

ASS. REC. BY:

REF:

CT2/ 21001775 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 \_\_\_\_\_

of \_\_\_\_\_

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

Policy No. \_\_\_\_\_

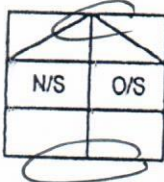
Claims No. SNM 21D 200677/CO2

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: \$ 60k

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

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

Est. Repairs: 23 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SLQ 6977K Yr Regn: 07.17

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

Truck / Trailer or \_\_\_\_\_

Make: Honda Shuttle C.C. 1496Colour: M. Silver Insured / Std / NI / NASp. Reading: 68244 T/Radio: Insured / Std / NI / NA

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

C/No: Gk8 1007749Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 185/60R15

R: \_\_\_\_\_

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

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

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 9 mm R/Bal. 7 mmL/Bal. 9 mm L/Bal. 7 mmD.O.A. 3/2/21 D.O.I. 8/2/2021

Survey held at \_\_\_\_\_

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or& 1st

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

Date / Time	Action / Instruction
1	1st Rptale \$35,902.00 Got BZ

26/11	1st Rpt \$22,000.00 Cchv 1/12/21 (Red \$26974.60, 55%)
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Date/Time, File Pass to?

15/12

1) 28/12 Final ☐ : Prell. Report

Date/Time, File Return to?

2)

Days Of Repair: 23Resurvey No. of Trip: 2

Survey Fee:

Transportation:

S + RS. \$

Fees

Others

TOTAL

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech Invs (\$)☐ : Weekend (\$)

Report Format :

Lump Sum / I.B.I. (\$)

MER-TP

22000





# 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 : China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road  
 #16-00 Springleaf Tower  
 Singapore 079909

Estimate No: ES2100016

Date: 04 Feb 2021

Policy No:

Veh Reg No: SLQ6977K

Make/Model: HONDA SHUTTLE 1.5G  
 CVT

Chassis No: GK81007749

Engine No: L15B3539067

Reg. Date: 19/07/2017

ATTN: Motor Claim Department

Your Ref No: -

Claim Type: Third Party

Accident Date: 03/02/2021

TP Veh Reg No: SMF4183T

*Not Authorized*

*L1 Reg 822,000/-  
 Preserving After Pain*

*23 days*

## Estimate Repair Cost to Vehicle No :SLQ6977K

Description	U/Price	Quantity	List Price	Amount
			SS	SS
<b>Net Price</b>				
1 FRONT NUMBER PLATE	60.00	1 PC	<i>CM</i> 60.00	<i>455n</i>
2 REAR NUMBER PLATE	60.00	1 PC	<i>CM</i> 60.00	<i>455n</i>
3 REAR WINDSCREEN SEALANT	60.00	1 PC	<i>nn</i> 60.00	<i>405n</i>
4 REVERSE SENSORS	300.00	1 PC	<i>nn</i> 300.00	<i>2005n</i>
5 REVERSE CAMERA	350.00	1 PC	<i>nn</i> 350.00	<i>X</i>
6 REAR WINDSCREEN SOLAR FILM	280.00	1 PC	<i>nn</i> 280.00	<i>X</i>
			1,110.00	1,110.00
<b>Spare Parts</b>				
7 AIRCON CONDENSER	937.00	1 PC	<i>BT</i> 937.00	<i>✓</i>
8 AIRCON FAN MOTOR	434.00	1 PC	<i>nn</i> 434.00	<i>X</i>
9 BRACE PANEL	117.00	1 PC	<i>nn</i> 117.00	<i>X</i>
10 FOG LAMP COVER - LH	145.50	1 PC	<i>nn</i> 145.50	<i>X</i>
11 FOG LAMP COVER - RH	145.50	1 PC	<i>nn</i> 145.50	<i>X</i>
12 FRONT BONNET	1,250.00	1 PC	<i>BT</i> 1,250.00	<i>✓</i>
13 FRONT BONNET HINGE - LH	85.50	1 PC	<i>nn</i> 85.50	<i>X</i>
14 FRONT BONNET HINGE - RH	85.50	1 PC	<i>nn</i> 85.50	<i>X</i>
15 FRONT BONNET INSULATOR	260.00	1 PC	<i>nn</i> 260.00	<i>X</i>
16 FRONT BONNET INSULATOR CLIPS	50.00	1 SET	<i>nn</i> 50.00	<i>X</i>
17 FRONT BONNET LOCK	165.00	1 PC	<i>nn</i> 165.00	<i>✓</i>
18 FRONT BONNET RUBBER	75.10	1 PC	<i>nn</i> 75.10	<i>✓</i>
19 FRONT BONNET STOPPER	20.00	2 PC	<i>nn</i> 40.00	<i>X</i>
20 FRONT BUMPER	1,115.60	1 PC	<i>nn</i> 1,115.60	<i>✓</i>
21 FRONT BUMPER BRACKET - LH	80.50	1 PC	<i>nn</i> 80.50	<i>X</i>
22 FRONT BUMPER BRACKET - RH	80.50	1 PC	<i>nn</i> 80.50	<i>X</i>
23 FRONT BUMPER CLIPS	60.00	1 SET	<i>nn</i> 60.00	<i>✓</i>
24 FRONT BUMPER GRILLE CENTRE	365.50	1 PC	<i>CM</i> 365.50	<i>nn</i>
25 FRONT BUMPER REINFORCEMENT	400.00	1 PC	<i>nn</i> 400.00	<i>nn</i>
26 FRONT BUMPER SIDE RETAINER - LH	75.00	1 PC	<i>nn</i> 75.00	<i>✓</i>
27 FRONT BUMPER SIDE RETAINER - RH	75.00	1 PC	<i>nn</i> 75.00	<i>✓</i>
28 FRONT BUMPER SPONGE - LH	32.50	1 PC	<i>nn</i> 32.50	<i>X</i>
29 FRONT LOGO	95.10	1 PC	<i>nn</i> 95.10	<i>✓</i>
30 FRONT BUMPER TOWING COVER - RH	48.50	1 PC	<i>nn</i> 48.50	<i>X</i>
31 FRONT FENDER - LH	490.20	1 PC	<i>nn</i> 490.20	<i>X</i>
32 FRONT FENDER - RH	490.20	1 PC	<i>nn</i> 490.20	<i>✓</i>
33 FRONT FENDER INNER SHIELD	195.10	1 SET	<i>nn</i> 195.10	<i>X</i>
34 FRONT FENDER INNER SHIELD CLIP - RH	50.00	1 SET	<i>nn</i> 50.00	<i>X</i>





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

Email: yeeautopteltd@gmail.com

Registration No.: 201719251W GST No: 201719251W

M/S : China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

ATTN: Motor Claim Department

Your Ref No: -

Claim Type: Third Party

Accident Date: 03/02/2021

TP Veh Reg No: SMF4183T

Estimate No: ES2100016

Date: 04 Feb 2021

Policy No:

Veh Reg No: SLQ6977K

Make/Model: HONDA SHUTTLE 1.5G CVT

Chassis No: GK81007749

Engine No: L15B3539067

Reg. Date: 19/07/2017

## Estimate Repair Cost to Vehicle No :SLQ6977K

Description	U/Price	Quantity	List Price	Amount
			SS	SS
35 FRONT GRILLE CHROME COVER	205.50	1 PC	CM 205.50	✓
36 FRONT GRILLE	299.00	1 PC	CM 299.00	✓
37 FRONT HEADLAMP LOWER BRACKET - LH	92.50	1 PC	B 92.50	✓
38 FRONT HEADLAMP LOWER BRACKET - RH	92.50	1 PC	R 92.50	✓
39 FRONT SUPPORT PANEL 631.20	807.10	1 PC	B 807.10	✓
40 FRONT SUPPORT PANEL TOP COVER	156.00	1 PC	Sn 156.00	X
41 FRONT SUPPORT PANELTOP COVER CLIP	40.00	1 SET	nn 40.00	X
42 HEAD LAMP - LH	1,875.10	1 PC	mjcM 1,875.10	✓
43 HEAD LAMP - RH	1,875.10	1 PC	mjcM 1,875.10	✓
44 HORN	65.00	1 PC	Sn 65.00	X
45 RADIATOR ASSY	950.10	1 PC	Pn 950.10	✓
46 RADIATOR FAN BLADE	65.00	1 PC	Sn 65.00	X
47 RADIATOR FAN COWLING	180.00	1 PC	Sn 180.00	X
48 RADIATOR FAN MOTOR	405.50	1 PC	Sn 405.50	X
49 RADIATOR TOP HOSE	58.00	1 PC	Sn 58.00	X
50 RADIATOR WATER COOLANT	50.00	1 PC	Nn 50.00	25sn
51 WASHING TANK	171.50	1 PC	Sn 171.50	X
52 REAR CHASSIS MEMBER -LH 780.50	950.80	1 PC	R 950.80	✓
53 REAR CHASSIS MEMBER -RH	950.80	1 PC	R 950.80	✓
54 REAR FENDER - LH	1,259.50	1 PC	R 1,259.50	X
55 REAR FENDER - RH 1011.90	1,259.50	1 PC	Rn 1,259.50	✓
56 REAR FENDER GLASS MOULDING - LH	89.20	1 PC	nn 89.20	X
57 REAR FENDER GLASS MOULDING - RH	89.20	1 PC	nn 89.20	✓
58 REAR FENDER GLASS SEALANT - LH	50.00	1 PC	nn 50.00	X
59 REAR FENDER GLASS SEALANT - RH	50.00	1 PC	nn 50.00	40sn
60 REAR TAILGATE ABSORBER - LH	220.50	1 PC	Pn 220.50	✓
61 REAR TAILGATE ABSORBER - RH	220.50	1 PC	Sn 220.50	✓
62 REAR TAILGATE LAMP - LH	460.50	1 PC	CM 460.50	✓
63 REAR TAILGATE LAMP - RH	460.50	1 PC	CM 460.50	✓
64 REAR FENDER LOWER INNER SHIELD - LH	150.00	1 PC	Sn 150.00	X
65 REAR FENDER LOWER INNER SHIELD - RH	150.00	1 PC	Sn 150.00	X
66 REAR FENDER INNER SHIELD CLIP - LH	40.00	1 SET	nn 40.00	X
67 REAR FENDER INNER SHIELD CLIP - RH	40.00	1 SET	nn 40.00	X
68 REAR FENDER INNER TRIMBOARD TOP - LH 312.10	415.10	1 SET	Pctm 415.10	✓
69 REAR FENDER INNER TRIMBOARD TOP - RH 312.10	415.10	1 SET	CM 415.10	✓
70 REAR AIR VENT - LH	60.50	1 PC	Sn 60.50	X
71 REAR BUMPER 1150.40	1,422.50	1 PC	R 1,422.50	✓
72 REAR BUMPER BRACKET - LH	98.10	1 PC	R 98.10	✓





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Singapore 079909

ATTN: Motor Claim Department

Your Ref No: -

Claim Type: Third Party

Accident Date: 03/02/2021

TP Veh Reg No: SMF4183T

Estimate No: ES2100016

Date: 04 Feb 2021

Policy No:

Veh Reg No: SLQ6977K

Make/Model: HONDA SHUTTLE 1.5G CVT

Chassis No: GK81007749

Engine No: L15B3539067

Reg. Date: 19/07/2017

## Estimate Repair Cost to Vehicle No :SLQ6977K

Description	U/Price	Quantity	List Price	Amount
			<u>SS</u>	<u>SS</u>
73 REAR BUMPER BRACKET - RH	98.10	1 PC	Bt 98.10	✓
74 REAR BUMPER CLIPS	40.00	1 SET	Me 40.00	✓
75 REAR BUMPER SIDE RETAINER - LH	65.20	1 PC	Di's 65.20	✓
76 REAR BUMPER SIDE RETAINER - RH	65.20	1 PC	Di's 65.20	✓
77 REAR BUMPER TOW HOOK COVER	35.50	1 PC	Di's 35.50	✓
78 REAR EXHAUST MUFFLER	650.90	1 PC	Bt 650.90	✓
79 REAR FENDER INNER TRIMBOARD - LH	485.00	1 PC	mgcm 485.00	✓
80 REAR FENDER INNER TRIMBOARD - RH	485.00	1 PC	u 485.00	✓
81 REAR TAILGATE 1193.70	1,572.50	1 PC	Bt 1,572.50	✓
82 REAR TAILGATE INNER TRIMBOARD 243.80	475.00	1 PC	Di's 475.00	✓
83 REAR TAILGATE LOCK	265.10	1 PC	Tm 265.10	✓
84 REAR TAILGATE OUTER GARNISH	285.10	1 PC	wap 285.10	✓
85 REAR TAILGATE WEATHERSTRIP	193.70	1 PC	ndt wt 193.70	50% in 96.85 in
86 REAR TAILLAMP PANEL - LH	185.00	1 PC	Bt 185.00	✓
87 REAR TAILLAMP PANEL - RH	185.00	1 PC	Bt 185.00	✓
88 REAR WHEEL PANEL TOOL BOX	456.20	1 PC	Di's 456.20	✓
89 REAR WHEEL PANEL TRIMBOARD 265	310.00	1 PC	ndt 310.00	✓
90 REAR WINDSCREEN MOULDINGS	110.50	1 PC	Me 110.50	✓
91 REAR WINDSCREEN MOULDING LOWER	90.10	1 PC	Me 90.10	✓
92 SPARE WHEEL PANEL 1072.50	1,135.90	1 PC	Bt 1,135.90	✓
93 TAIL LAMP LH 422.50	585.50	1 PC	cm 585.50	✓
94 TAIL LAMP RH 422.50	585.50	1 PC	Bu 585.50	✓
95 REAR TAILLAMP LOWER BRACKET - LH	48.50	1 PC	Di's 48.50	✓
96 REAR TAILLAMP LOWER BRACKET - RH	48.50	1 PC	Di's 48.50	✓
97 REAR BUMPER REFLECTOR - LH 64	195.00	1 PC	sch 195.00	✓
98 REAR BUMPER REFLECTOR - RH 64	195.00	1 PC	cm 195.00	✓
99 REAR END PANEL TOP GARNISH CLIPS	40.00	1 PC	Me 40.00	✓
100 REAR END PANEL TOP GARNISH	250.10	1 PC	Bu 250.10	✓
101 REAR TAILGATE 'LOGO' EMBLEM 65	125.00	1 PC	Me 125.00	✓
102 REAR TAILGATE EMBLEM 'SHUTTLE'	95.50	1 PC	Me 95.50	✓
103 REAR TAILGATE UPPER HINGE - LH	125.00	1 PC	Di's 125.00	✓
104 REAR TAILGATE UPPER HINGE - RH	125.00	1 PC	Di's 125.00	✓
105 REAR WIPER BLADE	45.00	1 PC	su 45.00	X
106 REAR WIPER MOTOR	495.00	1 PC	Tm 495.00	✓
107 REAR WIPER PLATE ARM	95.10	1 PC	su 95.10	X
108 REAR NUMBER PLATE LAMP - LH	55.50	1 PC	su 55.50	X
109 REAR NUMBER PLATE LAMP - RH	55.50	1 PC	su 55.50	X
110 REAR TAILGATE WINDSCREEN 1120.80 Shuttle	1,450.10	1 PC	1,450.10	✓





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M/S : China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road

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ATTN: Motor Claim Department

Your Ref No: -

Claim Type: Third Party

Accident Date: 03/02/2021

TP Veh Reg No: SMF4183T

Estimate No: ES2100016

Date: 04 Feb 2021

Policy No:

Veh Reg No: SLQ6977K

Make/Model: HONDA SHUTTLE 1.5G  
CVT

Chassis No: GK81007749

Engine No: L15B3539067

Reg. Date: 19/07/2017

## Estimate Repair Cost to Vehicle No :SLQ6977K

Description	U/Price	Quantity	List Price	Amount
			SS	SS
111 REAR TAILGATE TOP OPENING SWITCH	185.50	1 PC	CM 185.50	✓
112 REAR BUZZER SENSOR	189.20	1 PC	CM 189.20	✓
113 REAR FENDER INNER PANEL - LH	1,150.50	1 PC	R 1,150.50	X
114 REAR FENDER INNER PANEL - RH	1,150.50	1 PC	R 1,150.50	X
115 REAR TAILLAMP LOWER PANEL - LH	165.00	1 PC	BY 165.00	✓
116 REAR TAILLAMP LOWER PANEL - RH	165.00	1 PC	BY 165.00	✓
117 REAR BUMPER LOWER SHIELD - LH	175.10	1 PC	SH 175.10	X
118 REAR BUMPER LOWER SHIELD - RH	175.10	1 PC	SH 175.10	X
119 REAR BUMPER LOWER SHIELD CLIP - LH	40.00	1 PC	nn 40.00	X
120 REAR BUMPER LOWER SHIELD CLIP - RH	40.00	1 PC	nn 40.00	X
121 REAR TAIL GATE STOPPER RUBBER - LH	35.00	1 PC	SH 35.00	X
122 REAR TAIL GATE STOPPER RUBBER - RH	35.00	1 PC	SH 35.00	X
123 REAR BUMPER SIDE SPONGE - LH	180.00	1 PC	CM 180.00	✓
124 REAR BUMPER SIDE SPONGE - RH	180.00	1 PC	CM 180.00	✓
125 REAR BUMPER TOWING COVER	55.00	1 PC	Byuan 55.00	X
126 REAR AUTO LOCK CONTROL SENSOR	160.00	1 PC		?
127 REAR END PANEL	480.50	1 PC	R 480.50	✓
128 REAR END PANEL INNER	420.10	1 PC	R 420.10	✓
129 REAR END PANEL LOWER GARNISH	295.20	1 PC	CM 295.20	✓
130 REAR END PANEL INNER LOWER GARNISH	210.10	1 PC	Return 210.10	✓
			40,974.60	40,974.60

### Labour

131 TO DISMANTLE & REPLACE DAMAGED PARTS, PANEL BEAT WHERE NECESSARY.	2,800.00	1 JOB	2,800.00	2200
132 TO PUTTY, APPLY PRIMER & SPRAY-PAINT ON THE AFFECTED PORTION.	2,500.00	1 JOB	2,500.00	2200
133 TO APPLY RUST- PROOFING ON REPAIRED, REPLACED PANEL.	300.00	1 JOB	300.00	180
134 TO REMOVE/REFIT REAR WINDSCREEN TO FACILITATE REPAIRS.	200.00	1 JOB	200.00	120
135 TO REMOVE/REFIT PASSENGER SEAT, FENDER GARNISHES TO FACILITATE REPAIRS.	250.00	1 JOB	250.00	120
136 TO REMOVE/TRANSFER TAILGATE COMPONENTS.	150.00	1 PC	150.00	60
137 TO CHECK WIRING FUNCTIONS.	150.00	1 JOB	150.00	40
138 COMPUTER DIAGNOSTIC RESET	300.00	1 PC	nn 300.00	X
139 WHEEL ALIGNMENT	120.00	1 T	120.00	60
140 AIRCON GAS	120.00	1 JOB	120.00	100
			6,890.00	6,890.00



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ATTN: Motor Claim Department

Your Ref No: -  
Claim Type: Third Party  
Accident Date: 03/02/2021  
TP Veh Reg No: SMF4183T

Estimate No: ES2100016  
Date: 04 Feb 2021  
Policy No:  
Veh Reg No: SLQ6977K  
Make/Model: HONDA SHUTTLE 1.5G  
CVT  
Chassis No: GK81007749  
Engine No: L15B3539067  
Reg. Date: 19/07/2017

## Estimate Repair Cost to Vehicle No :SLQ6977K

Description	U/Price	Quantity	List Price	Amount
			<u>S\$</u>	<u>S\$</u>
			Total	S\$ 48,974.60
			Add GST @ 7%	3,428.22
			Total Amount Payable	<u>S\$ 52,402.82</u>

TOTAL: SINGAPORE DOLLAR FIFTY TWO THOUSAND FOUR HUNDRED AND TWO AND CENTS EIGHTY TWO ONLY

For Yee Auto Pte Ltd

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:

  
AUTHORISED SIGNATURE





## 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	03/02/2021 16:22 (SGT)
Date of Accident	03/02/2021 06:50 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE TOWARDS CITY
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ6977K
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	DAI JUN
NRIC No	SXXXX146D
Email Address	DAINONGREN@HOTMAIL.COM
Mobile Phone No	(Phone) +65-94308619
Alternative Phone No	(Office) +65-94308619

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Shuttle
Variant	-
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 - Claiming third party
Vehicle Category	Private car

#### INSURANCE COMPANY

Name of Insurance Company	AGI
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10186379R01
Cover Note Number	SLQ6977K

#### DRIVER

Name of Driver	DAI JUN
NRIC No	SXXXX146D
Date Of Birth	21/06/1974
Occupation	Indoor





Date Of Driving Pass	15/05/2017
Driving experience	3 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94308619
Alt. Phone Number	(Office) +65-94308619
Email Address	DAINONGREN@HOTMAIL.COM
Address	BLK 424D YISHUN AVE 11 #12-326
Address complement	-
Postcode	764424
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	YAN XIN RONG
Gender	Female

#### PASSENGER 2

Name	DAI ZHOU YANG
Gender	Male

#### PASSENGER 3

Name	DAI YU YANG
Gender	Male

#### PASSENGER 4

Name	ARON
Gender	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Thomson Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18004529999
Alt. Police Station Phone No	(Fax) +65-65535740
Police Station Address	Blk 25 Sin Ming Road #01-180 Singapore 570025
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN.



## 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	SMF4183T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMF1617Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## INJURED PERSONS DETAILS

## INJURED 1

Name of injured person	DAI JUN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	FELT PAIN AT SHOULDER AREA
Injured person in which vehicle?	SLQ6977K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No



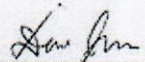


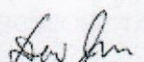
**IMPORTANT NOTICE**

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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

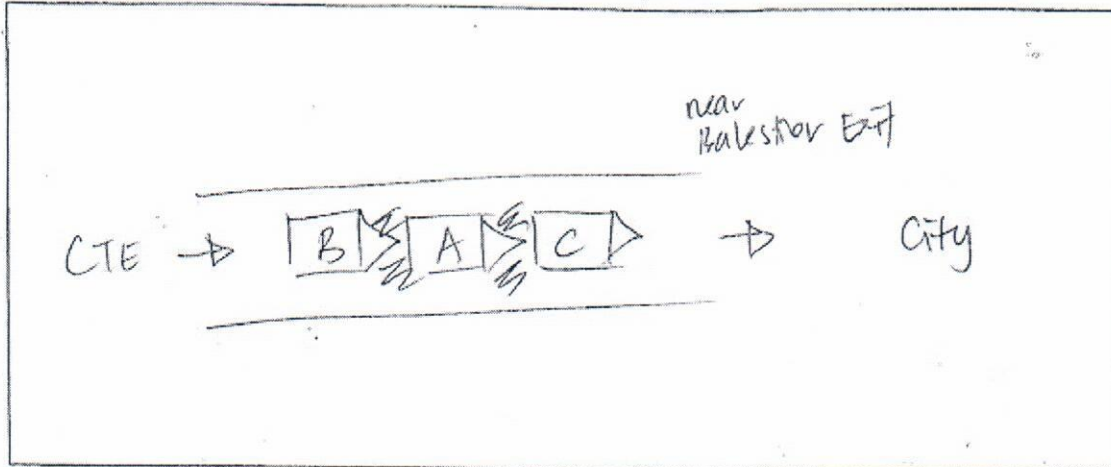
  
 Policyholder's Signature  
 Date & Time:

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

   
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.: 03/02/2021



Date of accident: 5/2/2021 Time: 6:50am Location: CTE hws City  
 My Vehicle A: SLQ 6977K Vehicle B: SMF 4183T Vehicle C: SFR 1617Z  
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report  
Police Report NO: T/20210203/2056

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

Kindly email my G/LA Report to me & my workshop  
Yee Auto Pte Ltd yeeautopte1td@gmail.com

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

[Signature]  
 Policyholder's Signature  
 Date & Time:

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

[Signature]  
 Reporting Centre Personnel's Signature  
 Name: 03/02/2021  
 NRIC/FIN No.: [Stamp]





**SINGAPORE  
POLICE FORCE**



T/20210203/2056

1 of 4

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

Report No. T/20210203/2056

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 03/02/2021 12:44	Vide Report No.:	Station Diary No.: 12
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**Informant's Particulars**

Name of Informant: DAI JUN			Address: APT BLK 424D YISHUN AVENUE 11 #12-326 SINGAPORE 764424		
ID Type / ID No.: NRIC NO / S7460146D			Contact No.: Home/Office: Mobile: 94308619		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 21/06/1974	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: ENGINEER			Driving Licence Information: Class: 3A Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/02/2021 06:50	Type of Location: Straight Road
Location:  CENTRAL EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: CHAIN COLLISION				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFR1617Z	Car				Slightly Damaged	0
SLQ6977K	Car	HONDA	SHUTTLE 1.5G CVT	Silver	Slightly Damaged	4
SMF4183T	Car				Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE  
POLICE FORCE**



T/20210203/2056

2 of 4

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

Report No. T/20210203/2056

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLQ6977K	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10186379R01	19/07/2020	18/07/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LOKE YUE CHONG		ID No.	S0006962J
Related Vehicle	SFR1617Z (Car)		Contact No.	97282990
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	DAI JUN		ID No.	S7460146D
Related Vehicle	SLQ6977K (Car)		Contact No.	94308619
Hospital/Clinic	ISLAND ORTHOPAEDIC CONSULTANTS PTE LTD		Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	03/02/2021		Date Discharge	NIL
No. of Days granted Medical Leave	03		Degree of Injury	Slight
Driver				
Name	SELVAN		ID No.	NIL
Related Vehicle	SMF4183T (Car)		Contact No.	97825133
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL





**SINGAPORE  
POLICE FORCE**



T/20210203/2056

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

3 of 4

Report No. T/20210203/2056

**CONTINUATION OF REPORT**

**Brief Details.**

On 03/02/21 at about 0650hrs, I was driving my vehicle (SLQ6977K) along CTE towards City. The vehicle ahead was moving slowly and came to a stop. I followed as well. Subsequently, another vehicle (SMF4183T) could not stop in time and collided on to the rear of my vehicle. The impact caused my vehicle to surged forward, colliding onto another vehicle (SFR1617Z) ahead.

Upon collision, all drivers came out to take photos and to exchange contact details. No police or ambulance assistance were needed. We then proceeded on with our journey. I wish to state that my car camera is not functioning.

Later on the day, I felt pain at my shoulder area. As such, I went to Island Orthopaedic Consultants Pte Ltd and was given 3 days of MC by Dr Leslie Ng.

I am lodging this report for police investigation purposes.





**SINGAPORE  
POLICE FORCE**



T/20210203/2056

4 of 4

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

Report No. T/20210203/2056

## CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E /

Sgt 2 HO BOON KIAT, DARON

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

03/02/2021 12:44

Officer In Charge Of Case:

TP / AEIT /

SSI TAY CHUN KEEN

Contact No.: 65476229

Classification Of Case:

Authentication Stamp

NP168

SN 070





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
 6 Raffles Quay #18-00 Singapore 048580  
 Tel (65) 6224 0010 Fax (65) 6224 0030  
 Operating Hours : Monday to Friday, 09:00 - 17:00  
 UEN: S665500206 / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

#### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SA1821230004 Vehicle Registration No: SLQ6977K  
 Name (as shown in NRIC) : DAI Jun NRIC/FIN/Passport No : S74601460  
 (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
 Address : Blk 424D Yishun Ave 11 #12-326 Singapore (764424)  
 Contact (Tel) : - Mobile No. : 9430-8619  
 Email Address : \_\_\_\_\_  
 Date of Accident : 03/02/2021 Time of Accident : 06.50am  
 Place of Accident : CTE Toward City  
 Insurance Company: Budget towards City

#### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To upload the accident report.



operator  
 Policyholder / Driver's Signature  
 Date:



[Signature]  
 Reporting Centre Personnel's Signature  
 Name: 03/02/2021  
 NRIC/FIN No.:  
 Date: