2	, n - ' C
ASS. REC. BY: Rapple   NEFT: CS/CT11902	4067/Rigf3   554R
	GNMENT
	11000/111 VO 211 1011
From: Date:	Type: M.Car / M.Cycle / Bus / Van / Korry / Taxl / Prime Mover /
Estimated Cost:	Truck / Trailer or
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	11.1.1.101.10
To Inspect Vehicle No: 4P 82644	
at Workshop m/s Cytoch muro	Colour Notice
of 5, snow Let ST #01-62	,
Insured: CT(	C/No: JHHUCS3HGCKC22754.
Policy No. DMB1SN19251719000	
Claims No. SNM19D205658	Gen. Cond: Good / Cale / Poor / Burnt
Sum Insured: Excess:	Steering: Morder Jammed / Leaked / Burnt or
(Client's Record)	Brake: norde / Jammed / Leaked / Burnt or
Make of Veh:	Modi: (Nil) S/Rim / STD A/Rim or
0,	Tyre Size: F: 7.00 RIL
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMP)
repair at the time of inspection.	TOYO / YOKO or .
Sal. or Market Value: 58K	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 7 mm R/Bal. 717 mm
GIA / PR Seen: Consistent? : Yes or No	UBal. 1 nm UBal. 1/7 mm
Est Repairs: 4 days Res.: Yes or No	D.O.A. 17/11/19 D.O.I. 29/09/2020
Lum Sum: % · 3 Val.: Yes or No	Survey held at CHON AND
Lum Sum. 76 or No.	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS	Ding wie
Vehicle: IN / OUDate: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time   Action / Instruction	The ord 7 diassis frame 7 body structure allected due to complete.
Date filme Action / Instruction	
3/11/20@1.49pm Rasul finalised with wksp L	S \$3850, 4 days (Red \$7850, 67%)
7 1720 William Red International William Wiles	ο φοσος, τ dayo (που φτοσος, στ το)
***	
Dale/Time, File Pass to? Prolit Roport	,
. Frem. Report	Days Of Repair: 4
: Final Report	1 (source) (10) or 11.61
Date/Time, File Return to?	Transportation:
. 2) Add	
Manipulation MED TD	: Interview (\$) Photos
Representation MER-TP Lunap Sum (1884) (** 3850	:Tech, Invs (\$) others
Lump Sum [1554-17] 3850 )	:Westend (\$)
	TOTAL

HENG AUTO

86667775 >

DATE: 29/9/2020

REPAIR DETAILS

REFERENCE

Vehicle Reg No.

: YP8264Y

Make & Model

: HINO / HINO XZU710R-HKFMS3 : JHHUCS3H60K022754

Chassis No.

Engine No.

: N04CUS34694

Manufactured Year : 2017

Labour

: REPAIRER'S

TP Vehicle Reg No. : PC6965X

DOA & Location

: 17/11/2019

ALONG SENTOSA'S COVE AVE ROUNDABOUT

Our Ref

: YP8264Y

OJJ FOODS PTE LTD

### LABOUR

No.	Description	Price		
1	LABOUR	\$	1,200.00 500	
2	SPRAYPAINTING	\$	1,200.00 500	
-	Total Labor	ır (S\$) S	2,400.00	

# MISCELLANEOUS ITEMS

No.	Description		Price	
1	TAILDOOR RH Cut	\$	2,500	0.00
2	TAILDOOR HINGE RH UPPER 54	\$	30	0.00
3	TAILDOOR HINGE RH LOWER	\$	30	0.00) to check 1
4	TAILDOOR RUBBER RH X4	\$	1,20	0.00 parts prices
5	TAILDOOR SIDE ALUMINIUM PANEL RH	\$	80	0.00
6	TAILDOOR INNER CHESSPLATE	\$		0.00
7	STICKER TAILDOOR RH NA / S/A	\$	1,20	0.00 Yer
8	HINGE BOLTS 🗶			0.00
9	END PANEL # 61 - S/W		\$ 80	×500 300
10	STICKER RH REAR X	,		00.00
	Tota	I Miscellaneous Items (S\$)	\$ 9,30	00.00

-	\$ Total Parts (S\$)
2,400.00	\$ Total Labour (S\$)
9,300.00	\$ Total Miscellaneous (S\$)
11,700.00	\$ Sub-Total (S\$)
819.00	\$ GST 7% (S\$)
12,519.00	\$ Grand Total (S\$)

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:

Rasue
4 90010068
4 days
4/8
29/09/2020 @1355
Rey after reprin



MCAB19152872 / Cheng Auto Bodyworks - HQ ENTRY DATE & TIME: 19/11/2019 14:48 SUBMITTED BY: Lai Wan Sun

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 19/11/2019 18:19

#### 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 compenies 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.

