ASSI	GNMENT
From: Date:	Veh No: 477008C Yr Regn: 20/7/17
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van Lorry / Taxi / Prime Mover /
OD TP WS / TP RES / OD RES / EVA / INV / MV	Truck/Trailer or (M/
To Inspect Vehicle No: 1/P700fc	Make: Mit contex FEB21 c.c 2998
at Workshop m/s / m perim	Colour White A/C: Insured / Std / NI / NA
of	Sp.Reading 171317 T/Radio: Insured / Std / NI / NA
Insured: GBK 4 VLYS	Fng/No:
Policy No. 099 999 3808	C/No: FEB21EA 21072
Claims No. 0 14708385956	Gen. Cond. Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: I der / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil S/Rim / STD A/Rim or
	Tyre Size: F: 195/85 RCC
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	YOYO / YOKO or
Bal. or Market Value: \$56 k.	<u>Front</u> Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6/6 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm L/Bal. 6/6 mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. 24/3/21 D.O.I. 12/4/21
Lum Sum: % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS 354k	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: L74 2316	N/S Body
Date / Time Action / Instruction Q17 9103	The U/C / Chassis frame Body Structure affected due to collision.
5/44 4/5 \$ 2200 conf.md wr	h Shown. (Red 3300 6090
Date/Time, File Pass to? : Preli. Report D	ays Of Repair: 3
	esurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) 15 4 - typist Add Fee:	: Site Insp (\$)S+RS,SI
Report Format: Merimen	: Interview (\$) Photos
Nopole i offiliae i	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$ 200 2	:Weekend (\$

TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 354K

Vehicle Details

Vehicle No.: YP7008C

Vehicle to be Exported: No

Intended Deregistration Date: 12 Apr 2021
Vehicle Make: MITSUBISHI

Vehicle Model: CANTER FEB21ER3SDEB

Primary Colour: White

Manufacturing Year: 2016

Engine No.: 4P10C38682

Chassis No.: FEB21EA21072
Maximum Power Output: -

Open Market Value: \$33,689.00
Original Registration Date: 20 Jul 2017
First Registration Date: 20 Jul 2017

Transfer Count: 0

Actual ARF Paid: \$1,685.00

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Expiry Date: 19 Jul 2027

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 10

 QP Paid:
 \$36,879.00

 COE Rebate Amount:
 \$23,118.00

 Total Rebate Amount:
 \$23,118.00

The information contained herein is correct as at 12 Apr 2021

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Art Automobiles Pte Ltd



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Mitsubishi Canter feb21

Mileage

✓ 20 results/page

Search Selection

Post an Ad

Model

Mitsubishi Canter feb21

Price

Any

Depreciation

2017

Anv

Eng Cap

Anv

Sort by Date Posted

Апу

Available

Mitsubishi Fuso Canter FEB21

\$63,800

\$10,600 /yr

19-Apr-2017

2.998 cc

36,000 km

Truck Available

Fuel Type: Diesel

Free 3 Months Warranty! Free 4 Times Servicing! One Owner Only! Low Mileage Done! Flexible Loan Scheme High Trade In Value! Contact Our Friendly Sales Consultant Now! View To Believe The Tip Top Condition!

Posted: 12-Apr-2021 Tags: 2017 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso



Mitsubishi Fuso Canter FEB21

\$62,800

\$10,710 /yr

22-Feb-2017

2,998 cc

17,774 km Truck Available

Fuel Type: Diese

ABWIN (1994) Pte Ltd

Only 1 Owner, With Extremely Low Mileage At 17774KM! 14 Ft Lorry With High Box Attachment, Kept In Excellent Condition! See It For Yourself To Believe It! Class 3 License Can Drive, And No VPC Needed! High In-House Loan And High Trade-in Rates Available. Contact...

Posted: 11-Apr-2021 Tags: 2017 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso



Mitsubishi Fuso Canter FEB21 Fuel Type: Diesel

\$9,950 /yr

29-Dec-2017

2,998 cc

Truck

Available

Posted: 10-Apr-2021 Tags: 2017 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso



Mitsubishi Fuso Canter FEB21

\$63,800

\$10,080 /yr

11-Aug-2017

2,998 cc

Truck

Available

Fuel Type: Diesel 6 Months Prestige Warranty And 2X Free Servicing. All Wear And Tear Will Be Replaced Before Hand Over. Low Usage, Value For Money.

Bell Auto Pte Ltd. Posted: 09-Apr-2021 Tags: 2017 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso



Long Lifespan Silicon Hose Kit

Silicone Hose Kit. Available in different inner diameter.

More info about this product



Mitsubishi Fuso Canter FEB21

\$62,800

\$10,330 /yr

12-May-2017

2,998 cc

Available

Fuel Type: Diesel

Best 14 Feet Lorry With Box Up For Sales. Prefect Transport For Movers And Logistics Company. No VPC Needed. Class 3 License Able To Drive. Drive This Wonderful 14 Feet Lorry Back Home At The Price Of \$5000! Promotion Sales Going On! All Prices Stashed To The Mini...

Fuel Type: Diesel

Posted: 05-Apr-2021 Tags: 2017 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso



Mitsubishi Fuso Canter FEB21 Fuel Type: Diesel

\$63,800 \$10,630 /yr 13-Apr-2017

2.998 or

59,500 km

Truck

Available

Posted: 04-Apr-2021 Tags: 2017 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso

Mitsubishi Fuso Canter FEB21

\$64,800

\$10,340 /yr

Super Low Mileage, Box Lorry With Full Checker Plate With C Channel, Two Sliding Door On Each Side. Class 3, No VPC Required. High Trade In, Easy In House Loan. Come View To Believe!

18-Jul-2017

2.998 cc

Truck

Available

Outstanding Condition! Wear And Tear Replaced! A Trusted Model That Can Serve Your Daily Delivery With Peace Of Mind! Wait No More

SS1Y213P000D / SME MOTOR PTE LTD ENTRY DATE & TIME: 25/03/2021 17:04 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (25/03/2021 17:04 (SGT))



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 witholding of material facts may allow insurance companies to repudiate

4. The issue and acceptance of this Form by insurance companies is not an admission of policy flability on the part of the insurance companies,

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

25/03/2021 17:04 (SGT) 24/03/2021 12:30 (SGT) Greenwich Dr, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

YP7008C

Yes

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No.

VITE LOGISTICS PTE LTD 2XXXXX354K jeffri-vite@mail.com (Phone) +65-98892911 Alternative Phone No +65-98892911

VEHICLE PARTICULARS

Manufacturer Model

Variant

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?

Vehicle Category Transmission

CC

Mitsubishi Canter

Employment

3000

No - Claiming third party Commercial vehicle Auto

INSURANCE COMPANY

Name of Insurance Company Type of Coverage

Fleet Policy Policy Number Cover Note Number AXA Insurance Pte Ltd Comprehensive GA544047

DRIVER

Name of Driver NRIC No

MOHD ALFIA BIN MISNAN SXXXX726Z

Date Of Birth Occupation

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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

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?

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name Police Station Phone No Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20210325/2043.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

08/08/1980

19/03/2007

14 YEARS

(Phone) +65-90051031

nina_alfia@yahoo.com.sg

BLK 289D PUNGGOL PLACE #02-841

Tampines Neighbourhood Police Centre

6 Tampines Ave 4 Singapore 529682

(Phone) +65-18005871999

(Fax) +65-65871699

Outdoor

824289

Employee

Side Swipe Raining

Wet

No

No

1

No

No

Yes

2 Yes

No

No

No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

GBK4214S

Commercial vehicle

Accident report SS1Y213P000D

Page 2 of 16

Date Of Birth 08/08/1980 Occupation Outdoor Date Of Driving Pass 19/03/2007 Driving experience 14 YEARS Gender Male Mobile Number (Phone) +65-90051031 Alt. Phone Number Email Address nina_alfia@yahoo.com.sg Address BLK 289D PUNGGOL PLACE #02-841 Address complement Postcode 824289 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 Side Swipe Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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 Tampines Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005871999 Alt. Police Station Phone No (Fax) +65-65871699 Police Station Address 6 Tampines Ave 4 Singapore 529682 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT: T/20210325/2043. 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 GBK4214S Vehicle Manufacturer Vehicle Model

Commercial vehicle

Vehicle Variant Vehicle Colour Vehicle Category

Name of Driver	×
Contact Number	-
Address	-
Address complement	ě
Postcode	2
Insurance Company Name	_
Nature Of Damage	
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	VEHICLE D

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MOHD ALFIA BIN MISNAN
Address	φ
Address Complement	-
Post Code	_
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	YP7008C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	

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
- Information provided must be as truthful and accurate as possible. Any will of misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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
 - 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) 40 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

(p) for complying with requirements under any regulations, laws or court orders

Palicyholder's Signature Date & Time: Oriver's Signature (if driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name NEIC/FIN No.

SKETCH PLAN	8		A
DESCRIBE CIRCUM	STANCES OF TH	E ACCIDENT	
Dere	- P	LICE REPORT	
ILEFER	(3 1-	CICA CAINNI	
DECLARATION		e true in every respect	
1000		et le	
Policy outside in September Batte & Films		Drawn v.S. gastere Of driver is not the policyholise Outo & Time	

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the clarity process.
- 3. This Form must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as truthful and accurate as possible. Any willier maximum sentation or will holding of material facts may allow invorance companies to repudiate policy bability.
- The exery and acceptance of this form by insurance companies is not an admission of pointy 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 for worded by the insurers of the GIA Records Management Centre outsidished by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made excellable upon application by interested parties.
- By the ladgment of this report to the insurers, you tereby consent to the archiving of this report at the centre and to copies of the report being made available alorescale.
- 8. Consent under the Personal Data Protection Act (PDPA).

Funderstand, acknowledge, agree and consent than

- (a) My distinct, my workship and the General insurance Association of Sungapore ("GIA") may/are permitted to collect, use, disclose and/or process thy personal dista/personal information act out in this [form] and any other personal information provided by the 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 distance in the accident distance in the accident distance in the Manufacture of the purpose of the Administrative Authority of Singapore and any relevant government agency authority (such as the police), for the purpose(s) of the purpose of the purpose
 - 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 the
 - (iv) administering my claims backading the making of correspondence, statements, involves reports or notices to me, which could involve disclosure of corpain personal data about me to time, about delivery of the same as well as on the external rover of envelopes/mail packaged, and/or
 - (v) complying each applicable law in administering, processing, handling and/or dealing with my dains (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in the 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 hypotheses and
- (c) by Personal Information may fain be disclosed by any of the insurers and/or GIA to their thire party service providence agents (including their lawyers/law (irms), which may be sated outside of Secanore, for one or more of the above persons.
- (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 (ii) above may be shared / disclessed
 - fit to all matters and/or any other than parties that assist in evaluating investigating, controlling or managing transfergulators. Tax enforcement and government agencies as reasonably required for the purposes stated, or

(a) for complying with requirements under any regulations, laws or court orders

Policyholder's Signature

Draw's Sapsature
(If draw's not the pulicy-ways)
Date & Time

Reporting Centre Personnell i Signature Sume: SWC 1910 No.





1 of 3

Report No. T/20210325/2043

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/03/2021 12:47		Vide Report No.:	Station Diary No. 36		
Informa	nt's Partici	ulars			
	f Informant: ALFIA BIN N		Address: APT BLK 289D PUNG 824289	GOL PLACE #02-841 SINGAPORE	
	/ ID No.: O / S802372	26Z	Contact No.: Home/Office: Mobile: 90051031		
National SINGAF	lity: PORE CITIZ	EN	Email:		
Sex: Male	Age:	Date of Birth: 08/08/1980	Type of Informant:		
Race: Javanese		Language: Institution / School Na			
Occupation: DELIVERY DRIVER		Driving Licence Inform Class: 3,4	ation: Date of Expiry:		

General Infor	mation of the Acci	dent		
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/03/2021 12:30	Type of Location: T-Junction
Location: GREENWICH	H DRIVE			9
Weather: Raining		Road Surface: Wet	F	Road Speed Limit:
Traffic Flow: Traff		Traffic Control:		raffic Volume: .ight
Type of Collis Between Mov		Swipe - Same Direction	a	Anyone conveyed by ambulance:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBK4214S	Van				Slightly Damaged	0
YP7008C	Van				Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





2 of 3

Report No. T/20210325/2043

Police Station Of Origin: Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Driver			有针列 医二十二	Application of the second		
Name	MOHD ALFIA BIN MISNAN			ID No		S8023726Z
Related Vehicle	YP7008C (Van)		Conta	ct No.	90051031	
Hospital/Clinic	SUNSHINE CLINIC FAMILY PRACTICE & SURGERY		Class Drivin Licen Expire	g	Class: 3,4 Date of Expiry: NIL	
Date Treatment	24/03/2021	21 Date Disc		harge	NIL	
		Degree o	f Injury	NIL		

Brief Details.

On 24/03/2021 at about 1234hrs, I was driving my vehicle bearing plate number YP7008C along Tampines Road. At that time, traffic was light and road surface was wet. I did not have any passenger on board.

As I approached the junction of Tampines Road and Greenwich Drive, I had signaled my intention to turn right towards Greenwich Drive. I had stopped at the said junction while traffic light was red, and as it turned green in my favour, I had checked for oncoming traffic, before moving off. I wish to state that I had completed the right turn to Greenwich Drive, when suddenly I felt an impact on the left side of my vehicle.

I alighted and discovered, V1, bearing plate number GBK4214S, which I believed came from the left turning slip road to Greenwich Drive from Tampines Road. V1 had collided into the mid portion of the left side of my vehicle.

I wish to state that I sustained injuries and received 5 days of MC. There is no in car camera installed in my vehicle.





Report No. T/20210325/2043

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999 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	g The Report:
G/	
Sgt 3 MOHAMED FADHLY BI	N MOHAMED
AYOP	

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414

Authentication Stamp NP168

Signature Of Informant:

Date/Time: 25/03/2021 12:47

Classification Of Case:

IMPERIUM AUTOMOTIVE

25 Kaki Buki Road 4 #01-49 Synergy @ KB Singapore 417800 Tel: 9748 9940 Fax: 6346 7213

Vehicle No.: YP 7008C

Model: Mitsubishi Canter

QTY	Price:		Prices \$
1	Special Nett Items Front Sliding Door Cargo Box 15	Boly BO Subtotal	3500.00 2000 S/N
	Labour Charges: To respray painting on the affected areas. Panel beating.	Subtotal	1000.00 HSV 1000.00 2000.00
	ESTIMATE PARTS AND LABOUR GRAND TOTAL	\$	5500.00

2250

Not Arthoral

14/4/21

1/4/21

1/5 3 days.

the Reparer of the following:

To resurvey beto erafter spray painting:

To deput perhaps during resurvey:

Parts prices are subject to confirmation:

Third party survey is no a "Vinthout Prejudice" basis:

No illegal medification(s) is allowed:

Supplementary Item(s) must be resurveyed and is subject to final approval from Insurance Company.

Acknowledged by Repairer:

Signature:

Date: