

ASS. REC. BY:

REF:

MSG / 120009377/kgf3

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No: YM 6871Z

at Workshop m/s Bifrost (Lim Tan)

of

01-13

Insured: XE 2535A

Policy No. 30001320103

Claims No. 247143

Sum Insured: Excess:

(Client's Record)

Make of Veh:

100m

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value:

17k

IDAC Accident Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

10 days

Res.: Yes or No

Lum Sum:

10-18

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

YM 6871Z

Yr Regn:

071 07

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Mit Canter

c.c

2977

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

405497

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

FEB3BEA 10140

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm or

Tyre Size:

F:

FOUR 16X10

R185R14X10 (P)

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO YOKO or

Front

Rear

R/Bal.

9

mm

R/Bal.

7

7

mm

L/Bal.

9

mm

L/Bal.

7

7

mm

D.O.A.

28/2/00

D.O.I.

23/2/2021

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S body

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

17/03/21 @11.11AM REVISED TO CHRISTINA WONG VIA MERIMEN

18/11/21 Submit Preli. report. - as wksp said their don't have this record.

Date/Time, File Pass to?



Preli. Report

1) 18/11 Typist



Final Report

Date/Time, File Return to?

2)

Days Of Repair: 10

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS. SI

Fees

Others

TOTAL

Add Fee:



Site Insp (\$



Interview (\$



Tech Invs (\$



Weekend (\$

Report Format: TP

Lump Sum / I.B.I. (\$

Not Authored  
C/Rep 8  
23 FEB 2021

Shower After Rain  
10 days

**INSURANCE: MSIG**

VEHICLE NO.: YM 6871 Z

LKK Auto Consultants hereby 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: \_\_\_\_\_

Scanned with CamScanner

## 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 29/08/2020 11:08  
Date Of Accident 28/08/2020 15:30  
Exact Location Of Accident JURONG PORT ROAD  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number YM6871Z

#### Insured/Policyholder

Name Of Registered Owner PRESTIGE SUPPLY CHAIN MANAGEMENT PTE LTD  
Co Reg No 2XXXXX540R  
Email Address AILEEN@PILCON.COM.SG  
Mobile Phone No  
Alternative Phone No OFFICE-63631611

#### Vehicle Particulars

Manufacturer MITSUBISHI  
Model FE83BE6SRDEA-3.0 D (A)

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 GOODS VEHICLE

#### Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number  
Cover Note Number

#### Driver

Name of Driver ZHANG HAOSONG  
NRIC No SXXXXX239I  
Date Of Birth 26/11/1983  
Occupation OUTDOOR  
Date Of Driving Pass 13/03/2019  
Driving Experience 1 YEAR AND 5 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-92257681  
Fax Number  
Contact Number  
Email Address NOEMAIL

# SKETCH PLAN

Date & Time of Accident: 28/8/20, 15.30hrs

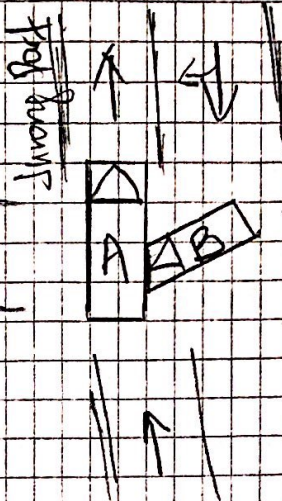
Location: Jurong Port Rd Junction

Veh A: YM 6871Z

Veh B: XE 2535A

Veh C/Others: -

Veh A: YM 6871Z



Veh B: XE 2535A

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28-08-20 at 15.30 hrs, while I was travelling along Jurong Port Road junction and green light was in my favour. Suddenly vehicle number XE 2535A turn and hit my right portion of my vehicle.

Nobody injured during this incident.

☐ Own Damage Claim at Lim Tan Motor ☒ TP Claim at Lim Tan Motor  
☐ Own Damage Claim at Other Workshop ☐ TP Claim at Other Workshop ☐ Reporting Only

I/We hereby authorised Lim Tan Motor Pte Ltd to forward my/our filed GIA accident report to:-

My/Our workshop via email : \_\_\_\_\_

My/Our email : \_\_\_\_\_

## DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature Date & Time: \_\_\_\_\_

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

Reporting Centre Personnel's Signature Name: \_\_\_\_\_

NRIC/FIN No.: \_\_\_\_\_

Back to OneMotoring

## Require PARF/COE Rebate for Registered Vehicle

## Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	540R

## Vehicle Details

Vehicle No.:	YM6871Z
Vehicle to be Exported:	Yes
Intended Deregistration Date:	31 Aug 2020
Vehicle Make:	MITSUBISHI
Vehicle Model:	FE83BEOSRDEA
Primary Colour:	White
Manufacturing Year:	2007
Engine No.:	4M42A42866
Chassis No.:	FE83BEA10140
Maximum Power Output:	-
Open Market Value:	\$25,429.00
Original Registration Date:	10 Jul 2007
First Registration Date:	10 Jul 2007
Transfer Count:	2
Actual ARF Paid:	\$0.00

## Intended PARF Rebate Details

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

## Intended COE Rebate Details

COE Expiry Date:	09 Jul 2022
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$17,035.00
COE Rebate Amount:	\$6,328.00
Total Rebate Amount:	\$6,328.00

## 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 29 Aug 2020

OK