ASS. REC. BY: REF: LPC/	
Kennerh REF. 210/2	200117301Kt
From: ASS	SIGNMENT
Estimated Cost:	Veh No: 4P19807 Yr Regn: 04, 16
	Type: M.Car / M.Cycle / Bus / Van / Korry / Taxl / Prime Mover /
To Inspect Vehicle No:	Truck / Trailer or
	Make: Mit Carte c.c 2998
of	Colour White AC: Insured / Std / NI / NA
Insured:	Sp.Reading 243489 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	CNO: FEB21EA . 20365
Sum Insured: Excess:	Gen. Cond. Good / Fair / Poor / Burnt
(Client's Record)	Steering: Inorder Jammed / Leaked / Burnt or
Make of Veh:	Brake: Ingrider / Jammed / Leaked / Burnt or
	Modl: (NII) S/Rim / STD A/Rim or Tyre Size: F: /95/85/R/5
(Policy Condition)	
Remark: The veh had commenced its N/S O/S	R:
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value: \$ 4 7/c	Fron! Rear O
IDAC Accident Rport: Consistent?: Yes or No ,	R/Bal mm R/Bal.
GIA / PR Seen: Consistent? : Yes or No	JBal. 6 mm L/Bal. 0 mm
Est. Repairs: OF days Res.: Yes or No	D.O.A. 26/10/20 D.O.I. 28/10/2020
Lum Sum: 20 % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	es. of Damages: Fit Rear / O/S / N/S / U/C / Rooftop or
Date:Person Contacted: Vehicle: IN / OUT	The UIO Los
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
	7. Apr. 32
LUMP SUM \$11550, 7DAYS	
RED: 17,778.50; 60%	
RED. 17,778.50, 60%	
Date/Time, File Pass to?	
Days	Of Repair: 7
Cute/Time, File Return to?	rvey No. of Trip: Survey Fee:
Add Fee:	Transportative
, Add 166:	: Site insp (\$)_s-Rs_si
Report Format :	: Interview (\$) Factor
Lump Sum / I.B.I: (S	Tech Invs (\$). Others
1	Weekend (\$
	IQTAL

> Back to One Motoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	762K
Vehicle Details	
Vehicle No.:	YP1980J
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Oct 2020
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEB21ER4SDEB (CBU)
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	4P10C05638
Chassis No.:	FEB21EA20365
Maximum Power Output:	_
Open Market Value:	\$33,514.00
Original Registration Date:	08 Apr 2016
First Registration Date:	08 Apr 2016
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$1,676.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	07 Apr 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$38,414.00
COE Rebate Amount:	\$20,913.00
Total Rebate Amount:	\$20,913.00

The information contained herein is correct as at 28 Oct 2020

ОК

FALCON-AIR AUTO SERVICES PTE LTD CO. REG. No.: 1995-01140-D

26/10/2020

UNKNOWN

FEB21EA20365

Fax: 62564318

Not Nothonia

Benny After Pains

YES

Vehicle Reg. Date: 08/04/2016

Ref. No:

Date of Loss:

Party At Fault:

Driveable?

Third Party

Chassis No:

Involved?



INSURER:

Lonpac Insurance Bhd (HQ)

PARTICULARS	OF	CLAIM
Claim Type:		OD (

OD (OWN DAMAGE)

Policy No:

Z/20/VC06/107022 YP1980J Vehicle Reg. No.:

Driver Age/Info:

TP Injury Involved?

NO

40 / MALE

HP CONSTRUCTION &

Insured/Claimant:

ENGINEERING PTE LTD RAMASAMY VENKATESAN

Make/Model:

Driver:

MITSUBISHI CANTER, 3.0 D

FEB21ER4SDEB (CBU) (M)

Vehicle Colour:

WHITE

Engine No:

4P10C05638

12 Fday

1 KM Odometer:

Paint Type:

Total Loss?

Est. Duration of Repair

(day)

Description of

REFER TO POLICE REPORT.

