08/11/13) wef ASS. REC. BY: Process REF: CS/SML 2100	04544/Riuf3 196N
	GNMENT
From: Date:	Veh No: YC Regn: Yr R
DD TP WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
o Inspect Vehicle No: 48927R	Make: MITSUBISHI CANTEL FEBRUSA C.C 2998
Workshop m/s Venna Enrinkelinh	Colour WHUTE A/C: Insured / Std / NI / NA
NO.8 purs AVE 18	Sp.Reading 66833 T/Radio: Insured / Std / NI / NA
sured: SHD 6213Y	Eng/No:
olicy No.	C/No: FEB 21 EA 30160
laims No. TAX/04/21/2019	Gen. Cond: Good / Paip / Poor / Burnt
um Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: loorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NiP / S/Rim / STD A/Rim or
	Tyre Size: F: 195RISC
(Policy Condition)	R: ~~
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or WESTLAKE
	Front Rear
2 11 10 V N-	R/Bal. 7 mm R/Bal. 7/7 mm
O The Market No.	L/Bal. 7 mm L/Bal. 7(7 mm
Old / Tit cools.	D.O.A. 08/04/21 D.O.I. 12/64/21
Lot. Nopulio.	0000121
Lum Sum: 20 % 3 Val.: Yes or No	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS	10 Goz
Vehicle: IN / OUT Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
Pepar limit -63K	
Cfmed final fig L/S \$3700, 6 days. (RE	ED \$1689.79; 31%)
	Days Of Repair: 6
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 6
	Resurvey No. of Trip: 1 Survey Fee:
1) 22/4 TYPIST : Final Report Date/Time, File Return to?	Resurvey No. of Trip: 1 Survey Fee: Transportation:
1) 22/4 TYPIST : Final Report Date/Time, File Return to?	Resurvey No. of Trip: 1 Survey Fee: Transportation:



Venda Engineering & Trading Pte Ltd

GST / Company Reg No.: 200411725H

Quotation

From:

VENDA ENGINEERING & TRADING PTE LTD

8 TUAS AVENUE 18 SINGAPORE 638892

Officer in Charge: HOH PEI JIN

Tel: Email:

36 37

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Customer:

GOLDBELL LEASING PTE LTD

59 SENOKO ROAD SINGAPORE 758123

Attn::

Tel: 6494 2800 Fax No.: 6861 7097

Quotation No.: CQO21-0410027	Quotation Date : 09/04/2021	Terms: 30 DAYS	
Vehicle No.: YQ927R Chassis No.: FEB21EA30160		Policy Number : 29146062	
Model: CANTER FEB21ER4SDEN		Date of Accident : 08/04/2021	
Third Party Insurer: MS FIRST CAPITAL		TP Vehicle No. : SHD6213Y	
Remarks : CLAIM NO.:-			

ITEM	DESCRIPTION	Qty	UNIT PRICE	AMOUNT (SGD)
1	FRONT BUMPER L	1	569.6900	569.69
2	FRONT BUMPER COVER, RH de	1	307.9700	307.97
3	FRONT HEADLAMP, RH 500/	1	569.6300	569.63
4	FRONT SIGNAL LAMP, RH 500 /	1	317.1000	317.10
5	FRONT HEADLAMP COVER, RH CA	1	276.1900	276.19
6	FRONT DOOR, RH 14/	1	2,071.5500	2,071.55
7	FRONT CORNER PANEL, RH SOL	1	505.1400	505.14
8	COOLANT RETURN PIPE THE METERS OF THE PERSON	1	235.7800	235.78
9	LESS 25%	1	-1,213.2600	-1,213.26
10	COMPANY LOGO STICKER / /	1	360.0000	200 360.00
	•			•
11	REMOVE & RENEW FRONT BUMPER, BUMPER COVER, HEADLAMP, SIGNAL LAMP, CORNER PANEL & FRONT DOOR	1 .	600.0000	550 600.00
12	REMOVE & RENEW COOLANT RETURN PIPE	1	120.0000	120.00
13	TRANSFER PARTS	1	120.0000	60 120/00
14	SPRAY PAINT FRONT DOOR, FRONT BUMPER & CORNER PANEL	1	550.0000	Son 550.00

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

Contact Number (HQ)

Date:

Acknowledged by Repairer
Signature: No.1, Sunview Road, #08-15 Eco-Tect @Sunview, Singapore 627615

: (Tel): 6355 9014 (Purchasing Dept.) 6355 9015 (Sales Dept.)

