ASSIGNMENT Veh No: GBF 23 GP Yi Regn: OS Work Truck I Trailer or Type: M.Carl I M.Cycle I Bus / Work I Corry Taxi Prime Mover Type: M.Carl I M.Cycle I Bus / Work I Corry Taxi Prime Mover Type: M.Carl I M.Cycle I Bus / Work I Corry Taxi Prime Mover Type: M.Carl I M.Cycle I Bus / Work I Corry Taxi Prime Mover Type: M.Carl I M.Cycle I Bus / Work I Corry Taxi Prime Mover Type: M.Carl I M.Cycle I Bus / Work I Corry Taxi Prime Mover Type: M.Carl I M.Cycle I Bus / Work I Corry Truck I Trailer or Type: M.Carl I M.Cycle I Bus / Work I Corry Truck I Trailer or Type: M.Carl I M.Cycle I Bus / Work I Corry Truck I Trailer or Type: M.Carl I M.Cycle I Bus / Work I Corry Truck I Trailer or Type: Size: Truck I Trailer or Type: Size: F. / 95 / 66 - 27 / Work I Size Type: Size: F. / 95 / 66 -	08/11/13) wef		1.		,		
ASSIGNMENT Veh No. GBF 23CFA Yr Regni: OS 16/16 Type: M.Carl M.Cycle Busy Tagl Lorry Taxil Prime Mover Truck Trailer or Cap Make: Ciff near Belding Std Ni Na Insured: Colors No. Colors N		REF:	CS/FU2	10096	SolUVf3		
Type: M. Carl M. Cycle / Busy Var / Lorry / Taxi / Prime Mover / Truck / Trailer or (4) Make: Ciff Colour Win, fc. Arc. Insured / Std / Nil / Na Policy No. Claims No. Sum insured: Excess: 600 Claims No. Sum insured: Excess: 600 Cloims No. Sum insured: Arc. Insured / Std / Nil / Na Make Ciff Colour Win, fc. Arc. Insured / Std / Nil / Na Policy No. Cloims No. Sum insured: Excess: 600 Cloims No. Sum insured: Insured / Std / Nil / Na Make: Ciff Colour Win, fc. Arc. Insured / Std / Nil / Na Policy Condition insured / Std / Nil / Na Gen. Cond@gd Fair / Poor / Burnt Sueering: Karder / Jammed / Leaked / Burnt or Brake: Kergler / Jammed / Leaked / Burnt or Modi: Vin I skim / Stank / Jammed / Leaked / Burnt or Modi: Vin I skim / S	,				<u>T</u>		1.1.
Type: M. Carl M. Cycle / Busy Var / Lorry / Taxi / Prime Mover / Truck / Trailer or (4) Make: Crf roe / Berlin or / Reading / 3 450 / Insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Make: Crf roe / Berlin / And / No. CNO: Tradic insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Make: Crf roe / Berlin / And / No. Insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Make: Crf roe / Berlin / And / No. Insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Make: Crf roe / Berlin / And / No. Insured / Std / Nil / NA Sop Reading / 3 450 / Tradic insured / Std / Nil / NA Make: Crf roe / Berlin / Nation insured / Std / Nil / Na Sop Reading / 3 450 / Tradic insured / Std / Nil / Na Make of Vehicle Insured / Std / Nil / Na Toy of Reading / Nation / Nati	rom:	Date:		Veh No	GRF 23	UFA Yr Regn:	05/08/16
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Sp. Reading / 3 450 TiRadic: Insured / Std / Ni / NA Eng/No: Chairs No. Sum Insured: Excess: 600 Claims No. Sum Insured: Excess: 600 Claims No. Sum Insured: Excess: 600 Steering: Kondler / Jammed / Leaked / Burnt or Modi: All / Si/Rim / STD Ai/Rim or Tyre Size: F: / 95 - 66 - 76 - 76 - 76 - 76 - 76 - 76 - 7	,)	Make [.]	Citron	Backer	c.c 1560