Accident/Loss

Remarks:

VEHICLE IS IN W/SHOP. PLEASE ARRANGE FOR VEHICLE SURVEY.

THANK YOU.

Present Location:

FALCON-AIR AUTO SERVICES PTE LTD (SIN MING)

COST OF CLAIMS		Amount
		21,548.50
Parts Miscellaneous Items		0.00
Labour		7,780.00
Paintwork Labour		0.00
Towing		0.00
	Gross Total (S\$)	29,328.50
	+ GST 7.00% (S\$)	2,053.00
	Nett Amount (S\$)	31,381.50

This claim is handled by: JOSHUA NG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source:

(Last Synchronised: 28 Oct 2020)

Parts:

MITSUBISHI CANTER 3.0 D FEB21ER4SDEB (CBU) (M) (Model not available in

database)

Labour:

Repairer's (Price-denominated Standard List)

Validity:

Print Code: Falcon-Air Auto Services Pte Ltd/YP1980J/28/10/2020 12:53 These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

1 2 3 4 5 5	1 1 10 2 1	Part No.	*Front Windscreen Glass Rubber *Front Wiper Garnish	M	0.00	0.00	*250.00 F	_
2 3 4 5 5 7	1 10 2 1		*Front Wiper Garnish					
3 4 5 6 7	10 2 1				0.00	0.00	*390.00 F	7
4 5 6 7	2				0	0.00	*40.00 FS	7
5 6 7	1		*Front Wiper Garnish Clip	Msim	0.00	0.00	*620.00 F	-
6 7			*Front Wing Mirror Garnish *LH Front Wing Mirror (Small)		0.00	0.00	17 *52.00 F	
7			*Front Panel	B	0.00	0.00	*1,350.00 F	
	4		*Front Panel Emblem (FUSO)	Ma		0.00	*105.00 F	
0	1		*Front Panel Body Sealant	p.	r o	0.00	*80.00 FS	×
8			*Radiator Grille	Bn	0.00	0.00	*750.00 F	
9	1		*Radiator Grille Logo	Na	0.00	0.00	*68.00 F	
10	10		*Radiator Grille Clip	n	0	0.00	*40.00 FS	
11 12	2		*Headlamp	Mugen	0.00	0.00	*840.00 F	
	2		*Front Side Lamp	NIS Br	0.00	0.00	*400.00 F	4
13 14	2		*Front Signal Lamp	MI Br	0.00	0.00	*560.00 F	4
	1		*Front Bumper	Ry	0.00	0.00	*750.00 F	_
15 16	2		*Front Bumper Bracket	ols A	0.00	0.00	*330.00 F	
17	2		*Front Bumper Side Garnish	MISDAIL	0.00	0.00	300.001	4
18	1		*Front Number Plate	By	0	0.00	*45.00 FS	25.
	1		*Front Cabin Crossmember		0.00	0.00	*750.00 F	2
19 20	2		*Front Cabin Crossmember Bush	Ma	0.00	0.00	*360.00 F	~
20	1		*Dashboard	Sn	0.00	0.00	*1,900.00 F	X
	1		*LH Front Dashboard Lower Cover	1	0.00	0.00	*530.00 F	X
-	1		*Air Con Condenser Assembly (small) w/fan	m	0.00	0.00	*1,050.00 F	*
	1		*Air Con Evaporator Unit		0.00	0.00	*2,500.00 F	7
			*Air Con Blower Unit		0.00	0.00	*2,450.00 F	1
-	1		*Air Con Suction Hose		0.00	0.00	*380.00 F	7
	1		*Air Con Discharge Hose	************	0.00	0.00	*370.00 F	7
	1		*Air Con Liquid Pipe		0.00	0.00	*380.00 F	7
	1				0.00	0.00	*525.00 F	7
	1		*Brake Pipe		0.00	0.00	*80.00 FS	7
) 2			*Brake Fluid	C.	0.00		THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	
2			*Horn	<u>'</u>	0.00	0.00	*250.00 F	_X
Franc	thise par	rt. S=SpcNett		Total (S\$)			19 775 00	
			+ Margin on L,N Items 1	A 1800 CONTROL OF THE REAL PROPERTY.			18,775.00 2,773.50	
			+ margin on L,N items i	J.00 /6 (Ja)			2,113.50	
			Total	Parts (S\$)			21,548.50	

Falcon-Air Auto Services Pte Ltd/YP1980J/28/10/2020 12:53. Not valid without Reference section. Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

No	Particulars	Lab.Type		Amount	
Labo	our Items	New		50.00 f	7201
1	To focus headlamp	New		50.00	2.
2	To check wiring	New		120.00	800
3	To remove/refix front windscreen	New		480.00	2 301
4	To remove/refix dashboard to facilitate repairs			150.00	1001
5	To remove/refix air con condenser, pipe, etc, to vacuum and top up air ogas To remove/replace evaporator and blower unit	New	na	400.00 350.00	
6	To remove/refix inner trims, seats, garnish, etc to facilitate repairs	New		300.00	301
7	To remove/retix inner trillis, seats, garrish, etc to	New	nn		
8	To replace brake pipe and to bleed air To crane cabin to facilitate repairs and to fix back	New		600.00	-
9		New		280.00	
10	To straighten chassis frame	New			
11	To scan and clear fault code	-weld New		2,400.00	1000
12	To scan and clear rault code To remove necessary parts to cut-out outer panel, repair inner panel, re outer panel and replacement of parts	New		1,800.00	9001
13	To putty and spray paint on accident dfamage area Gross	Labour Cost (S\$)		7,780.00	
				-	

Falcon-Air Auto Services Pte Ltd/YP1980J/28/10/2020 12:53. Not valid without Reference section. Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

FALCON-AIR AUTO SERVICES PTE LTD (a subsidiary of Falcon-Air Holdings Pte Ltd)

Head Office: Bik 176 Sin Ming Drive #01-06/07/13, #05-17 Sin Ming Autocare S(575721) Tel: 6452-0880 / 6458-0880 Fax: 6454-7862 Branches: Tampines St 93 Bik 9006 #01-200 S(528840) Tel: 6789-7997 Fax: 6788-7997 No 8 Pandan Loop S(128226) Tel: 6779-5665 Fax: 6779-1110 Website: www.falconair.com.sg Email: email@falconair.com.sg

> 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:

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRclaim&fuseaction=ge... 28/10/2020

SINGAPORE ACCIDENT STATEMENT

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Direct.</u>

 3. Inhormation provided must be as <u>truthful and accurate</u> as possible. Any willul misrepresentation or witholding of material facts may allow insurance companies.

 3. Inhormation provided must be as <u>truthful and accurate</u> as possible. Any willul misrepresentation or witholding of material facts may allow insurance companies.

 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 <u>investigation</u>.

 6. This report will be forwarded by the negures of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for the sport 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 GLOCIENTS
Date Of Report	27/10/2020 13:32
Date Of Accident	26/10/2020 18:25
Exact I ocation Of Accident	ALONG SG. KADUT STREET 5
County (Ctate of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YP1980J
Insured/Policyholder	TON & ENGINEERING PTE LTD
Name Of Registered Owner	H P CONSTRUCTION & ENGINEERING
Co Reg No	1XXXXX/625 1XXXXX/625
Email Address	VIOLE LEGISCON CONTRACTOR OF THE PROPERTY OF T
Mobile Phone No	00000 65471073
Alternative Phone No	OFFICE-BOTH 1010
Vehicle Particulars	
Manufacturer	MITSUBISHI CANTER-3.0 D FEB21ER4SDEB (CBU) (M)

time of acc	Exact Purpo
ident	ose for which ve
	hicle was being
	g used at W
	ORK

•	Are	
	Are you c	
a single wahicle	claiming	
vehicle's	under your o	
`	입	
	OWN	
	own insurance p	
	olicy	
	YES	

N.C	Fleet Policy
COMPACHENCIAL	Type Of Coverage
COMPREHENSIVE	Name of Insurance Company
- OND O INICI IDANIO	Insurance Company
COMINITIONS	Vehicle Category
COMMEDCIAL VEHI	If No, Please state action to be taken
	for repair to your verileie.

