

ASS. REC. BY:

REF: MSG / 20011048/Kqd3

Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s NBM Taxi Cab

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. 29141713Claims No. 629504

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent?: Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No

Est. Repairs: 03 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: 07/11 Person Contacted: \_\_\_\_\_ Vehicle: IN / OUTVeh No: SAU 8722P Yr Regn: 07.11.Type: M.Car / M.Cycle / Bus / Van / Lorry / Y Prime Mover /Truck / Trailer or (A)Make: Jaguar XJL c.c. 2993Colour M. Gold A/C: Insured / Std / NI / NASp. Reading 264677 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: SAJAC 2253 BNV 21320Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 245/45 ER19R: 275/40 ER19BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR SUMI /

TOYO / YOKO or \_\_\_\_\_

Front 8 mm Rear 9 mmR/Bal. 8 mm L/Bal. 9 mmD.O.A. 6/10/20 D.O.I. 14/10/2020Survey held at ✓

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

01514

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

1 EST NOT READY

15/10/20@12pm Informed Chhia Nyuk Pui, we are pending for estimate from repairer.

29/10/20@11.24am revised to Chhia Nyuk Pui via Merimen.

Kenneth confirmed LS \$4950, 3 days (Red \$14179, 74%)

Date/Time, File Pass to? ☐ : Prel. Report1) 29/10 Typist ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3Resurvey No. of Trip: 1

Survey Fee:

Transportation

Add Fee: ☐ : Site Insp (\$ ) S + RS. SI☐ : Interview (\$ ) F. Insp☐ : Tech Insp (\$ ) Others☐ : Weekend (\$ )

Report Format: MER-TP

Lump Sum / + B. (\$ 4950)

TOTAL

1. The insured must be a resident of Singapore.  
2. The insured must be a Singaporean citizen.  
3. The insured must be a Singaporean permanent resident.

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## INSURANCE POLICY STATEMENT

### APPLICANT NOTICE

- 1. The insured must be a resident of Singapore.
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### APPLICANT DETAILS

Insured Name: **TEOW ELAN HERN**  
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### DETAILS OF INSURANCE

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### INSURANCE POLICY

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### Driver

Insured Name: **TEOW ELAN HERN**  
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Address -  
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 -  
Vehicle -  
Insurance Company of Driver's Own Vehicle -

#### General Information of the Accident

Type Of Accident COLLIDED INTO PARKED VEHICLE  
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? YES  
If Yes, Please state which Police Station  
Police Station Name PASIR RIS NEIGHBOURHOOD POLICE CENTRE  
Police Station Address ROAD: 1 PASIR RIS DRIVE 4, POSTCODE: 519457, COUNTRY: SINGAPORE  
Police Station Contact TEL NO: 1800-5852999 - FAX NO: 65855261  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

#### Circumstances of Accident

refer attached police report.

#### Attachment(s)

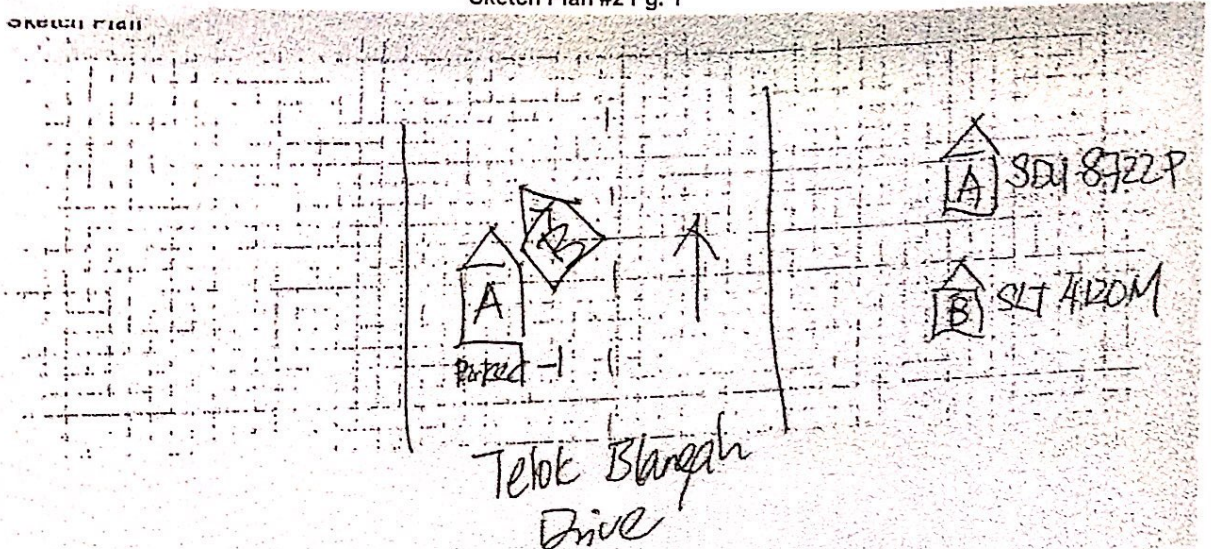
Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? NO  
Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLT4120M  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver WAN SIEW TOCK  
NRIC/Passport Number SXXXX785E  
Contact Number 91304355  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage



Sketch Plan

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT****Brief Details.**

On the 06/10/2020 at about 12.30pm, I and my colleagues arrived at capark BMTB29 (Telok Blangah Drive). I am driving vehicle no. SDU8722P Jaguar XJL, gold in colour and parked at lot no. 21. I was waiting by the side of the road whilst waiting for my colleagues to buy their lunch items. My vehicle was parked and stationary at the said parking lot.

At about 12.40pm, a vehicle, SLT4120M Mazda 3, dark blue in colour, drove passed my parked car and suddenly grazed my front right side of the vehicle. I made a check and found multiple deep scratches mainly on the front right bumper of my vehicle. Likewise was there for the other vehicle however the car suffered it on the front left side. The driver later came out of the vehicle and we checked that none was injured during the whole ordeal and that mainly damages were made to both cars.

We later exchanged particulars and we both photographed the scene before informing one another to make our necessary individual insurance claims. My car has an in-car camera however as it was parked at the point of time, it was switched off as such there is no footage of when the accident occurred. I am unsure of the presence of an in-car camera of the other vehicle.

ATTACH POLICE REPORT

**DECLARATION**

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

Policyholder's Signature

Date &amp; Time: 09/10/20

Driver's Signature

(If driver is not the policyholder)

Date &amp; Time: 09/10/20

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

G/ARMC Sketch Plan Form V3