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Claims No. Claims No. Sum Insured: Excess: 600 Claims Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: 10DAC Accident Rport: Consistent?: Yes or No GlA PR Seen: Consistent?: Yes or No GlA PR Seen: Consistent?: Yes or No Lum Sum: % 3 Val.: Yes or No CA REP REP. 24 HRS Date: Person Contacted: A74 \$ 23390 Date / Time Action / Instruction Dep 16. NOT Held Dep 16. NOT He					15457	אַכ	
Claims No. Sum Insured: Excess: 600 (Client's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: A SUK. (DAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No CA RED / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: A74 9 23390 Date / Time Action / instruction Dep / k. NOT A C C C C Rep / Elica or Market C C C C Rep / k. NOT A C C C C Rep / Rep. / 24 HRS Vehicle: IN / OUT Date / Time Action / instruction Dep / k. NOT A C C C Rep / Elica or No C C C C C Rep / k. NOT A C C C Rep / Rep. / 24 HRS Vehicle: IN / OUT Date / Time Action / instruction Dep / k. NOT A C C C Rep / Elica or No C C C Rep / Rep / K. NOT A C C C Rep / Rep					VT 77E	RY VMG .	1460253
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(Client's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: DAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No St. Repairs: days Res.: Yes or No CA / RE) / REP. / 24 HRS Date / Time Action / Instruction Date / Time Action / Instruction Action / Instruction Action / Instruction COLC Ren repair Not Market Not Sk agree Date/Time, File Pass to? Date/Time, File Return to? Add Fee: Site Insp (\$)		Excess.	C.3		_		
Modi : Mil / SIRIM / STD A/Rim or Tyre Size: F: /95 - 65 - 7215 - Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value:	_	LAUG33.	600		/		
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Lum Sum: (A 1 RE) REP. 24 HRS (Vehicle: IN OUT Date: Person Contacted:	Est. Repairs:	days Res.: Yes	or No	D.O.A. /	4/9/21	D.O.I.	18/21
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Date: Person Contacted: A74 \$ 23390 The U/C / Chassis frame / Body Structure affected due to collision. Date / Time	CA (PE) (PED	/ 24 UDS	784C	Des. of Dam	ages : Frt / Rear /	O/S / N/S / U/C /	Rooftop or
Date/Time Action / Instruction Dep 7 k. Notf & 1600 Informed CRC Ren repair Not more than 10.5 k agrice. Date/Time, File Pass to? : Preli. Report Days Of Repair: 1) : Final Report Resurvey No. of Trip: Survey Fee: Transportation: 2) Add Fee: : Site Insp (\$)_s+Rs_si : Interview (\$) Photos			Vehicle: IN / OUT		El	,	•
Dale/Time, File Pass to? Dale/Time, File Pass to? Preli. Report Days Of Repair: 1) Date/Time, File Return to? Add Fee: Site Insp Interview Photos	Date: P	erson Contacted: 人74	# 23390	The U/C	/ Chassis frame /	Body Structure aff	ected due to collision.
1) Survey Fee: Date/Time, File Return to? Add Fee: Site Insp (\$)S + RS,SI : Interview (\$) Photos	Not	48/1610		it more	than 10.5 k	agre e.	
2) Add Fee: : Site Insp (\$)s + Rs,si : Interview (\$) Photos	1)			-	•		
Interview (\$) Photos	2)		Add Fee	: Site	Insp (\$		
Parad Farmet				=			
	Report Format :			: Tec	n. Invs (\$) Others	

