084
Date / Time   Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
ACCOUNT HISBUCCHON	
Date/Time, File Pass to?	
	Of Repair:
Duto/Time, File Return to?	rvey No. of Trip: Survey Fee:
2	Transportative
Add Fee:	: Site Insp (5 )_s - Rs_si
	: Interview (\$ ); Forces
Report Format:	Tech Invs (\$
Lump Sum / I.B.I: (S	Weekend (S
	TOTAL



# **GBJ8063P**

Vermogen Ace Pte Ltd (Co.Reg. No: 20160623C) 60 Jalan Lam Huat #03 - 35/36, Singapore (737869)

Tel: 6358 3031 | Fax No: 6694 4929

## **ACCIDENT REPAIR ESTIMATE**

TP INSURER :	SOMPO	-	Vehicle Reg. No.:	GBJ8063P
OWN INSURER :	AIG	_	Vehicle Reg. Date:	27-Aug-2019
CLAIM TYPE :	TP		Make / Model :	NISSAN NV200 1.5 MT
Date of Accident :	26/7/2020		Engine No. :	K9KE628D688354
_			Chassis No. :	VSKYBAM20Z0178799
COST OF CLAIM	<u>NS</u>			
Parts Cost / List Items :	\$		Surveyor N	ame and Company:
Plus/Less 30%	\$	<u>.</u>		
Total Cost / List :	\$		Date of survey :	29/7/20
Special Nett Items :	\$	360.00	Part by Part / Lum	p Sum : Od days
Total Parts Amount :	\$	360.00	Resurvey Before P	aint / After Paint
Total Labour Amount	: \$	4,800.00		thorize/Without Prejudice
Gross Total :	\$	5,160.00	Email: Ken	nethKongelkka
GST %: 7%	\$	361.20	Fax No :	neth Kongelkka 2564315
Nett Amount :	\$	5,521.20	HP No : 9	6910663

Not Notherike CISing & Resony After Paint Solays

Vermogen Ace Pte Ltd (Co.Reg. No: 20160623C) 60 Jalan Lam Huat #03 - 35/36, Singapore (737869)

Tel: 6358 3031 | Fax No: 6694 4929

Vehicle Reg. No. :

**GBJ8063P** 

Vehicle Reg. Date:

27/8/2019

Make / Model :

NISSAN NV200 1.5 MT

Engine No. :

K9KE628D688354

Chassis No.:

VSKYBAM20Z0178799

PAGE 1

### **Estimates on Parts**

_							ADJUSTED
	Qty	PARTICULARS		CONDITION	AMOUNT	S/N	AMOUNT
No 1		FRONT DOOR RH	By				
170	200	FRONT DOOR LOCK RH	r				X
2		FRONT DOOR LOCK RIT	R				X
3	_	FRONT DOOR HINGE BOTTOM RH	x				×
4	1	FRONT DOOR CHECKER RH	m				×
5	1	FRONT DOOR CHECKER KIT	In				×
6	1	FRONT DOOR INNER TRIM BOARD CLIPS	40				X
7		FRONT DOOR NUMBER LOWER RH	1h				X
8	1	FRONT DOOR ROBBER LOWER RH	Pn				×
9	1		n			20	X
10	1	FRONT DOOR MECHANISM RH FRONT DOOR OUTER HANDLE RH	Cu				
11	1		Sh				*
12	1	PRONT DOOR INTERTITATION	R				×
13	1	REAR SLIDING DOOR RH	R		1		×
14	1	REAR SLIDING DOOR TOP HINGE RH					X
15	1	REAR SLIDING DOOR TOP REAR HINGE RH	K				×
16	1	REAR SLIDING DOOR LOWER HINGE RH	À				×
17	1	REAR SLIDING DOOR LOCK RH	Sn				×
18	1	REAR SLIDING DOOR MECHANISM RH	Jh				X
19	1	REAR SLIDING DOOR INNER TRIM RH					×
20	1set	REAR SLIDING DOOR INNER TRIM CLIPS	Sn.				À
21	1	REAR SLIDING DOOR OUTER HANDLE RH					-
22	1	ROCKER PANEL RH	Ry				U
23	1	REAR FENDER RH	B				X
24	1	REAR FENDER INNER TRIM RH	-Tr-		-		-
25	1	TAIL LAMP RH	Bn		-		.,
26	1	MEAN DOWN EN	'n		_		X
27	1set	REAR BUMPER CLIPS	an				- <del>2</del>
28	1	REAR WHEEL COVER RH	Sm			\$ 100.00	305m
29	1	REAR FENDER SEALANT	M				
30	1	ROCKER PANEL SEALANT	m		na	\$ 100.00	301
31	1	SUNDRIES			10000000000	\$ 60.00	X 251
32	1	FRONT DOOR STICKER			nec	\$ 100.00	231
33	0	0			_		
34	0	0		19			
35	0	0	/	01			
36	0	0		υ			
37	0	0					
38	0	0					
39	0	0					
40	0	0					