(Fax): 6254 0424

: venda_eng@singnet.com.sg









C/F



0.00

Page 1 of 2

Mailing Address

E-mail



Venda Engineering & Trading Pte Ltd

GST / Company Reg No.: 200411725H

Quotation

From:

VENDA ENGINEERING & TRADING PTE LTD

8 TUAS AVENUE 18 SINGAPORE 638892

Officer in Charge: HOH PEI JIN

Tel: Email:

37

41 42 43

153

15

15

15

11

1

Customer:

GOLDBELL LEASING PTE LTD

59 SENOKO ROAD SINGAPORE 758123

Attn::

Tel: 6494 2800

Fax No.: 6861 7097

Quotation No. : CQO21-0410027		Terms: 30 DAYS	
Vehicle No.: YQ927R Chassis No.: FEB21EA30160		Policy Number : 29146062	
Model: CANTER FEB21ER4SDEN		Date of Accident : 08/04/2021	
Third Party Insurer: MS FIRST CAPITAL		TP Vehicle No. : SHD6213Y	
Remarks : CLAIM NO.:-			

ITEM	DESCRIPTION	Qty	UNIT PRICE	AMOU	NT (SGD)
				B/F	0.00

Resul
Hp 9000068
6 days
L/S
12/04/21@1600
Resur after repair

Remarks: CLAIM NO.:- Sub Total Discount GST(7.00%)

5,389.79 (0.00) 377.29

Total (SGD)

5,767.08

We accept the above quotation.

Authorised Signature

Customer's Name & Signature Company Stamp/Date

Please conduct the survey at Venda Engineering @ 8 Tuas Avenue 18 Level 5 Singapore 638892

Page 2 of 2

Mailing Address
Contact Number (HQ)

E-mail

: No.1, Sunview Road, #08-15 Eco-Tech@Sunview, Singapore 627615

: (Tel): 6355 9014 (Purchasing Dept.) 6355 9015 (Sales Dept.)

(Fax): 6254 0424

VENDA ENGINEERING & TRADING PTE LTD

: venda_eng@singnet.com.sg











SINGAPORE ACCIDENT STATEMENT

Please report <u>correctly</u> 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 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 08/04/2021 22:50 (SGT) **Date of Accident** 08/04/2021 14:20 (SGT) **Exact Location of Accident** TPE, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Manual 2998

Vehicle Registration Number **YQ927R**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner GOLDBELL LEASING PTE LTD Company Reg No 1XXXXX196N **Email Address** isaacngcl@gbl.com.sg Mobile Phone No (Phone) +65-64942833 Alternative Phone No (Office) +65-64942833

VEHICLE PARTICULARS

Manufacturer

Mitsubishi Model FEB21ER4SDEN 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? No - Claiming third party Vehicle Category Commercial vehicle Transmission

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd. Type of Coverage ThirdParty Fleet Policy Yes **Policy Number** 29146062 Cover Note Number

DRIVER

Name of Driver PARAMEISVARAN A/L VALOO Passport No/FIN FXXXX917K

Vehide Colour Vehicle Calego_s 14/09/1975 Date Of Birth Outdoor Occupation 03/04/2009 Date Of Driving Pass 12 YEARS Driving experience Male Gender (Phone) +65-91218377 Mobile Number Alt. Phone Number cammy@gmcgroup.com.sg **Email Address** NIL **Address** Address complement Postcode No Is the driver the policyholder? If No, Relationship of the Driver with the Insured Hirer No 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 Collision - Change/cross lane Type of Accident **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? Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name **NOT APPLICABLE** Gender Male **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 08/04/2021 AT AROUND 2:20PM, I WAS DRIVING MY TRUCK ON LANE 4 OF TPE TOWARDS YISHUN, WHILE TRAVELING STRAIGHT AND NEARING EXIT 13, VEHICLE B SUDDENLY FILTER INTO MY LANE FROM LANE 2 AND COLLIDED INTO MY TRUCK. MY TRUCK SUSTAINED FRONT RIGHT SIDE DAMAGES. MY RIGHT HAND IS FEELING PAIN NOW. I AM GOING TO SEE A DOCTOR LATER. ATTACHMENT(S) Are accident photos available for attachment? No Was there any video captured by Car Camera? No Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1**

SHD6213Y

Toyota

Prius

Accident report SS1821480001

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant Vehicle Colour Vehicle Category Taxi Name of Driver LIM JIT FATT SHINO NRIC No SXXXX737H **Contact Number** (Phone) +65-97414444 Address Address complement Postcode Insurance Company Name Nature Of Damage LEFT SIDE PORTION Details of property damaged in accident **VEH B** No. Of Passenger (Including Driver) PASSENGER 1 Name **NOT APPLICABLE** Gender Female

INJURED PERSONS DETAILS

INJURED 1

WITNESS DETAILS

WITNESS 1

 Name
 ROSE

 Phone
 (Phone) +65-88039235

 Email

- HALL HOTTER
- 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 <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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) 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.