:Weekend (\$

TOTAL

)

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



CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD EUNOS LINK SERVICE CENTRE



330 Ubi Road 3 Singapore 408650 Tel: 67461000 Fax: 64875857

ESTIMATE

Invoice Name & Address	Owner Name & Vehicle Info			
MS First Capital Insurance Limited	Cust No/Name	/Netlink Management Pte. Ltd.		
36 Robinson Road #16-01	Reg No/Reg Date	GBF2358A / 05/08/2016		
City House	Date In/Mileage	15/09/2021/ 134501		
Singapore 068877	Chassis No	VF77FBHYMGJ560253		
	Engine No	10JBHF3009005		
Contact No	Make/Model	CITCV/BERLINGO L2 1.6 BLUEHDI ETG		
	Colour/Trim	WPP / BK		

Account No	Terms	Date/Time Printed	CSE	Operator	All Control	WIP No	Contract of	100	Section Sectin Section Section Section Section Section Section Section Section
F0000034	Credit 1	15/09/2021/ 15:25	OD	303 / Renemer		18733			
11.	FETTING THE	Description of Goods	/ Services	Charles Charles and the	Qty I	Jnit Price	Disc%	Ar	nount
S MIPNT880									250.00
	IC/SCANNIN	G				_			L
S MIPNT880						4	9	,	100.00
		ING/WIRING SYSTEM C	N FRONT A	CCIDENT AFFECTED ARE	AS			_	
S MIPNT880							1	?	180.00
		E RADIATOR ASSY, COO	LING FAN	AND CONDENSER					
S MIPNT880		AS AND COOLANT				. ^ .	.		4480.00
		ONNET,HEADLAMPS,RHF	EENDED II	HEEL HOUSE 643		187	20		4400.00
				FOG LIGHTS, INR FRAME	ETC				
		E FRONT SUPPORT PAN							
		ALIGN ON FRONT ACCI			45				
S MIPNT980			S 11	1100	$\Gamma(\triangle)$	220	O		2750.0
		FRONT ACCIDENT AFFE	ECTED ARE	AS ()	1415		_		_, _, _,
		FENDER, FRONT BUMPER							
S MIPNT880			**************************************	·		10	\sim		200.0
TO APPLY	SEALANT K	IT ON NEW & REPAIR	PANELS						
S MIPNT880	88					Se	M	_	50.0
FRONT LI	CENSE PLAT	E WITH CASING	0					,	
M C7901P7		BONNET	15		1.00	819.00	0.00		819.0
M C7934E7		BONNET LOCK	su	-	1.00	70.00		Υ .	70.0
M C6208K7		LH HEADLIGHT		7	1.00	564.00	0.00 X	_	564.0
M C6206K7		RH HEADLIGHT		ž	1.00	537.00	0.00	,	537.0
M C7841Y2		RH FRONT FEN	DLIN	-	1.00	1128.00	0.00		1128.0
M C1679981	980	RH WHEEL HOU		47	1.00	200.00		Κ.	200.0
M C856553		RIVET WHEEL		14	10.00	1.00	0.00 C		10.0
M C1680025		UPR MLDG RAD			1.00	262.00 255.00	0.00	_	262.0
M C9810965		RADIATOR GRI		cni	1.00	162.00	0.00		255.0 162.0
M C1613573		LWR OTR STON		cn	1.00	397.00	0.00		397.0
M C1613572		FRONT BUMPER		7112	1.00	856.00	0.00	_	856.0
M C1613563		RIVET BUMPER			10.00	1.00	0.00	_	10.0
M C1609267 M C7416J2	200	BRACKETS BUM		Bul	1.00	75.00	0.00		75.0
M C/416JZ		DIVACKE 12 DOIL	FER SEI	207	1.00	75.00	0.00		/5.0

Confirm & accepted by

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced ocasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen.



CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD EUNOS LINK SERVICE CENTRE



330 Ubi Road 3 Singapore 408650 Tel: 67461000 Fax: 64875857

ESTIMATE

N 9 Address	Owner Name & Vehicle Info				
Invoice Name & Address	Cust No/Name	/Netlink Management Pte. Ltd.			
MS First Capital Insurance Limited	Reg No/Reg Date	GBF2358A / 05/08/2016			
36 Robinson Road #16-01	Date In/Mileage	15/09/2021/ 134501			
City House Singapore 068877	Chassis No	VF77FBHYMGJ560253			
Singapore section	Engine No	10JBHF3009005			
Combant No.	Make/Model	CITCV/BERLINGO L2 1.6 BLUEHDI ETG			
Contact No	Colour/Trim	WPP / BK			

	T	Date/Time Printed	CSE	Operator		WIP No	/3.5 S.2	Description 200
Account No	Terms		OD	303 / Renemer		18733		
0000034	Credit	15/09/2021/ 15:25	-	200 / 110111111	Qty	Unit Price	Disc%	Amount
	LAPPINE.	Description of Goods	ER 70	A STATE OF THE STA	1.00	60.00	0.00	60.0
4 C1613564		TOW HOOK COV		5.3	1.00	241.00	0.00	241.0
4 C1613564	780	RH BUMPER MO		_	, 2.00	222.00	0.00 10	c 444.0
4 C9812662	280	FRONT LIGHT		•	2.00	124.00	0.00	248.0
1 C9675450		FOG HEADLIGH SENSOR FRONT		1 RH I	A.00	244.00	0.00 in	976.0
1 C1611735		CTR INR STOP		811	1.00	302.00	0.00	302.0
4 C9810963		INR MLDG BUN	MPER BRAC	0.1	1.00	256.00	0.00	256.0
4 C9810895	080	BUMPER REINF	ORCEMENT	8.7	1.00	507.00	0.00	507.0
4 C7414YN		FRONT FRAME	SUPPORT	.,	1.00	325.00	0.00	325.0 92.0
4 C7104HG 4 C9811153	000	LH AIR BULK	IFAD '		1.00	92.00		92.0
		RH FAIR_BULK	EAD TIZE	- 1	` □1.00	92.00	0.00	209.0
		HARNESS_WIRE		110000	75 7.99	209.00	0.00	323.0
4 C9814655 4 C9814655		HARNESS WIRE	LOOM DE		1.00	323.00	0.00	432.0
4 C1253K4	300	MOTOR=DRIJVN	FAN L] (4.be)	432.00	0.00	15.0
4 C9665408	080	FUSE RADIATO	OR FAN		1.00	15.00	0.00	544.0
C1330Y5		RADIATOR ASS			1.00	544.00	0.00 3	796.0
1 C6455GH		CONDENSER AS	SSY		1.00	796.00 26.00	0.00	104.0
1 JJMZ3139	50	COOLANT			4.00 1.00	232.00	0.00	232.0
4 C6431N9		WASHER TANK	EQUIPE		1.00	232.00	0.00	20210
OWNER CI	AIMING O	9/2021 ALONG JALAN EU WN POLICY DVISED BY INSURANCE (4 /	6 dy	Ç		
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the Re • To res • To de	pairer of th uney belore play damaged prices are sub	a following: after spray painting Lpart(s) during resurvey	16/9/	12/	iph! Bet	lu ja	ng.	
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Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered any additional parts or labour which may be required after repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

SS11219F0001 / SPECIALISTS MOTOR PTE LTD ENTRY DATE & TIME: 15/09/2021 10:26 (SGT) SUBMITTED BY: Irene Ting VERSION: 1 (15/09/2021 10:26 (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

- 3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation to the insurance companies.

 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability.

 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 15/09/2021 10:26 (SGT) Date of Accident 14/09/2021 16:45 (SGT) **Exact Location of Accident** Jln Eunos, Singapore Additional Location Information JALAN EUNOS SLIP ROAD Country/State of Loss ... Singapore DETAILS OF OWN VEHICLE Vehicle Registration Number **GBF2358A** INSURED/POLICYHOLDER Is company? Name Of Registered Owner NETLINK MANAGERMENT PTE LTD Company Reg No 2XXXXX784C Fmail Address ratagana@netlinknbn.com Mobile Phone No. (Phone) +65-92314404 Alternative Phone No. (Office) +65-92314404 VEHICLE PARTICULARS Citroen Model Berlingo Variant Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to Yes your vehicle? Commercial vehicle Vehicle Category Transmission Auto 1560 CC INSURANCE COMPANY Name of Insurance Company MS First Capital Insurance Ltd Comprehensive Type of Coverage Yes Fleet Policy D-20096413MFCV/1 Policy Number Cover Note Number

TAGANA RAUL BUAN

GXXXX562Q

DRIVER

Name of Driver

Passport No/FIN

Date Of Birth 03/12/1973 Occupation Outdoor Date Of Driving Pass 23/11/2013 Driving experience 7 YEARS AND 10 MONTHS Gender Male Mobile Number (Phone) +65-92314404 Alt. Phone Number Email Address seebin@netlinknbn.com Address BLK 431A BEDOK NORTH ROAD #13-435 Address complement Postcode 461431 Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? **Employee** 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? Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes 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? Police Station Name Bedok South Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002448999 Alt. Police Station Phone No (Fax) +65-62446558 Police Station Address 20 Chai Chee Drive Singapore 469045 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT ATTACHED POLICE REPORT NO. T/20210914/2101 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	SMU339J
Vehicle Manufacturer	
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car



Name of Driver	
Contact Number	
Address	
Address complement	
Postcode	and the second second
Insurance Company Name	
Nature Of Damage	
Details of property damaged in a	
No. Of Passenger (Including Driv	

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formitust be completed by the Policyholder and/or the Authorised Driver.
- 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 forwarded by the insurers of the GIA Records Management Centre established by the Goneral 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lundersland, acknowledge, agree and consent that

- (a) My insurer, my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclasse and/or process my personal data/personal information set out in this [fourigh and any other personal information provided by moler 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 yershaw firms, the Monetary Authority of Singapore and any relevant overmment amono/authority (such as the ordice), 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 mating 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 Signatural / Date & Driver's Signatural / Date & Time

Sketch Plan

A - 92F 3358 A

B - 9at 3393

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Attachel	police	report	M) .	Γ/	204091	4 / 2701		 _
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Declaration

W/e declare the foregoing particulars are true in every respect.

