ASS. REC. BY:	7714
nneth	ASSIGNMENT
From: Date:	Veh No: SMP1261T Yr Regn: OF 16
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Moyer /
OD VIP WS I TP RES / OD RES / EVA / INV / N	Truck / Trailer or
To Inspect Vehicle No:	
at Workshop m/s	
of	
Insured:	Sp.Reading 73006 T/Radio: Insured / Std / NI / NA Eng/No:
Policy No.	C/No: TT1+BJ146X0209308.
Claims No.	Gen. Cond: Geod / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Ingree/Jammed/Leaked/Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD/A/Rim or
Ext. show	Tyre Size: F: 215/55R17
(Policy Condition)	1/16 Size. F: 2.3/33/72
Remark: The veh had commenced its	N/S O/SO BS / DUN / EXNOVA / GY / FS / LIZA / MIC OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	
IDAC Accident Rport: Consistent? : Yes	s or No R/Bal 7
GIA / PR Seen: Consistent?: Yes	s or No UBal. 7
Est. Repairs: 04 days Res.: Yes	
Lum Sum: 20 % 3 Val.: Yes	
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
And the second s	Vehicle: IN/OUT OIS 15-1
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	A CONTRACTOR OF THE CONTRACTOR
	Control of the contro
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NAS (NA)
	100 mm 1
	grant Calendar Commence of the Calendar
ata/Terro, File Pass to? : Prell. Report	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Fee:
uta/Firne, File Return to?	Transportation:
	Add Fee: : Site Insp (\$)_s · RS_s
	: Interview (\$), Fig. 5
eport Format:	Tech Invs (\$) Others
ump Sum / I.B.I: (S	Weekend (\$
	ICTAL

Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg GST:201001158E RCB NO:201001158E

AIG ASIA PAFIFIC INSURANCE PTE LTD M/S:

ES219063232/YISHUN Estimate No: 06 Jul 2021 Date:

Policy No:

5112827241-01

SMP1261T Veh Reg No: Make/Model:

TOYOTA TOYOTA LEXUS ES250 LUXURY

A/T S/R

Not Nother Motor Claim Department Perry After Paint WS Ref: TP/AIG 4day,

Chassis No:

JTHBJ1GGX02093045

Claim Type:

Third Party

Engine No: Reg. Date:

2ARF221181 15/07/2016

03/07/2021 Accident Date: **SMT1381J** TP Veh Reg No:

	Estimate Repair Cost to Veh Description	U/Price	Quantity	List Price <u>S\$</u>	Amount <u>S\$</u>
1 2 3 4 5 6 7 8	FRONT RH DOOR FRONT RH DOOR GLASS FRONT RH DOOR GLASS OUTER MOULDING FRONT RH DOOR GLASS REGULATOR FRONT RH DOOR GLASS CHANNEL FRONT RH DOOR INNER RUBBER FRONT RH DOOR TOP HINGE FRONT RH DOOR FRAME STICKER	1,413.60 1,110.90 172.70 218.50 170.80 282.60 97.50 128.60	1 PC 1 PC 1 PC 1 PC 1 PC 1 PC 1 PC 1 SET	1,413.60 1,110.90 172.70 218.50 170.80 282.60 97.50	17222
9	FRONT RH SIDE MIRROR	2,788.20	1 PC Less 25%	2,788.20 6,383.40 1,595.85	4,787.55
10	ASSY,INNER BOARD,RUBBER,SIDE MIRROR,KNOCK & REPAIR FRT RH FENDER,FRT RH W/SCREEN PILLAR &	600.00	1 LA	600.00	5001
11	REALIGN THE SAME PUTTY & RESPRAY ON FRT RH W/SCREEN PILLAR,FRT RH FENDER,FRT RH DOOR,SIDE MIRROR & ALL AFFECTED AREAS (PEARL WHITE)	900.00	1 LA	900.00	7001
12 13 14	REMOVE & REFIX FRT RH DOOR GLASS TO RESET LOCK SYSTEM AND SIDE MIRROR	60.00 50.00 30.00	1 LA	60.00 50.00 30.00 1,640.00	1,640.00
			Add G	Total ST @ 7%	S\$ 6,427.55 449.93

MC Auto Consultants hence notify Repairer of the following:

- urvey before/after spray painting
- play damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No Magai modification(s) is allowed
- nentary item(s) must be resurveyed and ect to final approval from Insurance Company

Acknowledged by Repairer

For Cheng Hoe Motor Pte Ltd

Total Amount Payable

S\$ 6,877.48

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 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

05/07/2021 13:12 (SGT) Date of Submission Date of Accident 03/07/2021 23:50 (SGT) Exact Location of Accident Singapore Additional Location Information Along Lentor Ave Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SMP1261T**

INSURED/POLICYHOLDER

Name Of Registered Owner KOH YEOK BENG NRIC No S6922961A Fmail Address DOG MARTINS@YAHOO.COM.SG Mobile Phone No (Phone) +65-91788787 +65-91788787 Alternative Phone No

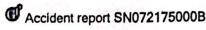
VEHICLE PARTICULARS

Lexus Manufacturer Es250 Model 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 No - Claiming third party your vehicle? Private car Vehicle Category Auto Transmission 2500 CC

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy 5112827241-01 Policy Number Cover Note Number

KOH YEOK BENG S6922961A



Accident report SNU72175000B

A - SMP (26) T B - SITC (146) R C - SMT (38) C T 7 LENTOR AVE DESCRIBE CIRCUMSTANCES OF THE ACCIDENT REPER TO BULGE REPORT DECLARATION Vive declare the foregoing particulars are true in every respect. Proportion of Signature Description of Signature Description of Signature One & Type C S 07 2011 Gas a Time NILLICIAN INS. 5017 H NILLICIAN IN		e is his minimum.	A TAKE		-	
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Date & Tirpe: 107/001 (If driver is not the policyholder) Name: LOO HOW To Signature	1	-B-			HOLO	
OS 107 20211 Date & Time: Name: LOO HAN PTO Grature	Policy	holder's Signature & Tirpe:	Oriver's Signature		Reporting Centre Perso	ong as less
	0	5/07/20211	Date & Time:	(Oscynoider)	Name: LOO HAA NRIC/FIN No.:	(Plo nature





1 of 3

Report No. T/20210704/2039

Police Station Of Origin: Sembawang N.P.C

4 Sembawang Crescent SINGAPORE

757633

Tel No: 1800-5549999

REPORT OF A TRAFFIC ACCIDENT

 Date/Time Report Made:
 Vide Report No.:
 Station Diary No.:

 04/07/2021 14:22
 F/20210703/0318
 30

C II C I I C I C I C I C I C I C I C I			172021070070010				
Informa	nt's Partic	ulars					
Name of KOH YE	Informant: OK BENG	The state of the s	Address: 50 CANBERRA DRIVE #11-1	8 SINGAPORE 768438			
ID Type	/ ID No.: D / S69229	61A	Contact No.: Home/Office:	Mobile: 91788787			
Nationality: SINGAPORE CITIZEN Sex: Age: Date of Birth: Male 51 28/07/1969		ΈN	Email:				
		The state of the s	Type of Informant:				
Race: Chinese			Language: English	Institution / School Name:			
Occupation: BUSINESS DIRECTOR			Driving Licence Information: Class: 3	Date of Expiry:			

Type of Accident:	Injury Conveyed By Ambul	Drink lance Drive No		A.v.	Type of Location Flyover
Location: LENTOR AVE	:NUE				
Weather:		Road Surface		Road	d Speed Limit:
Weather: Clear		Road Surface Dry	e:	Road	d Speed Limit:
	Way	The second secon	La de la companya de		ic Volume:

Vehicle No.	Type	Make	Model ****	Golor	Condition	No of Passenge
SMP1261T	Car	TOYOTA	LEXUS ES250 LUXURY A/T S/R	White	Seriously Damaged	1
SMT1381J	Car				Seriously Damaged	0

Vehicle No. Insurance Company	では、中央のでは、「十十二十十十年にある」	Details of Vehicle Insurance
Vehicle IV. I insulative Company	nce No Effective Expiry Date	Vehicle No. Insurance Company Insurance No





SHC1461K

2 of 3 Report No. T/20210704/2039

Sembawang N.P.C 4 Sembawang Crescent SINGAPORE 757633

Tel No: 1800-5549999

Police Station Of Origin:

CONTINUATION OF REPORT

Details of Ve	ehicle Insurance	建设有30.000000 00000000000000000000000000000	建设建设化等的 。	经过程- 人
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMP1261T	NTUC Income Insurance Co-Operative	5112827241-01	22/09/2020	14/07/2021
The property	Limited			

Any Pedestrian I	the state of the s				
No. of Pedestriar	ns Injured: NIL		Use of Ped	destrian Cross	sing: NA
Driver				自己是是此 了。	化 表記 医等性定性的
Name	KOH YEOK BENG			ID No.	S6922961A
Related Vehicle	NIL	And the same		Contact No.	91788787
Hospital/Clinic	NIL		35	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge NIL	Box 100 miles
No. of Days, gran	ted Medical Leave	NIL	Degree of	Injury NIL	

Brief Details.

On 03/07/2021 at about 2350hrs, I was driving along Lentor Avenue in the middle lane towards Yishun Avenue Two. While I was near the flyover where vehicle exiting from the expressway towards Lentor Avenue, I saw a vehicle, SMT1381J, beating red light while turning from junction towards where I was driving to cross over towards Ang Mo Kio side. I immediately honked and stopped the car. However, the taxi that was on the outer right lane did not see the car approaching thus collided with the vehicle. The impact was too huge and the taxi hitted the right sides of my vehicle. I have a in car camera stored in my vehicle and the Investigation Officer had took the SD card from me. As both drivers were injured, I could not exchange particulars with them as they were conveyed to hospital. I wishes to lodge this report for insurance claims.