ASS. REC. BY: REF: MSG/	2 - 12 20 14
enneth	20012098 1Ky
From:	ASSIGNMENT SMS 6104R Yr Regn: 03,20
Estimated Cost:	
OD LIP WS I TP RES / OD RES / EVA / INV / MV	Type: M.Car/ M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
To Inspect Vehicle No:	Truck/Trailer or Attack cc 1193
	Make: //// // // //
of Markshop m/s Marshop m/s	Sp.Reading 6307 T/Radio: Insured / Std / NI / NA
Insured:	Footblo
Policy No.	CNO: MMB STA13AKIA 003405
Claims No.	Gen. Cond: good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 185/55R15
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS JOUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM! /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value:	Eron! Rear
IDAC Accident Rport: Consistent?: Yes or No	R/Bal. 7 mm R/Bal. 5 mm
GIA / PR Sean: Consistent? : Yes or No	UBal. 9 mm UBal. 9 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 3/11/20 D.O.I. 5/11/2020
Lum Sum: /-B-/ % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear I O/S I N/S I U/C I Rooftop or
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	<u></u>
h #2000 Oders and 7	2440.00.400/
lump sum \$8200, 8days red 7	140.80; 46%
Onto/Terro, File Pass to? : Prell. Report Da	ays Of Repair: 8
Cuta/Time, File Return 10?	
Add Fee:	: Site Insp (\$)_s - Rssi
·	Intendeur /S
eport Format :	Tech love (\$
ump Sum / I.B.I: (S	Weekend (\$
	ICTAL

Massive Trading & Auto
Blk 5038 #01-405 Ang Mo Kio Industrial Pk 2 Singapore 569541

H/P 91082728

Fax: 64816131

Tan Wee Shen Blk 211B Punggol Walk #11-629 Singapore 822211

Not rown.
Mesony Bepains

Vehicle No: SMS 6104R : Mitsubishi Attrage Make

Year : 2019

(A)				Unit Price	Amount
Qty	Description				
Estimate (Cost Of Repair			0	
				14	\$828.00
1 pc	Rear boot lid			\$95.00	\$190.00 X
2 pcs	Rear boot lid hinge			NIP	\$285.00 X
1 pc	Rear boot lid inner insulat	or		n	/ \$185.00 -
1 pc	Rear boot lid inner lock				\$175.00
1 pc	Rear boot lid outer lock				\$187.00
1 pc	Rear boot lid lock sensor			way	\$286.00
1 pc	Rear boot lid chrome han	ile _		Ma	\$48.00 -
1 pc	Rear boot lid emblem " Lo	go "		ne	\$55.00
1 pc	Rear boot lid emblem " At	trage "		ne	\$48.00
1 pc	Rear boot lid emblem " Mi	vec "		nilla	\$185.00
1 pc	Rear boot rubber			Ry	\$452.00
1 pc	Rear end panel			nalla	\$172.00
1 pc	Rear end panel inner garn	ish			\$125.00
1 pc	Rear end panel air duct				\$136.00
1 pc	Rear end panel air duct ou	iter cover		n	\$1,050.00 ×
1 pc	Rear spare tyre panel			n	\$305.00 %
1 pc	Rear o/s spare tyre side p	anel		cm	\$255.00
1 pc	Spare tyre board			\$296.00 CM	\$592.00
2 pcs	Rear tail-lamp assy		Olip	\$155.00	\$310.00 4
2 pcs	Rear tail-lamp panel			\$155.00 By	\$768.00
1 pc	Rear bumper			NIP	\$155.00 X
1 pc	Rear bumper centre beam			1000000	
2 pcs	Rear bumper reflector		din.	\$85.00	\$170.00
2 pcs	Rear bumper side retainer		2	y \$65.00	\$130.00
2 pcs	Rear fender	•	in nay	\$825.00 m	\$1,650.00
1 pc	Rear windscreen moulding		olsp, Bulnay Petern	14	
2 pcs	Rear fender inner trim		Hesom	W-120.00	\$850.00
1 pc	Rear exhaust silencer				\$685.00 X
to Income		LKK Auto Consultants hence notify			\$10,362.00
	187	the Repairer of the following:			\$1,036.20
		To resurvey before/after spray painting	I.	balance c/f	\$9,325.80
		 To display damaged part(s) during resurvey 			
		 Parts prices are subject to confirmation 			
	- 1	 Third party survey is on a "Without Prejudice" b 	asis		
	- 1	No illegal modification(s) is allowed			
		 Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Com 			
		Acknowledged by Repairer			
		Signature:			
		Date:			

\$9,325.80 balance b/f

S. Nett Item

1 pc	Rear bumper lower spoiler	Bullu \$750.00 X
1 pc	Rear spare tyre panel black insulator	Ma \$45.00
1 pc	Rear windscreen sealant	nd \$200.00 -
1 set	Rear reverse sensor	€ \$280.00 X
1 pc	Rear reverse camera	\$1,475.00

\$1,500.00 14001
\$1,500.00 13001
\$45.00 201
\$45.00 227
\$120.00
\$120.00 601
\$120.00
\$100.00
\$100.00
\$150.00 X
\$180.00 1206
\$15,340.80

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 3. Information provided must be as <u>truthful</u> and <u>accurate</u> 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.

 5. Any false reporting

- 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.

By the lodgement of this report to the insurers, you hereby cor aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	04/11/2020 14:26
Date Of Accident	03/11/2020 08:25
Exact Location Of Accident	CTE TOWARDS CITY
Country/State of Loss	SINGAPORE
THE TAXABLE PROPERTY.	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMS6104R
Insured/Policyholder	The state of the s
Name Of Registered Owner	TAN WEE SHEN
NRIC No	SXXXX688H
Email Address	EASTERNER704@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-91168318
Alternative Phone No	OTHERS-97725847
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	ATTRAGE-1.2 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P10338408R00
Cover Note Number	04/03/2020 - 03/09/2021
Driver	
Name of Driver	TEH YUFEN
NRIC No	SXXXX040J
Date Of Birth	11/11/1984
Occupation	INDOOR
Date Of Driving Pass	13/02/2004
Driving Experience	16 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97725847
Fax Number	
Contact Number	OTHERS-91168318
EMail Address	TEHYUFEN@GMAIL.COM

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Address

211B PUNGGOL WALK Postcode

#11-629

SPOUSE

Was driver an employee of the Insured's Company NO 822211 If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

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

NO

Was any body injured in the Accident?

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

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE SKETCH PLAN BY DRIVER

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

TRYING TO RETRIEVE

DETAILS OF OTHER VEHICLE PROPERTY 1

Was there any audio recorded?

Vehicle Registration Number

SMA7072L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

SEAH HEE SIANG CHRISTOPHER

NRIC/Passport Number

SXXXX527D

Contact Number

81003538

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 19

Sketch Plan Pg. 2

Date of accident: 3	11/20 Time: 0825 Location: CTE taxads City
My Vehicle A: _SMS	610HR Vehicle B: SMA 7072L Vehicle C:
SKETCH PLAN	
	0
	
	(m)
Veh A: SMS GION	
Let B: SMA 707	2 L
DESCRIBE CIRCUMSTANC	TES OF THE ACCIDENT
(Dn 3/11/20	20 @ ord 082xhs, I was travelling along CTE towards
	A A D - II A POST RULE TO TRUNKS I COMPANY
1 . 1	all als and populating come to
of my victory	IC and icalogia that were
into my vehi	acle rear portion.
Par	ticular of Veh B = Mr Seah Hee Siang, (hristopher 1/2:58124527)
	1/2:581248270
Claim OD/TP at Ah	Lim Motor Claim QB/TP at other workshop Reporting Only
Remarks : Please forwar	rd a copy of my efile accident report to :
My workshop : Moss	ive Tracing & Auto
& myself :	Wella Color
	that your insurer have 14 days timeframe for you to submit own damage claim under
you own policy. Kindly c	heck with your own insurer for more information.
DECLARATION	(IM A)
I/IVe declare the foregoing par	ticulars are true in every respect.
	MAN. (The Asia)
religitioider's Signature Date & Time:	Orner's Signiture (If driver is not the coloryholder) Reporting Certific Personner's Signature Name:
are a time.	Oute & Time NatiC/FIN No.

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