Driver's Signature (if lines is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Policyholder's Sigr Time



REPORT OF A TRAFFIC ACCIDENT

ASSOCIATE ENGINEER

Type of Collision:

Between Moving Vehicles - Head To Rear



Date of Expiry:

Anyone conveyed by

ambulance: No

Police Station Of Origin: Bedok South N.P.C 20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999

l of 3 Report No. T/20210914/2101

Date/Time Report Made: 14/09/2021 18:09	Vide Report No.:	Station Diary No.:
Informati's Particulars	The Contract of the Participation	A PROPERTY OF THE PARTY OF THE
Name of Informant: TAGANA RAUL BUAN	Address: APT BLK 431A Bedok North Ro	#13-435 SINGAPORE 461431
ID Type / ID No.:	Contact No.:	110 100 0110/1 0112 101101

FIN NO / G0704562Q Home/Office: Mobile: 92314404 Nationality: Email: FILIPINO ratagana@netlinknbn.com Sex: Age: Date of Birth: Type of Informant: Male 47 03/12/1973 Driver Race: Language: Institution / School Name: Filipino Occupation: **Driving Licence Information:**

Class:

General information of the Accident - The second Non-Injury Drink Date/Time of Type of Location: Type of Drive: Accident: Bend Accident: 14/09/2021 16:45 No Location: JALAN EUNOS Weather: Road Surface: Road Speed Limit: Dry Cloudy Traffic Flow: Traffic Volume: Traffic Control: One Way Not Controlled Moderate

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF2358A	Van				Slightly Damaged	0
SMU339J	Car				Seriously	0

Datalla of Person Involved:	2000年,1000年
Any Pedestrian Involved; No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Bedok South N.P.C 20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999

2 of 3 Report No. T/20210914/2101

CONTINUATION OF REPORT

Name	TAGANA RAUL BUAN	and a second	4.00		
			ID No.	G0704562Q	
Related Vehicle	GBF2358A (Van)		Contact No.	00044404	
Hospital/Clinic	N		Contact No.	92314404	
r tospital/Clinic	tal/Clinic NIL		Class of	Class: 3	
			Driving Licence &	Date of Expiry: NIL	
Date Treatment	NiL	15 . 5	Expiry Date		
No. of Days gran	and Madinal Laure Live	Date Disch	narge NIL		
Divier	MUHAMMAD VISOE DIN LIANE	Degree of	Injury NIL		
Name	MUHAMMAD YUSOF BIN HASII	M	100		
	E COOL BIN I POI	W	ID No.	S8912305D	
Related Vehicle	SMU339J (Car)		Contact No.	91014229	
	9 10		COMBOL NO.	91014229	
Hospital/Clinic	NIL		Class of	Class: NIL	
			Driving	Date of Expiry: NIL	
			Licence &	- P. 7. 1112	
Date Treatment		Data Dine	Expiry Date		
No of Days areas	ted Medical Leave NIL	Date Disch Degree of	narge NIL		

Brief Details.

On 14/09/2021 at about 1645hrs, I was driving my vehicle plate bearing no. GBF2358A along the left bend from Jalan Eunos towards Sims Ave East.

Subsequently, while I was about to drive out towards Sims Ave East Rd I was looking at the on-going traffic elong Sims Ave East on the right side. My vehicle then collided onto the rear vehicle plate bearing no. SMU339J. The said vehicle was in front of me at the point of collision.

Traffic police had attended to the accident however I do not know the incident number.

I did not sustain any injuries on me however the other involved driver had a headache after the accident.

The right front bumper of my vehicle was dented and the right front headlight of my vehicle was broken after the collision.

The vehicle bearing no. SMU339J rear door was seriously dented and rear window was completely broken.





Police Station Of Origin: Bedok South N.P.C 20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999

3 of 3 Report No. T/20210914/2101

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 Informant:
Anoth
Date/Tirfie: 14/09/2021 48:09
Classification Of Case:
7
1
GNATURE

> Back to OneMotoring

ehicle Owner Particulars wner ID Type:	Common.
Owner ID:	Company 784C
/ehicle Details	764C
/ehicle No.:	GBF2358A
/ehicle to be Exported:	No.
ntended Deregistration Date:	16 Sep 2021
/ehicle Make:	CITROEN
/ehicle Model:	BERLINGO L2 1.6 BLUEHDI S&S ETG6
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	10JBHF3009005
Chassis No.:	VF77FBHYMGJ560253
Maximum Power Output:	-
Open Market Value:	\$20,234.00
Original Registration Date:	05 Aug 2016
First Registration Date:	05 Aug 2016
Fransfer Count:	1
Actual ARF Paid: ntended PARF Rebate Details	\$1,012.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount: ntended COE Rebate Details	\$0.00
COE Expiry Date:	04 Aug 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$47,889.00
COE Rebate Amount:	\$23,390.00
Total Rebate Amount:	\$23,390.00

The information contained herein is correct as at 16 Sep 2021

ОК



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