

ASS. REC. BY:

REF:

mkg/21000968/KP

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Yee Ave

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

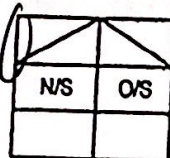
(Client's Record)

Make of Veh: _____

1:30pm

(Policy Condition)

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



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 NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP / 24 HRS

Date: 04/24 Person Contacted: _____

Vehicle: IN / OUT

Veh No: YN 362K Yr Regn: 03, 09

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

Truck / Trailer or TruckMake: Isuzu NHR c.c. 2999Colour: Blue / Red A/C: Insured / Std / NI / NASp. Reading: 406048 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JAA NHR 85 E . 97100032Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: NH / S/Rlm / STD A/Rlm orTyre Size: F: 195R15X8R: (D)

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

TOYO / YOKO or

Front

R/Bal. P mmL/Bal. P mmD.O.A. 18/1/21

Rear

R/Bal. 44 mmL/Bal. 44 mmD.O.I. 26/1/2021

Survey held at

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

N/S Frt

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

Date / Time Action / Instruction

We accept the amount \$1850 before GST 3 working days
red: 9570.7;83%

Date/Time, File Pass to?



: Prell. Report



: Final Report

Date/Time, File Return to?

Days Of Repair: 3

Resurvey No. of Trip: _____

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

Survey Fee:

Transportation:

S - RS. \$

Fees

Others

Report Format:

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



YEE AUTO PTE LTD

160 Sin Ming Drive #02-17/#07-12 Sin Ming AutoCity Singapore 575722

Tel: 6457 5768 Fax: 6252 8459 Mobile: 9687 4031

Email: yeeautopteltd@gmail.com

Registration No.: 201719251W GST No: 201719251W

M/S: MSIG Insurance (Singapore) Pte Ltd

16 Raffles Quay

#24-01 Hong Leong Building

Singapore 048581

Estimate No: ES2100011

Date: 25 Jan 2021

Policy No:

Veh Reg No: YN362K

Make/Model: ISUZU NHR85AUE4A

Chassis No: JAANHR85E97100032

Engine No: 4JJ1774186

Reg. Date: 11/05/2009

ATTN: Motor Claim Department

Your Ref No: -

Claim Type: Third Party

Accident Date: 18/01/2021

TP Veh Reg No: FBQ3196K

Not Notified

1 Sup &

Primary After Paint

3 days

LKK Auto Consultants hence notify the Repairer of the following:

Estimate Repair Cost to Vehicle No: YN362K

Description	U/Price	Quantity	List Price	Amount
			<u>S\$</u>	<u>S\$</u>
Net Price				
1 FRONT TYRE 195R 15C - LH	400.00	1 PC	<i>Sm</i> 400.00	X
2 FRONT WHEEL RIM - LH	780.25	1 PC	<i>K</i> 780.25	X
			1,180.25	1,180.25
Spare Parts				
3 FRONT BUMPER	1,450.85	1 PC	<i>A</i> 1,450.85	X
4 HEAD LAMP - LH	725.10	1 PC	<i>Sm</i> 725.10	X
5 FRONT DOOR - LH	1,782.00	1 PC	<i>Ry</i> 1,782.00	✓
6 FRONT DOOR WEATHERSTRIP - LH	188.00	1 PC	<i>Sm</i> 188.00	X
7 FRONT DOOR CHECKER - LH	180.00	1 PC	<i>Sm</i> 180.00	X
8 FRONT DOOR REGULATOR GEAR - LH	267.20	1 PC	<i>Sm</i> 267.20	X
9 FRONT DOOR REGULATOR GEAR MOTOR - LH	403.00	1 PC	<i>Sm</i> 403.00	X
10 FRONT DOOR INNER TRIMBOARD - LH	689.60	1 PC	<i>Sm</i> 689.60	X
11 FRONT STEP PANEL - LH	380.15	1 PC	<i>Sm</i> 380.15	X
12 FRONT STEP GARNISH - LH	298.50	1 PC	<i>CM</i> 298.50	✓
13 FRONT DOOR LOCK - LH	420.15	1 PC	<i>K</i> 420.15	X
14 FRONT DOOR OUTER HANDLE - LH	220.85	1 PC	<i>Sm</i> 220.85	X
15 FRONT DOOR STICKER - LH	400.00	1 PC	<i>Sm</i> 400.00	1501n
16 FRONT DOOR OUTER MOULDING - LH	185.05	1 PC	<i>Sm</i> 185.05	✓
			7,590.45	7,590.45
Labour				
17 TO DISMANTLE & REPLACE DAMAGED PARTS, PANEL BEAT WHERE NECESSARY.	1,200.00	1 JOB	1,200.00	350/
18 TO PUTTY, APPLY PRIMER & SPRAY-PAINT ON THE AFFECTED PORTION.	1,000.00	1 JOB	1,000.00	400/
19 TO APPLY RUST- PROOFING ON REPAIRED, REPLACED PANEL.	180.00	1 JOB	180.00	30/
20 TO REMOVE/TRANSFER LH FRONT DOOR MECHANISMS.	150.00	1 JOB	150.00	60/
21 TO CHECK WIRING FUNCTIONS.	120.00	1 JOB	120.00	15/
			2,650.00	2,650.00

