ASSIGNMENT

From: Date: 1/10/2021	Veh No: 4P 8619 H Yr Regn: 19/3/2018
Estimated Cost:	Type: M.Car / M.Cyclo / Bus / Van / Vary / Taxi / Prime Mover /
ODIA IWS/TP RES/OD RES/EVA/INV/MV	.: Truck / Trailer or
To Inspect Vehicle No: 4P 86(9H	Make: Ritsubish Canter Feb 2/ CC 2998
at Workshop m/s Bifort Auto	Colour Green NC: Insured/Std/NI/NA
of 8 Kaki 8+ Ave 4 Premier # 01-49	Sp.Reading 56891 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No: 4P10D12555
Policy No.	C/No: FEB21EA25048
Claims No.	Gen. Cond: 600d / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Infrier / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Igoder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: AN IS/Rim / STD A/Rim or
1	Tyro Size: F: 195/85/15
(Policy Condition)	R: 195/85/15
Remark: The veh had commenced its N/S 0/S	DIDUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI/
repair at the time of Inspection.	TOYO/YOKO or
Bal. or Market Value: 59, on 6) x	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 4 mm R/Bal. 4 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 4 mm L/Bal. 4 mm
Est. Repairs: 4 days Res.: Yes or No	D.O.A. 24/9/2021 D.O.I. 1/10/2021
Lum Sum: % 3 Val.: Yas or No	Survey held at Birrost Auto
CA / REV / REP. / 24 HRSWP	Des. of Damages : Frt / Renx / O/S / N/S / U/C / Rooftop or
Vehicle: IN/OUT	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
Range 4,000/2 - 5,000/2	
Recommended cor is LS \$	3050 00
RECOMMENDED SON 10 = 1	
MV 59,000/2	
PV 13291/V	Town line
NV 45, 703/2	5/10/2021
Date/line, File Pass by? : Prell. Report	Days Of Repair:
; Final Report	Resurvey No. of Trip: Survey Fee:
Onte/Tune, File Return to?	Transportation
2) Add Fed	
	Interview (\$ ) Photos
Represent:	: Tech. Inve (\$ ) Ohors
Lump Sum / LEJ: (%)	: VVe.etrand (\$
	JAYOT .

**BIFROST AUTO PTE LTD** 8 KAKI BUKIT AVE 4 #01-49 SINGAPORE 415875

TEL: 64524457 FAX: 64524584 ATT: IKHWAN HP 93290237

Estimate for YP8619H(Mitsubishi Canter)

2018

1 *REAR TAILGATE	1800.00	\$2,850.30 DD.V
1 *REAR TAILLAMP RH	1000 00	\$517.40 NDX
1 *REAR TAILLAMP LH	226-25	\$517.40 BRV
1 *REAR TAILLAMP BRACKET RH	200.2	\$196.44 NDX
1 *REAR TAILLAMP BRACKET LH		/ \$196.44 BT
4 *REAR TAILGATE HINGE	231.70	\$352.17 NELV
1 *REAR TAILGATE LOWER PANEL	31.40	\$747.35 KDX
1 *REAR TAILGATE LOWER PANEL NUMBER PLATE BRAC	KET	\$128.96
1 *REAR TAILGATE LOWER PANEL NUMBER PLATE LAMP	>	\$62.70 NDX
1 *REAR TAILGATE LOWER PANEL STEP BRACKET		\$479.30 NDV
1 *REAR TAILGATE OUTER LOCK HANDLE LH	-	/ \$221.52 Jm /
1 *REAR TAILGATE OUTER LOCK HANDLE RH		\$221.52 NDX
	2675.91	\$6,491.50
Less 10%	267.59 -	\$649.15
		\$5,842.35
	2408.32	
S/Nett		,
*REAR TAILGATE 60KM/H STICKER	10.00	\$40.00- NECV
*REAR NUMBER PLATE		\$50.00 NDX
*REAR REINFORCEMENT BAR	480.0	D \$800.00 BTV
	490.00 -	\$890.00
	770 00	
CHECK REAR WIRING AND LIGHTING SYSTEM		\$60.00 NNX
TRANSFER PARTS, ATTACHMENT FROM OLD TAILGATE	TO NEW /00 00	\$200:00
PANEL BEATING ON AFFECTED AREAS	400-00	\$1,000.00
SPRAY PAINTING ON AFFECTED AREAS	400-00	
APPLY ANTI RUST ON AFFECTED AREA	_	\$200.00 NNX
	900.00_	\$2,460.00
Total		\$9,192.35

Survey

No Resurvey rucessary Lump sum repair Repair days 4

Parts 2408.32 SN 490.00 Labour 900.00 3798.32 759.66 3038.66

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:

LS 3050/2

Tolin Min 5/10/2021

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	454D
Vehicle No.:	YP8619H
Vehicle to be Exported:	No
ntended Deregistration Date:	05 Oct 2021
/ehicle Make:	MITSUBISHI
/ehicle Model:	CANTER FEB21ER4SDEN (CBU)
Primary Colour:	Green
Manufacturing Year:	2017
Engine No.:	4P10D12555
Chassis No.:	FEB21EA25048
Maximum Power Output:	-
Open Market Value:	\$34,694.00
Original Registration Date:	19 Mar 2018
irst Registration Date:	19 Mar 2018
ransfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$1,735.00
PARF Eligibility:	No
ARF Eligibility Expiry Date:	
PARF Rebate Amount: ntended COE Rebate Details	\$0.00
COE Expiry Date:	18 Mar 2028
OE Category:	C - Goods Vehicle & Bus
OE Period(Years):	10
QP Paid:	\$20,602.00
OE Rebate Amount:	\$13,291.00
Total Rebate Amount:	\$13,291.00

The information contained herein is correct as at 05 Oct 2021

OK

MV 59,000/2 PV 13,291/2 NV 45,709/2

Talin 5/10/2021

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# Need Items for Your Car?

We have thousands of car parts & accessories to explore.

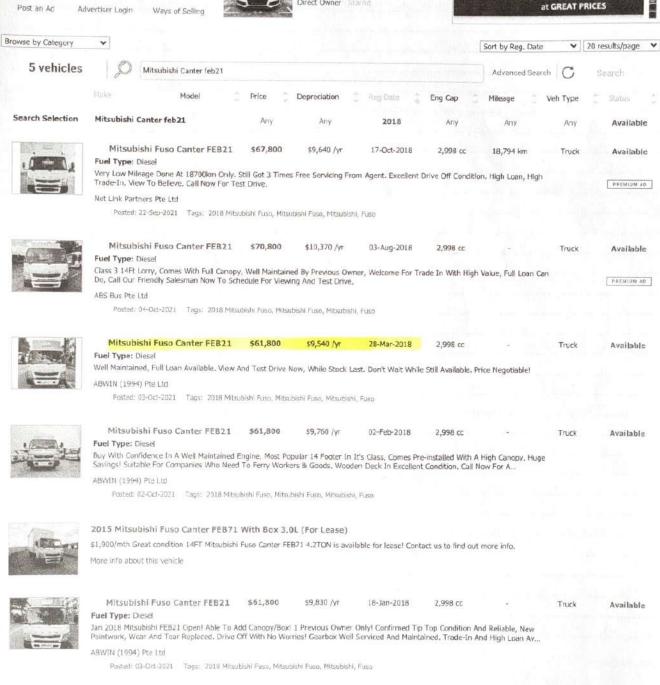
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Veh Type

Model

Save this search criteria, to get email alerts whenever a match is found.

Depreciation

Eng Cap

Mileage

Date of Accident	: 24   9   2021 Accident Time: 16 25 (24-HR-FORMAT)
Accident Place	Lorong Chuna towards Brachitel Road
Vehicle Reg. No (Car plate No.)	: YF8619A Vehicle Make/Model: MITSUSTSHIE CANTER
Insurance Company	Ergo Policy No. DM (6409496
Name of Registered Owner	: Company/Individual Lea Him (O(Metal Factory) Pte Li
ID of Registered Owner	: Cu Reg No: 1977004549 Owner's NRIC No:
	: Co Contact No: Owner's Contact No:
DRIVER'S Name	: Lee young ther DRIVER'S NRIC No: \$13167090
DRIVER'S Date of Birth	: 11/1/1958 DRIVER'S License Pass Date 12/4/1996
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Em (loyec\ Others:
DRIVER'S Address	: BIK 112 Ayunda Crescent, 1103-144
DRIVER'S Contact No./ Alt No.	:1) 90091178 2)
DRIVER'S Occupation	: INDOOR \OUTDOOR (eg. working inside or outside of an ofc)
Email Address	lection hr @ gmint-com
Weather & Road Surface	CLEAR & DRY \ RAINING & WET WITTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including Dr Was the accident reported to the pol Was there any video Captured by ca Exact purpose for which vehicle was Any injuries, if yes(name of the in	river): Name & Gender;
	Party Driver's Particulars (if any)
Vehicle Reg No: 61Y 2703C	Vehicle Reg No:
Vehicle Make\Model:	Vehicle Make\Model:
Name DRIVER:	
IC No. DRIVER:	
DRIVER'S Contact & add:	DRIVER'S Contact & add;

#### SKEIGHFLAN

### **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 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), 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 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")

TAL FA

CIKICAPORI

- (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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

Sketch Plan

Driver's Signature (If driver is not the policyholder) / Date

& Time

Witnessed by Reporting Centre Personnel

6000 LOVUA CAUSH

GY 2703 C

Describe Circumstances of the Accident

On 24/9/2021 at around 16:25 pm, I was on my way back to my
company. I was stationary at the reallight a Loprong chuan towards
Braddel Road. Suddenly, I tell a muge impart from the rear. I
went down of my vehicle and realised that I was tranged by 642703C.
III I SONGON II x

## Declaration

We declare the foregoing particulars are true in every respect.

Ma

SMI