

ASS. REG. BY:

REF:

CL4/LPC 21001353/Rip3

B
754A

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: GBE 299SRat Workshop m/s WAT HONKof 38, TONGA WAY RD EAST #01-57Insured: LOWPAC

Policy No. _____

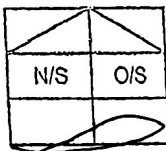
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 38K

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

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

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: GBE 299SR Yr Regn: 2015/01

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

Truck / Trailer or

Make: NISSAN NV200 1.5 LMT c.c. 1461Colour: GREEN A/C: Insured / Std / NI / NASp. Reading: 158939 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VSKYBAM2020110555

Gen. Cond: Good / Fair / Poor / Burnt

Steering: in order / Jammed / Leaked / Burnt orBrake: in order / Jammed / Leaked / Burnt orMod: Nil / S/Rim / STD A/Rim orTyre Size: F: 185/65R14R: 7

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

TOYO / YOKO or Falken

Front: _____ Rear: _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 27/01/2021 D.O.I. 01/02/2021Survey held at WAT HONKDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

Repair 1 unit = 20K

Date/Time, File Pass to?



: Preli. Report

1)

Date/Time, File Return to?



: Final Report

2)

Rep. Format: _____

Lump Sum / L&P (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:



: Site Insp (\$ _____)



: Interview (\$ _____)



: Tech. Invs (\$ _____)



: Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS. \$ _____

Photos

Others

TOTAL



Wah Hong Motors & Credit Pte Ltd

Enterprise Hub 38 Toh Guan Road East #01-57 S(608581)

Email: motor@wahhong.sg

(199806235M)

Vehicle No. GBE2995R NISSAN NV200 1.5

Page No. 1

| QTY | DESCRIPTION | CONDITION | REPAIRER'S ESTIMATE(\$\$) | SURVEYOR'S ADJUSTMENT |
|---------------------------|---|-----------|---------------------------|-----------------------|
| PARTS (LIST ITEMS) | | | | |
| 1 | Rear door LH <i>bu✓</i> | | 1180.00 | |
| 1 | Rear door weatherstrip LH <i>cut✓</i> | | 85.00 | |
| 1 | Rear door LH emblem "NV 200" <i>re✓</i> | | 75.00 | |
| 1 | Rear door LH logo badge <i>re✓</i> | | 60.00 | |
| 1 | Rear door RH <i>bt✓</i> | | 950.00 | |
| 1 | Rear door weatherstrip RH <i>cut✓</i> | | 85.00 | |
| 1 | Rear door RH emblem "dCi" <i>re✓</i> | | 85.00 | |
| 2 | Rear door LH hinge upper and lower @2*\$105 <i>bt✓/PL (lower)</i> | | 210.00 | |
| 2 | Rear door RH hinge upper and lower @2*\$105 <i>bt✓/PL (lower)</i> | | 210.00 | |
| 1 | Rear door LH center garnish <i>?</i> | | 210.00 | |
| 1 | Rear bumper <i>de✓</i> | | 490.00 | |
| 1 | Rear bumper side retainer LH/RH @2*\$30 <i>LH-new RH-X</i> | | 60.00 | |
| 1 | Tail lamp RH/LH @2*140 <i>LH-new RH-X</i> | | 280.00 | |
| 1 | Rear door LH top brake lamp <i>X</i> | | 180.00 | |
| 1 | Rear door LH lock <i>bt✓</i> | | 105.00 | |
| 1 | End panel top garnish <i>de✓</i> | | 75.00 | |
| Part Items Total: | | | 4340.00 | |
| | | | 15% 651.00 | |
| | | | 4991.00 | |
| SPECIAL NETT ITEMS | | | | |
| 1 | Rear bumper clips <i>re✓</i> | | 35.00 | |
| 1 | 70km/h decal sticker <i>re✓</i> | | 15.00 10 | |
| 1 | 6 pax decal sticker <i>re✓</i> | | 15.00 10 | |
| 1 | Car plate with holder <i>X</i> | | 35.00 | <i>X</i> |
| 1 | Rear reverse sensor <i>X</i> | | 200.00 | <i>X</i> |
| 1 | Rear wiper <i>X</i> | | 30.00 | <i>X</i> |
| 1 | Rear windscreen solar film LH/RH <i>X</i> | | 300.00 | <i>X</i> |
| SN Items Total: | | | 630.00 | |
| Total Parts | | | 5621.00 | |



Wah Hong Motors & Credit Pte Ltd

Enterprise Hub 38 Toh Guan Road East #01-57 S(608581)

Email: motor@wahhong.sg

(199806235M)

Vehicle No. GBE2995R NISSAN NV200 1.5

Page No. 2

| S/N | DESCRIPTION | REPAIRER'S ESTIMATE (S\$) | SURVEYOR'S ADJUSTMENT |
|-------------------------|---|---------------------------------|--------------------------|
| | LABOUR | | |
| 1 | To remove the affected parts & fittings to commence repairs; panel beat & reshape the affected areas and replace the damaged parts and components | 800.00 | 600 |
| 2 | To supply paint materials, expandable items & putty, respray paint on parts replaced & repaired | 600.00 | |
| 3 | To perform anti-rust treatment on affected areas | 40.00 | |
| 4 | To remove and refix/replace wiring system, reverse sensor at accident damaged area and check for all electrical proper function | 100.00 | 60 |
| 5 | To carried out remove and refix rear windscreen RH | 100.00 | 60 |
| 6 | To carried out remove and refix rear windscreen LH | 100.00 | 60 |
| Labour Total : | | 1740.00 | |
| TOTAL (PARTS & LABOUR): | | 7361.00 | |

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:

Farne
Ap 90010068
6 days
4/8
01/02/2021 @1500
Resy after repair

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 | 28/01/2021 11:52 (SGT) |
| Date of Accident | 27/01/2021 11:15 (SGT) |
| Exact Location of Accident | Near 151 Sembawang Rd, Singapore |
| Additional Location Information | MANDAI AVE TOWARDS YISHUN AVE 1 |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--|
| Vehicle Registration Number | GBE2995R |
| INSURED/POLICYHOLDER | |
| Is company? | Yes |
| Name Of Registered Owner | TECHSON ELECTRICAL ENGINEERING AND CONSULTING SERVICES |
| Company Reg No | 5XXXX754A |
| Email Address | LINGS_BOUTIQUE@HOTMAIL.COM |
| Mobile Phone No | (Phone) +65-91717609 |
| Alternative Phone No | +65-96633267 |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Nissan |
| Model | Nv200 |
| 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 | EQ |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | DMCPHQ20-003800 |
| Cover Note Number | - |

DRIVER

| | |
|----------------|---------------|
| Name of Driver | LOH SIEW TUCK |
| NRIC No | SXXXX615Z |
| Date Of Birth | 08/01/1949 |

| | |
|--|----------------------------|
| Occupation | Outdoor |
| Date Of Driving Pass | 05/12/1978 |
| Driving experience | 42 YEARS AND 1 MONTH |
| Gender | Male |
| Mobile Number | (Phone) +65-91717609 |
| Alt. Phone Number | - |
| Email Address | LINGS_BOUTIQUE@HOTMAIL.COM |
| Address | BLK 113 JALAN BUKIT MERAH |
| Address complement | #04-1726 |
| Postcode | 160113 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Employee |
| Does Driver Own Other Vehicles? | No |
| Vehicle Registration Number of Other Vehicle Owned by Driver | - |
| Insurance Company of Other Vehicle Owned by Driver | - |

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 the accident? | No |
| Number of vehicles involved in the accident | 2 |
| Was anybody injured in the Accident? | No |
| Was any injured conveyed to hospital by ambulance? | - |
| 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? | No |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE SKETCH PLAN FOR ACCIDENT DETAILS.

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

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | XE4716G |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Commercial vehicle |
| Name of Driver | RAMAIYAN DESINGU |
| Contact Number | (Phone) +65-98109052 |
| Address | - |
| Address complement | - |
| Postcode | - |

SKETCH PLAN

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. The 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.
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) of:

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain 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 insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/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 Personal 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 or more of the above Purposes.