2.35 p.m.

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.:

Page 4 of 21

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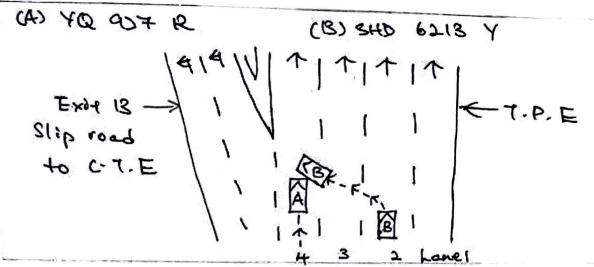
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DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ALSCRIBE CIRCUMSTARCES OF THE ACCIDENT
on objoy(2021 at cround 2.20 p.m., I was drive my truck (Ueh. A YQ 927 R) on Lane 4 of 7 f. towards Yishun. While traveling straight and nearing Exit 13, Ueh. 13 (SKD 6213 Y) sudd
my truck (Uch. A YQ 927 R) on have 4 of 7 F
towards Viction. While traveling etrainty and
nearing Exit 13 Ush 18 (SKB b213 V) sudd
filter into my lane from Lane 2 and collists
litter into my lane from Lane 2 and colliste late my truck. My truck sustained front
right gode damages. My right hand is feeling
pain now. I am soing to sex a doctor later.
3 7 3 7 3 7 7
ECLARATION
We declare the foregoing particulars are true in every respect.
08/04/2021 Deans

Policyholder's Signature Date & Time:

Complete Server to the form . .

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

ack to OneMotoring

quire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	and an all and the contract of
Owner ID:	Company
COMPLETE	196N
Vehicle No.:	
Vehicle to be Exported:	YQ927R
Intended Deregistration Date:	No
Vehicle Make:	13 Apr 2021
	MITSUBISHI
Vehicle Model:	ÇANTER FEB21ER4SDEN
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	4P10D75318
Chassis No.:	FEB21EA30160
Maximum Power Output:	-
Open Market Value:	\$39,259.00
Original Registration Date:	15 Jul 2019
First Registration Date:	15 Jul 2019
Transfer Count:	0
Actual ARF Paid:	\$1,963.00
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PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount:	\$0.00
COE Expiry Date:	14 Jul 2029
COE Category:	
COE Period(Years):	C - Goods Vehicle & Bus
PQP Paid:	\$22,903.00
COE Rebate Amount:	\$18,901.00
Total Rebate Amount:	\$18,901.00

The information contained herein is correct as at 13 Apr 2021

Home » Used Cars » Car (S) Pte Ltd » Mitsubishi Fuso Canter FEB21

Mitsubishi Fuso Canter FEB21

Overview

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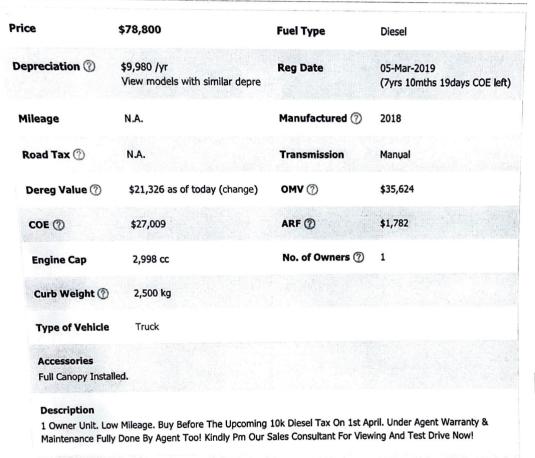
Research

Photos

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PREMIUM AD





Category

Premium Ad Car

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Resources

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Afraid of lemons? Request to have this car evaluated professionally. Find out more

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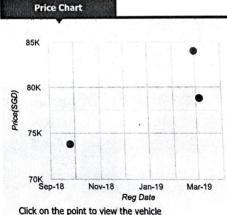


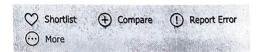


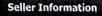












Car (S) Pte Ltd

Screw MZUX40, OLDERNY 66.UU 66.00 Damaged Switch.Press.Sensor.Brk. 38.00 38.00 **Damaged** Pressure Switch.Park.Brk.Eei 61.00 61.00 Damaged Switch.Press.Sensor.Brk.

1/2