

ASS. REC. BY:

REF:

FOL/21010801/Kt

## ASSIGNMENT

From:

Date:

Estimated Cost:

OD / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

05 days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No:

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: N/A / S/Rim / STD A/Rim or

Tyre Size:

Grum Max

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐

Prell. Report

☐

Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S - RS - SI

Fees

Others

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format:

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



ComfortDelGro Engineering

205 Braddell Road S(579701)

**ACCIDENT REPAIR ESTIMATES**

Our Ref:

Type of Claim : ODVehicle No. : GBD4004TMake & Model : NISSAN NV200 1.5 MTYear of Manufacture : 2014 OCTChassis No. : VSKYBAM20Z0078084Ins Company : MSFCI

Engine No. : \_\_\_\_\_

Excess : \_\_\_\_\_

Policy No. : \_\_\_\_\_

Date of Accident : 12/10/2021

Time of Accident : \_\_\_\_\_

Suggested Days of Repair : \_\_\_\_\_

In-house Vehicle Assessor**Repair Estimates**Case Owner : PATRICK

Signature : \_\_\_\_\_

Parts (a) Cost / List Price Items \$ 1,047.00Plus/Less 10% \$ 104.70Total of Cost / List \$ 942.30(b) Nett Price Items \$ -

Less \_\_\_\_\_

Total of Nett Item \_\_\_\_\_

(c) Special Nett Items \$ -Total Parts Cost (Appendix A) \$ 942.30Labour (Appendix B) \$ 2,130.00Total Repair Cost \$ 3,072.30

Contact No

**Frt Counter Operation**Brenda Tel: 63837730 email: brendang@sparkcarcare.com  
Rohani tel: 63837890 email: rohanim@sparkcarcare.com**Back-end Operation**Ngo Toh Wee Tel: 63837656 email: ngotw@sparkcarcare.com  
Patrick Tel: 63837441 email: patricktia@sparkcarcare.com

The above total will be subjected to 7% G.S.T.

Name of Surveyor : Kenneth  
 Company : CLK  
 Survey conducted on : 28/10/21 at \_\_\_\_\_

**Remarks By Surveyor**(a) The repair of this vehicle is not authorized / is not authorized until further notice.(b) Recommended Days of Repair : 05 day(s)(c) Resurvey : Required / Not Required

(d) Excess : \$ \_\_\_\_\_

(e) Signature of surveyor : LeDate: 28/10/21

ACCIDENT REPAIR ESTIMATESV3

# Spark Car Care

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road S (579701)  
Tel: 63837168 / 63837466 Fax: 62815767

## Spare Parts

Vehicle No : GBD4004T Case Owner : PATRICK  
Make & Model : NISSAN NV200 1.5 MT Year Manufacture : 2014 OCT  
Chassis No : VSKYBAM20Z0078084 Engine No : 0  
Sales Order : \_\_\_\_\_ Supplier : \_\_\_\_\_  
Order By : \_\_\_\_\_ Type of Claim : OD

S/N	Part Description	QTY	Cost Price	List Price	Nett Price	S/N	Disposition By Surveyor
1	REAR BUMPER	1	Bu	\$ 701.00			---
2	REAR BUMPER RETAINER RH	1	Diy	\$ 38.00			---
3	RH TAILLAMP	1	CR4	\$ 308.00			---
4	0	1					
5	0	1					
6	0	1					
7	0	1					
8	0	1					
9	0	1					
10	0	1					
11	0	1					
12	0	1					
13	0	1					
14	0	1					
15	0	1					
16	0	1					
17	0	1					
18	0	1					
19	0	1					
20	0	1					
21	0	1					
22	0	1					
23	0	1					
24	0	1					
25	0	1					
26	0	1					
27	0	1					
28	0	1					
29	0	1					
30	0	0					

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:

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

21/10/2021

**ComfortDelGro Engineering Pte Ltd**  
205 Braddell Road S (579701)  
Tel: 63837168 / 63837466 Fax: 62815767

Vehicle No. : GBD4004T  
Make & Model : NISSAN NV200 1.5 MT

Case Owner : PATRICK  
Year of Manufacture : 2014 OCT

Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.

# 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 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. 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 ..... 18/10/2021 10:54 (SGT)  
Date of Accident ..... 12/10/2021 11:30 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... BUKIT BATOK WEST AVE 2  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBD4004T

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... PUBLIC UTILITIES BOARD  
Company Reg No ..... TXXXXX045L  
Email Address ..... MOHD\_AZAHAR\_PAUWIMAN@PUB.GOV.SG  
Mobile Phone No ..... (Phone) +65-93895044  
Alternative Phone No ..... +65-93895044

### VEHICLE PARTICULARS

Manufacturer ..... Nissan  
Model ..... Nv200  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... Employment  
Are you claiming under your own insurance policy for repair to your vehicle? ..... Yes  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Manual  
CC ..... 1500

### INSURANCE COMPANY

Name of Insurance Company ..... MS First Capital Insurance Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... Yes  
Policy Number ..... D-20096479MFCV/4  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... MOHAMED ELIAS BIN YUSOF  
NRIC No ..... SXXXX419A

Accident report SC1H21AI0001

Birth	01/09/1958
Location	Outdoor
Of Driving Pass	15/02/1982
ing experience	39 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94572112
Alt. Phone Number	-
Email Address	MOHAMED_ELIAS_YUSOF@PUB.GOV.SG
Address	BLK 762 BEDOK RESERVOIR VIEW
Address complement	-
Postcode	470762
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
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?	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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	MUHAMMAD BAKRI BIN HUSIN
Gender	Male

#### 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 ( A - VEHICLE REVERSE ONTO B- VEHICLE )

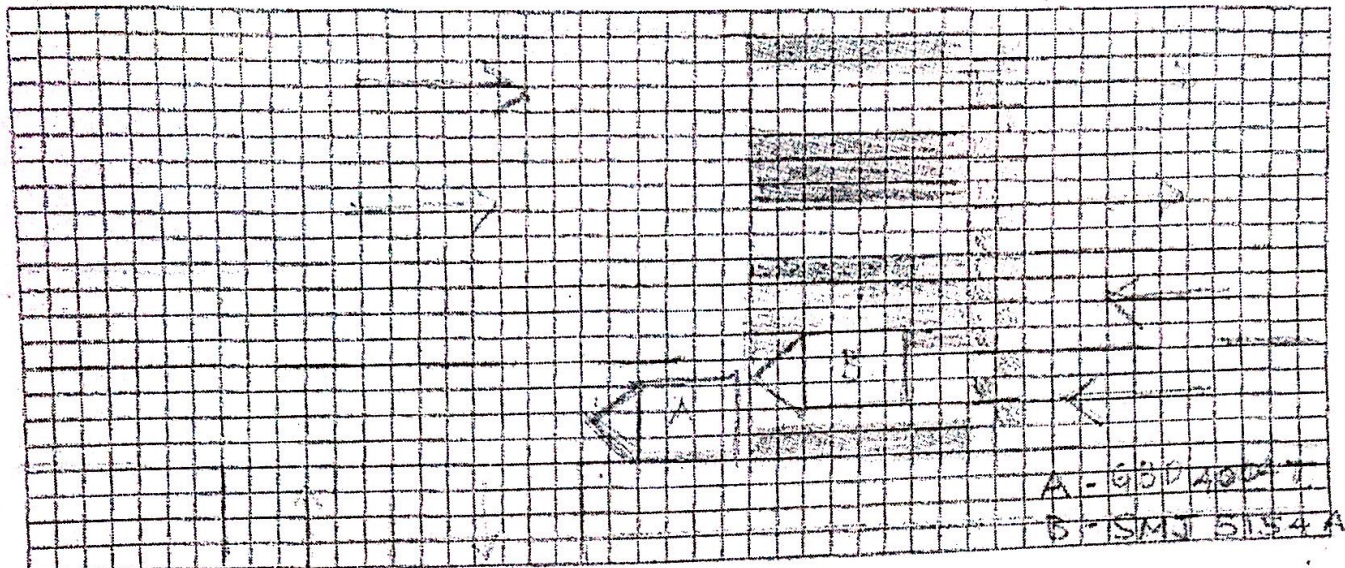
#### ATTACHMENT(S)

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	SMJ5154A
Vehicle Manufacturer	Honda
Vehicle Model	Fit
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12 Oct 2021 at approximately 11:30 hrs, Mohamed Elias Bin Yusaf was driving the PUB Service Van (GBD 4004T) to carry out maintenance work on DPH 8783 along Bukit Batok West Ave 2.

Mohamed Elias stopped the service van at the side of road and wanted to reverse the vehicle by approximately 2 metre to park directly beside the hydrant.

Before Mohamed Elias commenced with the reversing, the arrow signboard was switch on to signal any incoming vehicle behind toward the right. Concurrently, a Honda Fit was in close proximity to the service van and was unable to move safely to the next lane due to ongoing traffic. During the reversing, the right rear of the service van accidentally grazed the left side of the Honda Fit. The service van suffered a slight crack on the right rear brakelight and the Honda Fit suffered a slight dent on its left bumper. There was no injury sustained arising from this accident.

PUB National Water Agency

65 Woodleigh Waterworks

Woodleigh Complex

Blk 1 VMU Office

Off Upper Serangoon Road

Singapore 357875

## DECLARATION

I/we declare the foregoing particulars are true in every respect.

COMPARTMENT ENGINEERING PTE LTD

EXTERNAL BUSINESS DIVISION

NAME: [Signature]

POSITION: [Signature]

Supporting Officer's Signature