35	0	10.3	11.5	1.1	1	111

Date Of Report 19/11/2019 14:48

Date Of Accident 17/11/2019 10:10

Exact Location Of Accident ALONG SENTOSA'S COVE AVE ROUNDABOUT

Country/State of Loss SINGAPORE

#### III DETAILS OF OWN VEHICLES

Vehicle Registration Number YP8264Y

Insured/Policyholder

Name Of Registered Owner OJJ FOODS PTE LTD

Co Reg No 200107554R Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-88163981

Alternative Phone No OFFICE-88163981

Vehicle Particulars

Manufacturer HINO

Model XZU710R-HKFMS3-4.0 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 TOKIO MARINE INSURANCE SINGAPORE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 18-MU013235-R01

Cover Note Number

Driver

Name of Driver NG BOON KENG
NRIC No S1573952F

 Date Of Birth
 10/11/1963

 Occupation
 OUTDOOR

 Date Of Driving Pass
 15/03/2004

Driving Experience 15 YEARS AND 8 MONTHS

Gender

Mobile Number (LOCAL) +65-88163981

Fax Number

Contact Number

EMail Address NOEMAIL

Address	BLK 570 HOUGANG STREET 51 #09-101
Postcode	530570
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	COLLISION - HEAD TO REAR
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	

# Circumstances of Accident

If Yes, against whom?

Was notice of intended Prosecution given?

On 17/11/2019 at 1011 hrs, I was travelling along Sentosa's Cove Avenue Roundabout. As the taxi ahead of me abruptly changed it's decision, I stopped to prevent colliding into the taxi. Suddenly, there was an impact from the rear of my vehicle. As I came down to check, Vehicle B (PC6965X) has collided onto the rear of my vehicle.

NO

#### 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	PC6965X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### SKFTCH PLAN

#### IMPORTANT NOTICE

- 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 willul misrapresentation or withholding of material facts may allow insurance companies to reputies a policy hability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy hability 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 CIA Records Management Centre established by the General Imurance 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)
  - (4) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (iii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iii) edministering my claims (including the mading of correspondence, statements, invoices, reports or notices to me. which could involve disclosure of cortain 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 enurer's) who have insured vehicle(s) insolved in this accident and the Insurers' laveyere/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 Versional 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 is more of the above Purposes.
- (d) my Fersonal 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 incorers and/or any other third parties that usual in evaluating investigating controlling or managing traud, 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.

Date & Time

Onvers Signatura

(If drived is not the policy history

NHS FIN NO

Date & Live Lam fully exists that my knows may have a 14 day period for me to cincide on liking an Own Demago Claim

## **Accident Sketch Plan**

		Gate of Architecture	17/11/2019
SKETCH PLAN		\	
ALONG SENTOSA'S COVE A	VE ROUNDAROUT		
<del>(</del>		)	
	(A)		
	1.0		
			YP8264Y PC6965X
DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT		
On 17/11/2019 at 1011 h	rs. I was travelling along Se	entosa's Cove Avenue Roundab	out As the
case ahead of me abruptly	changed it's decision. I sto	opped to prevent colliding into the	e taxi
Suddenly, there was an in	mpact from the rear of my v	renicle. As I came down to check	k. Venicle B
(PC69h6X) has colided o	onto the rear of my vehicle		
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			-
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		Principal and the second secon	
		AT THE RESIDENCE OF THE PARTY O	
			7
	A	Company of the State of the Sta	
			-
			No.
	Contract of the Contract of th	☐ Own (lamage Claim	
		[ ] Third Party Gasm	
-		M OO(E) tarm at another workshop	
		Bapatng Chily	
DICLARATION  Why declars the foregoing party of	iars are true in every respect	(AS)	
11-5	Soul/	(Caret	
Phone of mineral and an area	Conver's Signature	Reporting Control Personal Con	Signature.
Dake & Since	(if driver is not the policyholder).	Nome	
W	Dutie & Faver	NNOC/EDV No.	

# > Back to OneMotoring Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company Tremes Street Company
Owner ID:	554R
Vehicle No.:	
02-110-03-1-310-04-310-4-31-3-31-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3	YP8264Y
Vehicle to be Exported:	No like the second that the se
Intended Deregistration Date:	29 Sep 2020
Vehicle Make:	HINO
Vehicle Model:	HINO XZU710R-HKFMS3
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	N04CUS34694
Chassis No.:	JHHUC53H60K022754
Maximum Power Output:	
Open Market Value:	\$34,627.00
Original Registration Date:	28 Dec 2017
First Registration Date:	28 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$1,732.00
■ kiykuliik Citi ♦ Sirik (yi Sil Sirik Edik Sil Bilis) Edil Calon Sirina salah kabasa kabasa kabasa kabasa men	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	hard the same of t
PARF Rebate Amount:	\$0.00
() () () () ( () () () () () () ( <del>        </del>	arang at paggang paggan
COE Expiry Date:	27 Dec 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$42,000.00
COE Rebate Amount:	\$30.416.00
Total Rebate Amount:	\$30,416.00

OK