[Handwritten Signature]

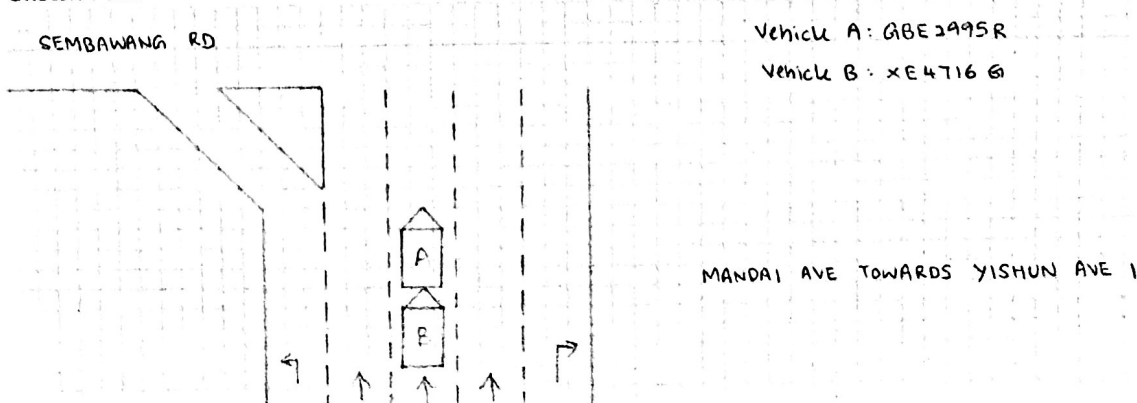


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 27/1/2021 at about 11.15am, I was driving my vehicle A (GBE2995 R) along Mandai Ave towards Yishun Ave 1. When the traffic light turn green, the vehicles in front of me started to move and I also followed. Suddenly, I felt an impact from behind which the vehicle B (XE4716G) hit on my rear vehicle. We exchange particulars and took photo of the vehicles

Declaration

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



Policyholder's Signature / Date & Time

[Handwritten Signature]

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



Witnessed by Reporting Centre Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|----------------|----------|
| Owner ID Type: | Business |
| Owner ID: | 754A |

| | |
|-------------------------------|---|
| Vehicle No.: | GBE2995R |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 02 Feb 2021 |
| Vehicle Make: | NISSAN |
| Vehicle Model: | NV200 1.5L MT ABS AIRBAG 2WD 6DR EURO 5 |
| Primary Colour: | White |
| Manufacturing Year: | 2015 |
| Engine No.: | K9KC400D054828 |
| Chassis No.: | VSKYBAM20Z0110555 |
| Maximum Power Output: | - |
| Open Market Value: | \$17,599.00 |
| Original Registration Date: | 21 Oct 2015 |
| First Registration Date: | 21 Oct 2015 |
| Transfer Count: | 1 |
| Actual ARF Paid: | \$980.00 |

Enquire PARF Rebate Amount

| | |
|-------------------------------|--------|
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |

Enquire COE Expiry Date

| | |
|----------------------|-------------------------|
| COE Expiry Date: | 20 Oct 2025 |
| COE Category: | C - Goods Vehicle & Bus |
| COE Period(Years): | 10 |
| PQP Paid: | \$37,912.00 |
| COE Rebate Amount: | \$17,875.00 |
| Total Rebate Amount: | \$17,875.00 |

The information contained herein is correct as at 02 Feb 2021

OK

White

mart.com/used_cars/info.php?ID=965490&DL=3393

Nissan NV200 1.5M

Overview

Financial

Accessories

Similar

Research

Photos

Map



YOUR TRUSTED ADVISOR

| | | | |
|-----------------|---|-----------------|--|
| Price | \$38,800 | Fuel Type | Diesel |
| Depreciation ? | \$8,270 /yr View models with similar depre | Reg Date | 12-Oct-2015 (4yrs 8mths 9days COE left) |
| Mileage | N.A. | Manufactured ? | 2015 |
| Road Tax ? | N.A. | Transmission | Manual |
| Dereg Value ? | \$17,646 as of today (change) | OMV ? | \$19,599 |
| COE ? | \$37,621 | ARF ? | \$980 |
| Engine Cap | 1,461 cc | No. of Owners ? | 1 |
| Curb Weight ? | 1,320 kg | | |
| Type of Vehicle | Van | | |

Features

View specs of the Nissan NV200 (2011)

Ac

