Date/Time, File Pass to? Days Of Repair: Preli. Report

Final Report

: Site Insp

Interview

Resurvey No. of Trip:

Photos

S+RS. Others

Report Format: Lump Sum / I.B.I: (\$

Date/Time, File Return to?

1)

2)

Tech. Invs (\$ Weekend (\$

Add Fee:

TOTAL

Survey Fee:

Transportation:

## MAH LIAN MOTOR VEHICLE REPAIRER

M/S: MS FIRST CAPITAL INSURANCE LIMITED

FAX: -

36 Robbinson Road

#16-01 City House

Singapore 068877

ATTN: Motor Claim Department \ 8782 0115

Claim Type:

Your Ref No:

ENVOTEK ENGINEERING Third Party

Accident Date: TP Veh Reg No:

06/05/2021 XD4764Y Estimate No:

Date:

Policy No:

06 May 2021 20-MK000528-R02

ES1700867

Veh Reg No: XE2068G Make/Model: SCANIA

> P360CB6X4MHZ YS2P6X40005423546

Chassis No: Engine No:

6939301

Reg. Date: 15/08/2016

## Estimate Repair Cost to Vehicle No: XE2068G

	Description	U/Price	Quantity	List Price	Amount
	Net Price			<u>S\$</u>	<u>S\$</u>
1	Hooklift Sliding Arm Assy Cra Doged	13,000.00	1 SET	13,000.00	9500
	, ,			13,000.00	13,000.00
	Labour				13,000.00
2	Labour to dismantle & refit full sliding arm ,sliding arm cylinder bushing & shaft , sk arm bushing & shaft , sk cylinder bushing & shaft , full set sliding arm cast nylon slider .	6,800.00	1 JOB	6,800.00	2200
3	To spray & painting whole hooklift.	1,500.00	1 JOB	1,500.00	600
4	To rust proofing.	680.00	1 JOB	A 680.00·	
				8,980.00	8,980.00
				Total	S\$ 21,980.00
			Add G	ST @ 7%	1.538.60

TOTAL: SINGAPORE DOLLAR TWENTY THREE THOUSAND FIVE HUNDRED EIGHTEEN AND CENTS SIXTY ONLY

Not Arthurs Llow (1/8/M

1/5 \$ 9000 1/2ms. For MAH LIAN MOTOR VEHICLE REPAIRER

Total Amount Payable

S\$ 23,518.60

AUTHORISED SIGNATURE

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:

SB0121570001 / Ban Choon Motor Works ENTRY DATE & TIME: 07/05/2021 10:29 (SGT) SUBMITTED BY: Ng Tian Chuan VERSION: 1 (07/05/2021 10:29 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

  2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

  3. Information provided must be as truthful and accurate as possible. Any wiltur misrepresentation or witholding of material facts may allow insurance companies to repudiate. 3. Information provided must be as trusting and accurate as positions, you profiled 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 07/05/2021 10:29 (SGT) Date of Accident 06/05/2021 09:20 (SGT) **Exact Location of Accident** West Coast Pk. Singapore Additional Location Information WEST COAST HIGHWAY Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

XE2068G

12742

INSURED/POLICYHOLDER Is company? Yes

Name Of Registered Owner **ENVOTEK ENGINEERING PTE LTD** Company Reg No 2XXXXX830K **Email Address** laykeng.low@teeinfra.com Mobile Phone No (Phone) +65-98281463 Alternative Phone No (Office) +65-63831703

VEHICLE PARTICULARS

Vehicle Registration Number

Manufacturer Scania Model P360CB6X4MHZ

Exact purpose for which vehicle was being used at time of **Employment** 

Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Auto

INSURANCE COMPANY

CC

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Type of Coverage Comprehensive Fleet Policy No

Policy Number 20-MK000528-R02 Cover Note Number

DRIVER

Name of Driver LIM WUI HUA SXXXX924I

 Date Of Birth
 08/05/1960

 Occupation
 Outdoor

 Date Of Driving Pass
 17/03/1986

 Driving experience
 35 YEARS AND 2 MONTHS

 Gender
 Male

 Mobile Number
 (Phone) +65-98281463

 Alt. Phone Number

 Email Address
 laykeng,low@teeinfra.com

 Address
 BLK 232 PASIR PIS DRIVE 4

Address BLK 233 PASIR RIS DRIVE 4 #07-492
Address complement -

Postcode 510233
Is the driver the policyholder? No
If No, Relationship of the Driver with the Insured Employee
Does Driver Own Other Vehicles? No

#### 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?

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? No 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?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

 Vehicle Registration Number
 XD4764Y

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Commercial vehicle

 Name of Driver
 GOH CHEE KEONG

 NRIC No
 SXXXXX529H

 Contact Number
 (Phone) +65-97828559

 Address

CV	CY	~ .	-	٠.

	ا مما	.	  . A:	XE 2068 G
-		-	B.:	X0 4764 Y
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Accident Date & Time :	06/05/2021 09:20 AIL	
Accident Location :		/p· ?=/s)
I was driv	ing Straight along West Co	east Highway on Center Lans
There was Road	3 11 3	1
try Vehule Was	-11	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
an big impact &		den . I All that there was
Course of		o my Velucie rear fortion
thusta Domaged	To my Vehicle	
	ting Only D Own Damage Thin	d Party Claim at other workshop (OD/TP
ARAHON PORTE PARTIC	"IMPORTANT NOT	
A LE RUNG THE PRINCE	Or.	P-0-10
holder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
& Time:	(If driver is not the policyholder)	Name:

Accident report SB0121570001

# > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	persons a finished an experimental and personal and the first transfer of the first tran
Owner ID Type:	Company
Owner ID:	830K
Vehicle Details	W. Carlotte and Ca
Vehicle No.:	XE2068G
Vehicle to be Exported:	No
Intended Deregistration Date:	11 May 2021
Vehicle Make:	SCANIA
Vehicle Model:	P360CB6X4MHZ
Primary Colour:	Multicolor
Manufacturing Year:	2016
Engine No.:	6939301
Chassis No.:	YS2P6X40005423546
Maximum Power Output:	
Open Market Value:	\$108,407.00
Original Registration Date:	15 Aug 2016
First Registration Date:	15 Aug 2016
Transfer Count:	1
Actual ARF Paid:	\$5,421.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	14 Aug 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$25,792.00
COE Rebate Amount:	\$13,561.00
Total Rebate Amount:	\$13,561.00

The information contained herein is correct as at 11 May 2021