auth 1 MEF: CS CT 12100/8/5/Tig.d3. ASSIGNMENT Date: Type: M.Car / M.Cycle / Bus / Van / Lorry /. Taxi / Prime Mover / Estimated Cost: Truck / Trailer or OD (TP) WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: SGG 4807 T Make: Colour at Workshop m/s HUAT HOCK MOTOR T/Radio: Insured / Std / NI / NA Sp.Reading Eng/No: GBL 5005S insured: C/No: Policy No. DMCVSNW00011552100 Gen. Cond: Good / Fair / Poor / Burnt Claims No. SNM 210200706602 Steering: Inorder / Jammed / Leaked / Burnt or Sum Insured: Brake: Inorder / Jammed / Leaked / Burnt or (Client's Record) Modi: Nil / S/Rim / STD A/Rim or Make of Veh: Tyre Size: (Policy Condition) BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / OIS NIS Remark: The veh had commenced its repair at the time of inspection. TOYO / YOKO or Front Bal. or Market Value: R/Bal. mm R/Bal, mm Consistent? : Yes or No IDAC Accident Rport: L/Bal. L/Bal. mm Consistent?: Yes or No GIA / PR Seen: D.O.I. D.O.A. Res.: Yes or No days Est. Repairs: 3 Val.: Yes or No Survey held at Lum Sum: Des. of Damages: Frt | Rea | 1 O/S | N/S | U/C | Rooftop or CA / REV / REP. / 24 HRS Vehicle: IN/OUT The U/C / Chassis frame / Body Structure affected due to collision. Person Contacted: Action / Instruction Date / Time 16par Contrin @ 4.15pm revised to Adeline Ching via Merimen (RED \$ 9,062.00, 54%) Days Of Repair: 7 Date/Time, File Pass to? : Preli. Report Survey Fee: Resurvey No. of Trip: : Final Report 1) 15/3 Typist Transportation: Date/Time, File Return to? Add Fee: : Site Insp (\$ _S + RS.__SI Interview (\$ Photos Tech. Invs (\$ Others Reper Format: Lunip Sum 487.17 \$7,600.00 Weel end (\$



發福摩哆車房 HUAT HOCK MOTOR WORKSHOP BLOCK 3012, BEDOK NORTH AVE 4, #01-2054,

BUSINESS REG NO. 375654/00C

Ye	nicle No: 388 48077	Accident Do		7071	
M.	Mileage: Make / Model: HONDA			- ODYSEK	
		CHASSIC :J	HMRD18506	C200067	
20	de:	Fox NO.	: 6445	763H	
I					1
	Items	,			
1	Rear BootLip		1030.5061	\$1257.40	
2	" Boothy yourser x:	J @ 155.30	Re	# 310.60	
3	" Bootlid Lock	3	Phops. Ht	£ 218.30	
4	" Bootlid weatherst	45	tui/	OD 1.21 #	
2	" Bootlid Owerd	1	MY	#380.	
6	" Bootlid thm bo		de T.	4212	
7	" Bootlid LN JRH	Paroll X2 @	76.30 nn X	D. 621 #	
8	" Booterd owner ha	der	Cuq	\$ 406.10	
9	" Boothod windscream	M	cua/	# 1203.50	
10	" Boothed windercogn	priblian	ner /	#138.00	
11	n Boothal Logo	9	ng	94.75 AB	
19	" Boothed employ		ner	# 45.20	
13	" Bootling thing book	d clip	ney/	# 38.00	
14	" Boothed munder Pla	k long.	cre 7.	# 69-10	
15	" Booths number Pla		der any	# 82.00	
16	No. Plate & Casiny	\	SN bt/45	450.00	
7	Rear Bungar		de	# 896.00	
18	Ran Buper side retain	DEN X 2 CD :	28.30 XVN	4 A6.40	
9	Rear Burger Stoll chron	ne x 2 0	52.30 cm	# 130.60	
20	Rear Bungar revorse	Sensor 4 p	c 250 m	# 380.00	
4	Rear Buyer Clip	1	ner-	# 38.00	
99	Rear Bruger Beaux	T	ht M	4 288.40	19
23	Rear Buyer Brades	THAKH @	21.30xx X	# 4260	
DY		rofen	bt 7.	\$ 228.60	
25	Har Bookled wifer 1		pro /	\$ 16.00	
76		rappor	mis	44.00	
1	0 -11 7 7 77	Q. 10./	mic/	12 11.QT	î

發福摩哆車房 HUAT HOCK MOTOR WORKSHOP BLOCK 3012, BEDOK NORTH AVE 4, #01-2054, BEDOK INDUSTRIAL PARK E, SINGAPORE 489978. Tel / Fax: 6445 2934 Hp: 8161 6988
BUSINESS REG NO. 375654/00C

Vehicle No: SGG 4807 T	chide No: SGG 480TT Accident Date: 4.2.2621				
Mileage:	make /Model	make /Model: HONDA ODYEREY			
	CHASSIC : 3HW	RD1850	EC 2000 67		
Date:	Fax NO.	: 6445	1934		
Items	the second secon				
1 Rear Tailhamp LH		cual	#385.60		
2 Rear Tailhaup RH	TO ANGEL METERS AND THE SECOND PROPERTY OF TH	one	# 385.60		
3 Rear Forder LH)	Ro	# 839.30		
4 Roar Fonder RH	2	,	#853.70		
5 Rear End Janel	Photo	", -	\$545.90		
6 Rear End James To	& Barth plut	de	# 351.80		
T Rear Spare type par	iel,	RY	OP.2824		
8 Rear Space type Be	parel	cre 7.	# 254.10		
9 Rear Spare the		NN X	# 280.00		
	ut + bolt.		01-2A #		
	land	NersN60			
D Rear PH. Fonder hard		de:	Q9.28+ \$		
B Rear Hi Fonder han		ren?	K 102.00		
14 Ra Pot Fondar Rar	Δ .	Well 7	p 38.00		
	ich chip	()	\$ 38.00		
to Rear Booters Threed Br	ale lep	Con	# SKIN 15		
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20%-6793.60.					
	SN - 91	0)			
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	1 - 4				
	W. T.				



W 福 摩 哆 車 房 HUAT HOCK MOTOR WORKSHOP BLOCK 3012, BEDOK NORTH AVE 4, #01-2054, BEDOK INDUSTRIAL PARK E, SINGAPORE 489978. Tel / Fax: 6445 2934 Hp: 8161 6988 BUSINESS REG NO. 375654/00C

BUSINESS REG NO. 3/5654	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
220	eded area.	#1400.00
To straighten repair religion on eff and replace damaged parts, end	zanel.	1000.
and replace damage a parts,		111600 00
- santing on affected	area	4 1600.00
(Boothed, Rear Burger, LH & RH For	der, kear	1200.
To spray painting on affected (Boothed, Rear Burgar, LH & EH Form End Jane) tyre panel).		// //
To spray anti-rust coating on	etted panel	# 130.00
To rawve and reinstall room Trims, Boards, Rarioh ete nea	interior	# 250.00
trime, Boards, Rarich ete nea	econy repair	60.
O 1 1 de madramous	4 component	#130.00
To transfer tailgade, mechansus		30.
To check rear electrical writy	3x8 tem	# 80.00
16.16	· lastack	10
To transfer rear windersam to	1600 -0" 1800	60.
Remove & Fix near Denson, Rear		#150.00
		4 100.00
Rear and Janel Scalant		2610
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2/3 Resum of he report		
10 ART PHAGUE	LKK Auto Consultants the Repairer of the follo	wing:
fairful (Interspector	 To resurvey before/after spi To display damaged part(s) Parts prices are subject to 	during resurvey
6793	 Parts prices are subject to the survey is on a " No illegal modification(s) is 	Without Prejudice" basis
260	Supplementary item(s) mu- is subject to final approval	st be resurveyed and

is subject to final approval from Insurance Company

SH0421240002 / Hock Wah Motor Workshop Pte Ltd ENTRY DATE & TIME: 04/02/2021 12:08 (SGT) SUBMITTED BY: Anysia Foo Mei Yan VERSION: 1 (04/02/2021 12:08 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

04/02/2021 12:08 (SGT) 04/02/2021 11:00 (SGT) Near 554a Serangoon Rd, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SGG4807T

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No Alternative Phone No

No TAN HSUAN HENG SXXXX966G TANHH0086@YAHOO.COM.SG (Phone) +65-94555687 +65-94555687

VEHICLE PARTICULARS

Manufacturer Model Variant

Honda Odyssey

Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle?

No - Claiming third party Private car

Vehicle Category

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

NTUC ThirdPartyFireTheft 5075658075-05 15/11/2020 - 14/11/2021

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

TAN HSUAN HENG SXXXX966G 02/02/1952 Indoor

Date Of Driving Pass 18/01/1979 Driving experience 42 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-94555687 Alt. Phone Number +65-94555687 **Email Address** TANHH0086@YAHOO.COM.SG Address 86 GUAN SOON AVENUE Address complement Postcode 489647 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 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

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

Number of Passengers (Including Driver)

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?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

ON THE STATED DATE & TIME, THE TRAFFIC LIGHT WAS RED IN FRONT. I STATIONARY MY VEHICLE AND OUT OF SUDDEN , I FELT AN IMPACT FROM BEHIND AND NOTICED THAT VEHICLE B (GBL5005S) WAS COLLIDED ONTO MY REAR PORTION OF VEHICLE.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

Address

Address complement

GBL5005S

Commercial

Commercial vehicle

Commercial vehicle

Commercial vehicle

Commercial vehicle

Commercial vehicle

Commercial vehicle

Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
- 2. This Forminust 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 forw arded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that are and the contract of the c
- 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)

Lunderstand, 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 law yers/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, law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes

Policyholder's Signature / Date & Time

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

Sketch Plan

SHELL

YOUR - SEGULOTS

Witnessed by Repo

Personnel

SERONGOON ROAM

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