# Vermogen Ace Pte Ltd (Co.Reg. No: 20160623C)

60 Jalan Lam Huat #03 - 35/36, Singapore (737869) Tel: 6358 3031 | Fax No: 6694 4929

Vehicle Reg. No. :

GBJ8063P

Vehicle Reg. Date:

27/8/2019

Make / Model :

NISSAN NV200 1.5 MT

Engine No.:

K9KE628D688354

Chassis No.:

VSKYBAM20Z0178799

PAGE 1

#### **Estimates on Labour**

No	MECHANICAL / ELECTRICAL / F	DANEL / DAINT LABOUR		MOUNT	ADJUSTE
1	To straighten and panel beating accident area	Ph Portion	-	TANOOM	AMOUN'
2000	FRONT DOOR RH, CENTER PILLAR RH, REAR S	d. KIT POITION.	\$	2,000.00	1100
	ROCKER PANEL RH, REAR FENDER RH.	EIDING DOOR RH,	┝		
	THE WAY TENDER RIT.		-		
2	To putty, respray painting and polish accident	area. Rh Portion.	5	2,000.00	doce
	FRONT DOOR RH, CENTER PILLAR RH, REAR S		Ť	2,000.00	
	ROCKER PANEL RH, REAR FENDER RH.	,			
3	To remove and transfer front door componer	nts RH.	\$	200.00	601
4	To remove and transfer rear door component	ts RH.	\$	200.00	×
5	To check and rectify wiring after disconnect a	nd connect	Ś	100.00	2-1
3	To check and rectify wiring after disconnect a	na connect.	3	100.00	201
6	To remove and refit interior parts to give way	the repair.	\$	200.00	Sol
		•	Ť		
7	To rust proof affected areas.		\$	100.00	60%
			85		-
			-		
_	-			_	
			-		
		LKK Auto Consultants hence notify		7	
_					
		TO DESCRIPTION FOR THE PROPERTY OF THE PROPERT			
	1.	To display damaged part(s) during resurvey     Parts prices are subject to confirmation     Third page.			\$ -
		Time party survey is on a "latter to	• 6		
		No illegal modification(s) is allowed	bas	IS	
		<ul> <li>Supplementary item(s) must be resurveyed a is subject to final approval from Insurance Co</li> </ul>	ind impar	ıv.	
		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 witholding of material facts may allow insurance companies to
- 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.	TO 100 TO
	ACCIDENT STATEMENT
Date Of Report	28/07/2020 13:03
Date Of Accident	26/07/2020 11:10
Exact Location Of Accident	ALONG CLEMENTI AVE 6 TOWARDS AYE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBJ8063P
Insured/Policyholder	
Name Of Registered Owner	BB TRANSPORT SERVICES
Co Bog No	BXXXXX910W

Co Reg No NOEMAIL **Email Address** 

Mobile Phone No OFFICE-90616597 Alternative Phone No

**Vehicle Particulars** NISSAN Manufacturer NV200 1.5 MT Model

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? THIRD PARTY

If No, Please state action to be taken COMMERCIAL VEHICLE Vehicle Category

**Insurance Company** 

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

1900155137 Policy Number

Cover Note Number

Driver WONG CHEE MENG ANDREW Name of Driver

SXXXX870C NRIC No 15/09/1969 Date Of Birth **INDOOR** Occupation 17/10/1989 **Date Of Driving Pass** 

30 YEARS AND 9 MONTHS **Driving Experience** 

MALE Gender

(LOCAL) +65-90616597 Mobile Number

Fax Number Contact Number

NOEMAIL **EMail Address** 

Page 1 of 33

Address

BLK 26 SERANGOON CENTRAL DRIVE #11-46

Postcode

550256

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?

YES

Was any injured conveyed to hospital by

NO

ambulance?

Was any other material or property damaged? I have been approached by unknown person(s) YES

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

BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 21 BUKIT BATOK EAST AVE 4, POSTCODE: 659840, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-6659999 - FAX NO: 66655793

Was notice of intended Prosecution given?

NO

If Yes, against whom?

**Circumstances of Accident** 

KINDLY REFER TO ATTACH POLICE REPORT NO.T/20200727/2064.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

FBL2873Y

Vehicle Make/Model/Colour

**Details Of Properties** Vehicle Category

MOTORCYCLE

Name of Driver

MUHAMMAD DANIAL BIN MUHAMED

NRIC/Passport Number

SXXXX0891

Contact Number

87765401

Address

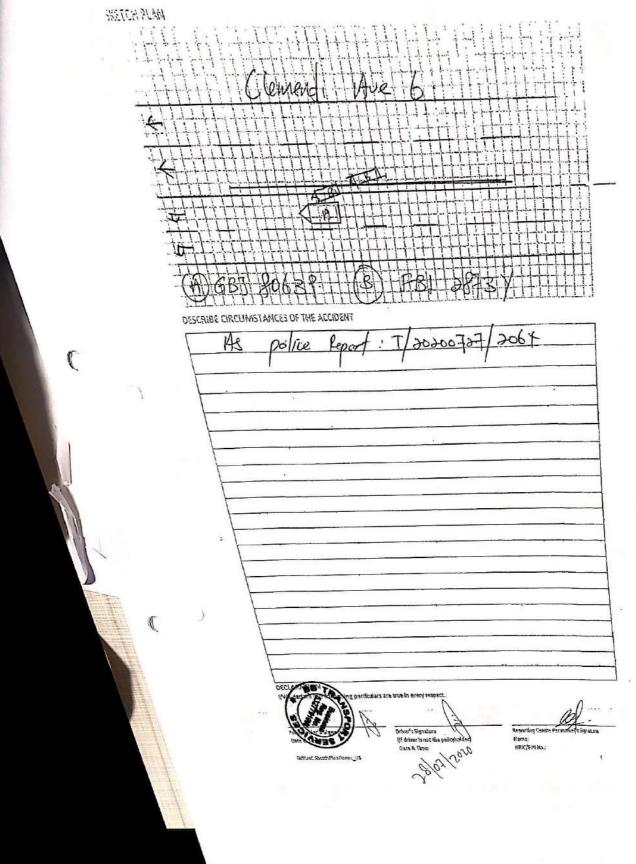
Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 33

### Sketch Plan Pg. 2



#### Sketch Plan Pg. 3





1 of 3

Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE 659840

Report No. T/20200727/2064

Tel No: 1800-6659999

REPORT	OF A TRAFFI	CACCIDENT			
Date/Time Report Made: 27/07/2020 14:11			Vide Report No.:	Station Diary No.: 92	
Informa	int's Partic	ulars	2000年1000年1000年1000年1000年1000年1000年1000		
Name o	f Informant:		Address: APT BLK 256 SERANGOON SINGAPORE 550256	CENTRAL DRIVE #11-46	
ID Type / ID No.: NRIC NO / \$6931870C			Contact No.: Home/Office:	Mobile: 90616597	
Nationa SINGAF	lity: PORE CITIZ	EN	Email:		
Sex: Age: Date of Birth: Male 50 15/09/1969			Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: AIPORT COORDINATOR			Driving Licence Information: Class: 3,4,5	Date of Expiry:	

General Intori	mation of the Accid	Drink	Date/Time of	Type of Location
Type of Accident:	Injury Others	Drive: No	Accident: 26/07/2020 11:10	Straight Road
Location: Along Road 1 CLEMENTI A	VENUE 6 MENTI AVE 6 TOWA	RDS AYE.		
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	1 107	raffic Volume: Noderate
Type of Collisi	ion: ing Vehides - Side S	wipe - Same Direction	a	Anyone conveyed by Imbulance: lo

Vehicle No."	ehicle Involved	Make	Model	Color	Condition	No of Passenger
FBL2873Y	Motorcycle				Slightly Damaged	0
GBJ8063P	Van				Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

#### Sketch Plan Pg. 4





Police Station Of Origin: Bukit Batok N.P.C

Report No. T/20200727/2064

2 of 3

21 Bukit Batok East Avenue 4 SINGAPORE 659840

Tel No: 1800-6659999

CONTINUATION OF REPORT

Rider	The same and the s		ID No.		S9900089I	
Name	MUHAMMAD DANIAL BIN MOHAMED NORDIN					
Related Vehicle	FBL2873Y (Motorcycle)		Contact No.		Class: NIL Date of Expiry: NIL	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Da		e&		
Date Treatment	NIL	Date Disch		NIL		
No. of Days gran	ted Medical Leave NIL	Degree of	Injury	NIL	AND THE PROPERTY OF THE PARTY O	
Driver			Sec.	60,000	000040700	
Name	WONG CHEE MENG ANDREW		ID No.		S6931870C	
Related Vehicle	GBJ8063P (Van)		Conta	ct No.	90616597	
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class Driving Licent Expiry	g	Class: 3,4,5 Date of Expiry: NIL	
Date Treatment	27/07/2020	Date Disc	harge		/2020	
Date Heathern	nted Medical Leave 04	Degree of	Injury	Sligh	t	

On 26/07/2020 at about 1110hrs, I was driving my vehicle V1) GBJ8063P along Clementi Ave 6 towards AYE. I continued driving as the traffic in front was clear. Suddenly, there was an impact on V1's right rear area. I proceed to make a stop and alighted. I discovered one motorcycle V2) FBL2873Y, had collided into V1, the rider of V2, had minor abrasions and insisted not to call an ambulance. I took photos of the incident and our vehicles, and discussed with the rider about the settlement. The rider of V2 told me that he wish to go for private settlement, however he cannot pay if the repair cost from the damage on V1 is very high. The damages on V1, are scratches and dent on the driver's door handle, rear right door, and right side skirt.

The rider of V2 also told me that he was rushing to find his wallet as he had lost his wallet before the

As I felt pain on my back after the accident, on 27/07/2020 I had went to see a doctor and was issued a 4 days MC.