ACTION OFFICE	
Insurance Company	
Name of Insurance Company	LONPAC INSURANCE BHD
Name of moderation over 1	
Type Of Coverage	COMTREHENDIVE
Eleet Policy	NO
10001 0110)	7/20/VC06/107022
Policy Number	ZIZOI V COOI TO LOCK
Cover Note Number	

Policy Number Cover Note Number	Z/20/VC06/107022
Driver	
Name of Driver	RAMASAMY VENKATESAN
Passport No/FIN	GXXXX260M
Date Of Birth	17/05/1980
Occupation	OUTDOOR
Date Of Driving Pass	29/07/2004
Driving Experience	16 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91406006
Fay Number	

Contact Number EMail Address

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 repudiate policy liability. 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.
- 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 fee the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will fee the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will fee the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will fee the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will fee the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will fee the GIA Records Management Centre established by the GIA Records Management Ce
- 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. archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

A	C	C	D	3	V	T.	3	Α	П	Ξ١	4	V	Г
_ ^	v	•		1	v		- 4	į		_	•		

27/10/2020 13:32 Date Of Report 26/10/2020 18:25 **Date Of Accident**

ALONG SG. KADUT STREET 5 **Exact Location Of Accident**

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

YP1980J Vehicle Registration Number

Insured/Policyholder

H P CONSTRUCTION & ENGINEERING PTE LTD Name Of Registered Owner

1XXXXX762K Co Reg No

VIOLETLENG@HPCONSTN.COM.SG **Email Address**

Mobile Phone No

OFFICE-65471973 Alternative Phone No

Vehicle Particulars

MITSUBISHI Manufacturer

CANTER-3.0 D FEB21ER4SDEB (CBU) (M) Model

Exact Purpose for which vehicle was being used at WORK

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken

COMMERCIAL VEHICLE Vehicle Category

Insurance Company

LONPAC INSURANCE BHD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

Fleet Policy

Z/20/VC06/107022 Policy Number

Cover Note Number

Driver

RAMASAMY VENKATESAN Name of Driver

GXXXX260M Passport No/FIN 17/05/1980 Date Of Birth **OUTDOOR** Occupation 29/07/2004 Date Of Driving Pass

16 YEARS AND 2 MONTHS **Driving Experience**

MALE Gender

(LOCAL) +65-91406006 Mobile Number

Fax Number Contact Number

NOEMAIL **FMail Address**

Page 1 of 24

Sketch Plan Pg. 1

	0 2020 Time: (8:25 eh B: <u>G00 3355 Y</u> No of pax:	. M. 10 Ca. Ke	dut St 5
Date of accident: 26/1	0 2020 Time: 18:25	Location: NCOVO Rai	n/Wet
SKETCH PLAN	eh B: <u>G&b 3355Y</u> No of pax: _	Weather Cicary	
	truct is		
DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT		
Refer to point			
Claim OD/TP at Falco Remarks: Please forward My workshop: Email address: & myself: Email address:	on-Air Claim OD/TP at a copy of my efile accident report t	3-3-3-12-12-12-12-12-12-12-12-12-12-12-12-12-	ting Only
Note: Please take note the you own policy. Kindly che	at your insurer have 14 days timefra ck with your own insurer for more	me for you to submit own damag information.	e claim under
ECLARATION We declare the loregoing partic	ulars are true in every respect.	(4170)	ERV
A DECIME HIS TOLEROUS DALIC	the many respective	SI MIII	
olicyholder Senature ate & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Person Name:	nel's Signature