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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 Submission 19/01/2021 16:53 (SGT)
Date of Accident 18/01/2021 17:10 (SGT)
Exact Location of Accident Ang Mo Kio Ind Park 2, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN362K

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Rangoon Recovery Services
Company Reg No 5XXXX647L
Email Address christinehan8316@gmail.com
Mobile Phone No (Phone) +65-91160716
Alternative Phone No (Home) +65-91160716

VEHICLE PARTICULARS

Manufacturer Isuzu
Model Nhr85aue4a
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company Great Eastern
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number 2020-V0114479-VCV
Cover Note Number -

DRIVER

Name of Driver Tan Sau Hwa
NRIC No SXXXX027Z
Date Of Birth 06/06/1963
Occupation Outdoor

Date Of Driving Pass
 Driving experience
 Gender
 Mobile Number
 Alt. Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

25/06/1985
 35 YEARS AND 7 MONTHS
 Male
 (Phone) +65-91160716
 -
 christinehan8316@gmail.com
 Blk 128 Ang Mo Kio Ave 3 #11-1847
 -
 560128
 No
 Employee
 No
 -
 -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Side Swipe
 Weather Conditions Clear
 Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No
 Number of vehicles involved in the accident 2
 Was anybody injured in the Accident? Yes
 Was any injured conveyed to hospital by ambulance? No
 Was any other material or property damaged? Yes
 Number of Passengers (Including Driver) 1
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

DETAILS OF POLICE ACTION

Was the accident reported to the police? Yes
 Police Station Name Bishan Neighbourhood Police Centre
 Police Station Phone No (Phone) +65-18005529999
 Alt. Police Station Phone No (Fax) +65-65561905
 Police Station Address 20 Bishan Street 23 Singapore 579757
 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

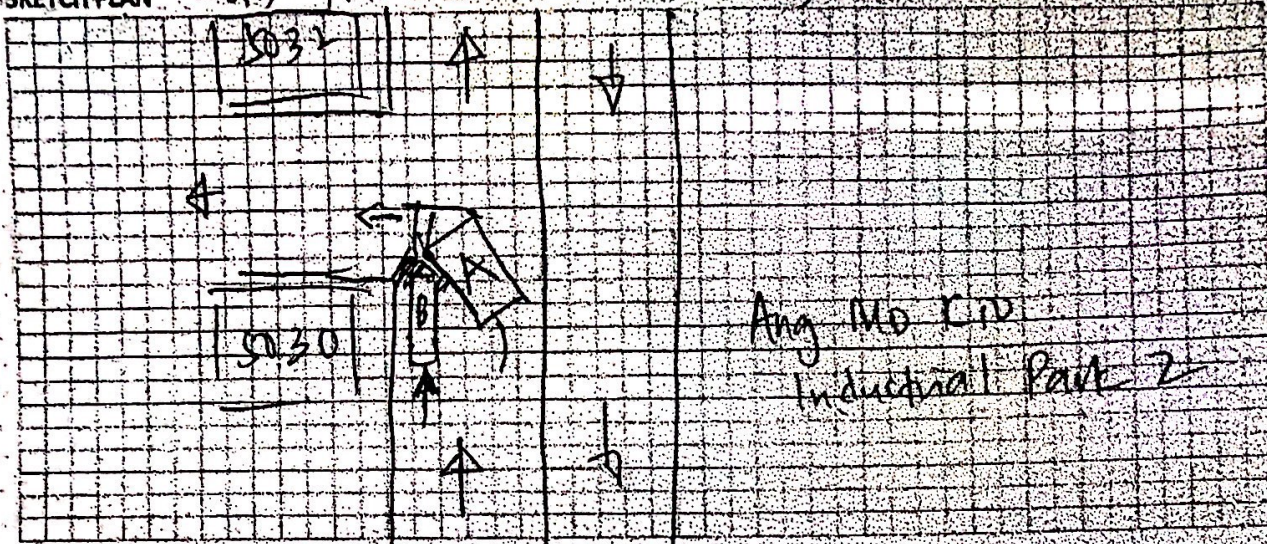
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBQ3196K
 Vehicle Manufacturer Yamaha
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Motorcycle
 Name of Driver -
 Contact Number -

SKETCH PLAN

(A) YN 362 K

(B) FBO 3196 K



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

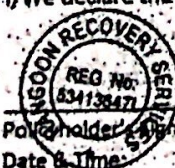
Refer to Police Report

Police Report No: T/20210119/2022

* Kindly send my GIA Report to me and my
workshop Yee Auto Pte Ltd Yeeautopte11do
great.com

DECLARATION

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



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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No: