AS	SSIGNMENT			
From: Date:	Veh No: X 2939 & Myr Regn: 16/11/12			
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /			
OD /TP/ WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or			
To Inspect Vehicle No: XD9398M	Make: MIF FUSI c.c 17 fg			
at Workshop m/s Nellan (Oan	Colour Blue A/C: Insured / Std / NI / NA			
of	Sp.Reading \$ 3 9 / 7 O T/Radio: Insured / Std / NI / NA			
Insured: GBC2770H	Eng/No:			
Policy No. DMCVSNW00124642101	C/No: FV5/JJA0084/			
Claims No. SNM21D207403/C02/TOHHS	Gen. Cond Good / Fair / Poor / Burnt			
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or			
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or			
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or			
A	Tyre Size: F: 295 / So 222.5			
(Policy Condition)	R:			
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /			
repair at the time of inspection.	TOYO I YOKO Or			
Bai. or Market Value: & 28 K.	Front 6 Rear			
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. mm R/Bal. 6/60 mm			
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 0 mm L/Bal. 6/6/mm			
Est. Repairs: 3 days Res.: Yes or No	D.O.A. 17/1/27 D.O.I. 24/1/27			
Lum Sum: 20 % 3 Val.: Yes or No	Survey held at			
CA / REV / REP. / 24 HRS 5 694	Des. of Damages : Frt / Rear O/S / N/S / U/C / Rooftop or			
Vehicle: IN / OU Date: Person Contacted: / 05 (/ 25 c)	1 1			
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.			
	(Red 11,472.53, 69%)			
Date/Time, File Pass to? : Preli. Report 1) : Final Report Date/Time, File Return to?	Days Of Repair: 3 Resurvey No. of Trip: 1 Survey Fee: Transportation:			
2) 22/2/22-typist Add Fe				
	: Interview (\$) Photos			
Report Format : Merimen	: Tech. Invs (\$) Others			
Lump Sum / 1.B.l. : (\$ 5000	:Weekend (\$			

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Business
Owner ID:	695X
Vehicle Details	
Vehicle No.:	XD9398M
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Jan 2022
Vehicle Make:	MITSUBISHI
Vehicle Model:	FV51JJD4RDEA
Primary Colour:	White
Manufacturing Year:	2012
Engine No.:	6M70453838
Chassis No.:	FV51JJA00941
Maximum Power Output:	
Open Market Value:	\$109,658.00
Original Registration Date:	16 Nov 2012
First Registration Date:	16 Nov 2012
Transfer Count:	1
Actual ARF Paid:	\$5,483.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	15 Nov 2022
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$59,111.00
COE Rebate Amount:	\$4,790.00
Total Rebate Amount:	\$4,790.00

The information contained herein is correct as at 24 Jan 2022

OK

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CNY Special! Merc Benz C200 Mild Hybrid Sport \$0 DP!

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2 vehicles Search Selection Mitsubishi Fv51

Post an Ad

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V

Make

Mitsubishi Fv51 Model

Price

Depreciation Any

Reg Date 2012 Eng Cap

Mileage Απγ

Sort by Date Posted

Advanced Search

Veh Type

Status Available

✓ 20 results/page

Search

Mitsubishi Fuso Super Great FV51J Tipper (New 5-yr COE)

\$88,800

Any

\$17,750 /yr

15-Oct-2012

12,882 cc

Any

Truck

Any

Available

Fuel Type: Diesel

10 Wheeler Tipper Lorry, High Loan, High Trade In Is Available, Call Now For Arrange Viewing!

Convince Auto

Posted: 09-Jan-2022 Tags: 2012 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso



Mitsubishi Fuso Super Great FV51J (New 10-yr COE)

\$113,600

\$11,350 /yr

18-Jul-2012

12,882 cc

Truck

Available

Fuel Type: Diesel

Posted: 17-Dec-2021 Tags: 2012 Mitsubishi Fuso, Mitsubishi Fuso, Mitsubishi, Fuso

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

Make

Model

Price

Depreciation

Reg Date

Veh Type

Status

✓ results/page

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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 wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate actions the provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

- of the insurance companies.

 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

20/12/2021 17:38 (SGT) Date of Submission 17/12/2021 09:35 (SGT) Date of Accident Kranji Rd, Singapore **Exact Location of Accident** KRANJI ROAD TOWARD TURF CLUB AVE (JUNCTION ROAD) Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

XD9398M

Mitsubishi

Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? MAJESTIC CIVIL ENGINEERING Name Of Registered Owner 8XXXX695X Company Reg No MAJESTICIVIL2014@GMAIL.COM **Email Address** (Phone) +65-93694505 Mobile Phone No +65-93694505 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Fv51j Model 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 No - Claiming third party your vehicle? Commercial vehicle Vehicle Category Manual Transmission 12882 CC

INSURANCE COMPANY

AXA Insurance Pte Ltd Name of Insurance Company Comprehensive Type of Coverage No Fleet Policy GA396393 Policy Number Cover Note Number

DRIVER

ZHANG DANIAN Name of Driver Passport No/FIN GXXXX992T

Date Of Birth 30/12/1977 Occupation Outdoor Date Of Driving Pass 04/02/2020 Driving experience 1 YEAR AND 10 MONTHS Gender Mobile Number (Phone) +65-81549960 Alt. Phone Number Email Address MAJESTICIVIL2014@GMAIL.COM Address BLK 109 SIMEI STREET 1 #08-714 Address complement Postcode 520109 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 - Change/cross lane
Weather Conditions Clear
Road Surface Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

No

PASSENGER 1

Name MAJESTIC EMPLOYEE
Gender Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

I WAS TRAVELLING ALONG KRANJI ROAD & I WAS DRIVING STRAIGHT TOWARD TO TURF CLUB AVE ON LANE 2. OUT OF SUDDEN ,VEHICLE B FROM MY LEFT DRIVING VERY FAST & TRYING OVERTAKE MY VEHICLE & CUT RIGHT ONTO MY LANE . HIS VEHICLE REAR RIGHT SIDE HIT ONTO MY VEHICLE FRONT LEFT PORTION CAUSED DAMAGES . THIRD PARTY AT FIRST WANT TO PRIVATE SETTLEMENT . IN THE END ASK US TO CLAIM AGAINST HIS INSURANCE .

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

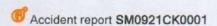
Yes

Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBC2770H
Vehicle Manufacturer Toyota
Vehicle Model Dyna



Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	
Address complement	•
Postcode	·
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

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 for 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.
- 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.
- The report will be forwarded by the incurers 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.
- By the lodgment 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)

I understand, 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 insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - 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")
- (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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (c) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (iii) for complying with requirements under any regulations, laws or court orders.

X

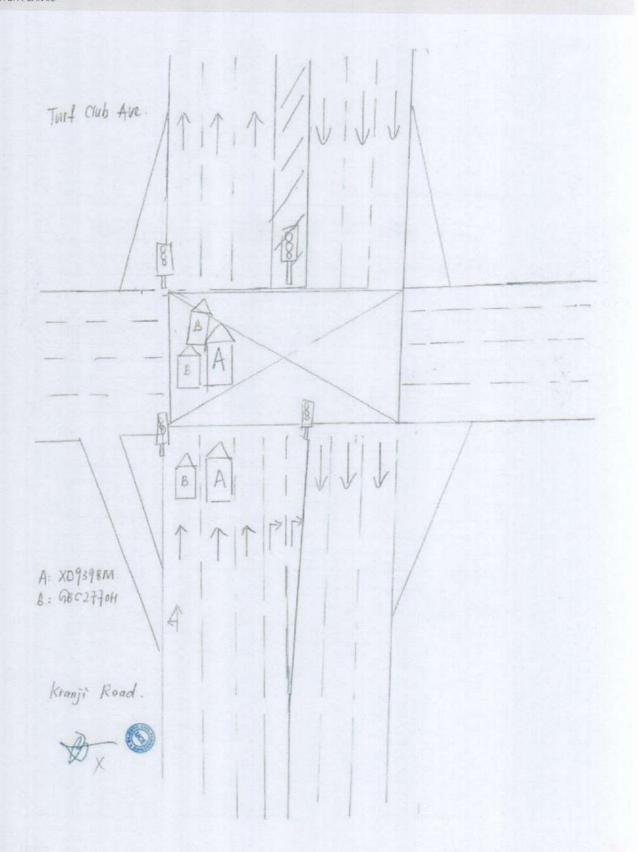
Policyholder's Signature Date & Time: #

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.

1

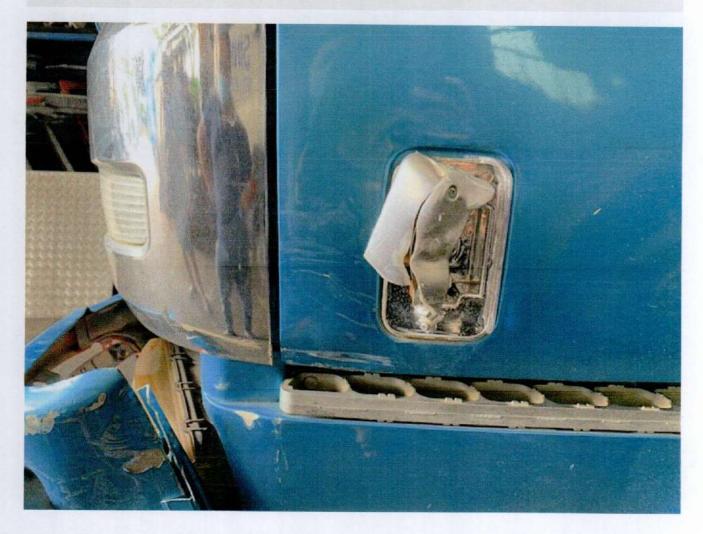
SKETCH PLAN				
ESCRIBE CIRCUMSTANCES	OF THE ACCIDENT			
			,	
I Was Trai	utling along kranji	Koad & I	was driving ST	traight
				0
4 1 1 7 1	Out Air on law	2 A.4 d	Ruddon Volich	F.
TOWARD TO INTY	Club Ave on lane.	C. UNI OF	CHESTAN, VINCE	0
Love In 1014 N	War And I fact	truing ove	stake My Vehic	10 1
THUM THU THET U	HINNY VERY 1-51 2	(Jan	THINE O TOTAL	16 34
cut right onto	my lane.			
hio Vehicle Har	hiving Very Fast & my lane. right side hit on	to my Veh	icle front left	portion
This rent test	U			1
caused domages				
U				
711 0 1	al 1 1 m d	t. Duta	cottlessent 7	e the
Inited Parti	y at first want	10 private	SETTLEMENT	· mt
_				
and ack me to	Claim against	his Inoura	vet.	
Aud not no la	- Colonial	- Arthur		
DECLARATION				
/We declare the foregoing parti	culars are true in every respect.			
			101	
AT TO	90		(UKL	
A			Reporting Centre Personnel	c Sumanum
Policyholder's Signature	Oriver's Signature (If driver is not the policyhol		Reporting Centre Personner Name:	- John Marine
Date & Time:	the order of not the posityhou		NEIC/FIN No.:	



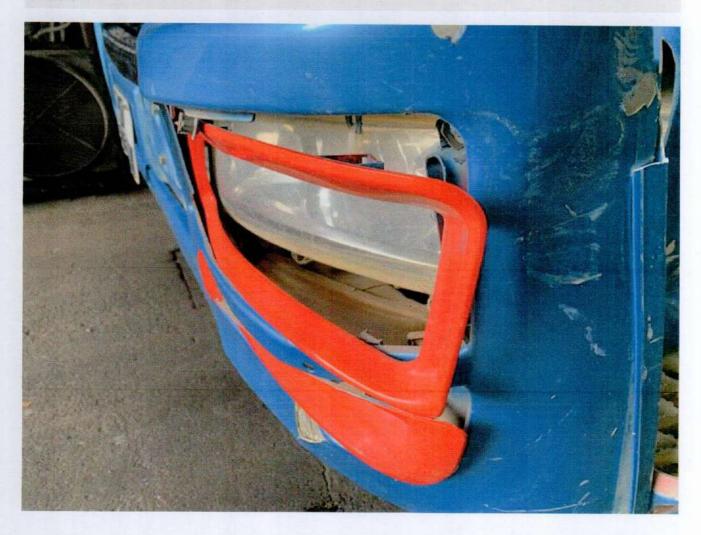


















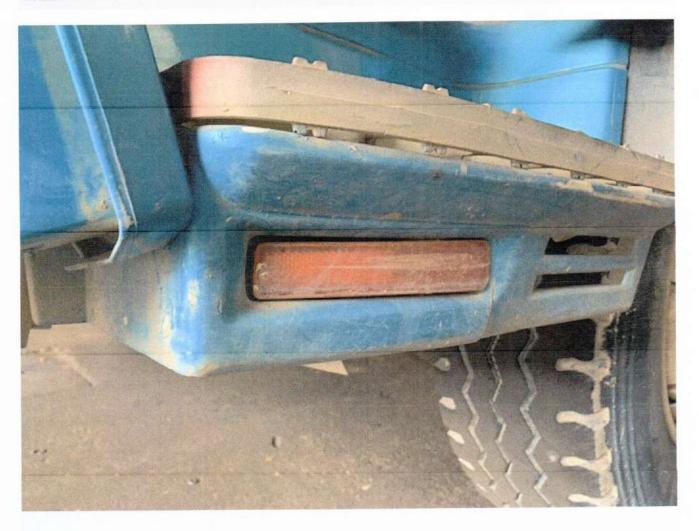




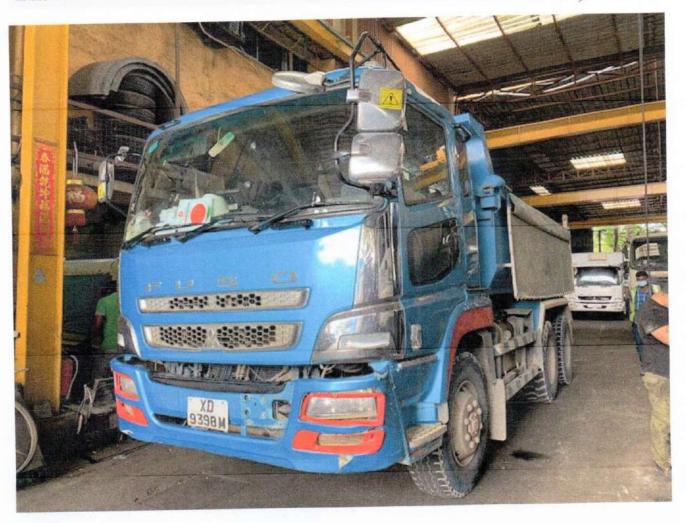


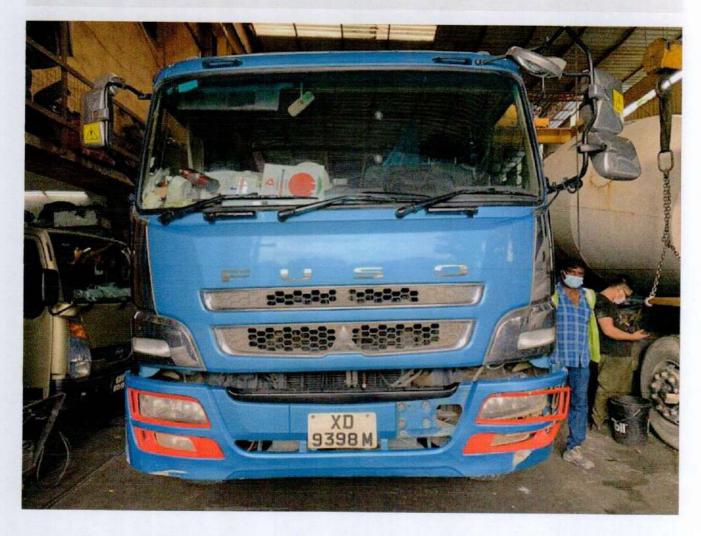


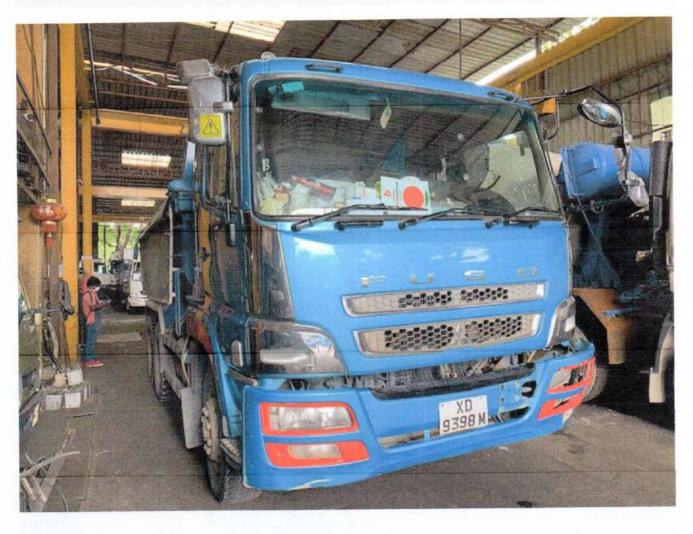


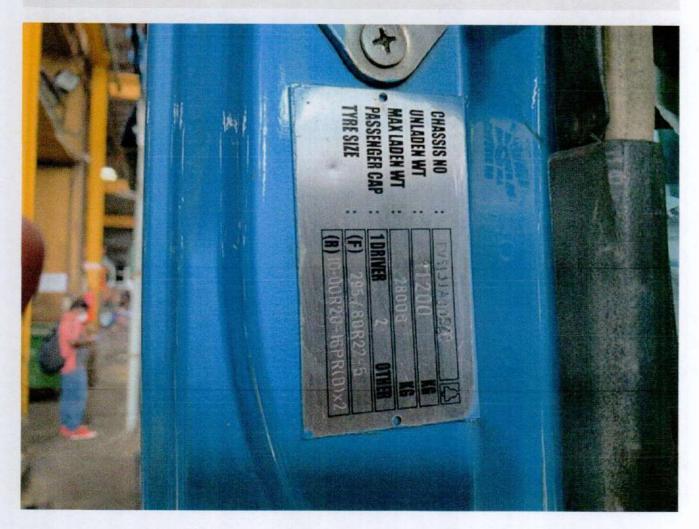


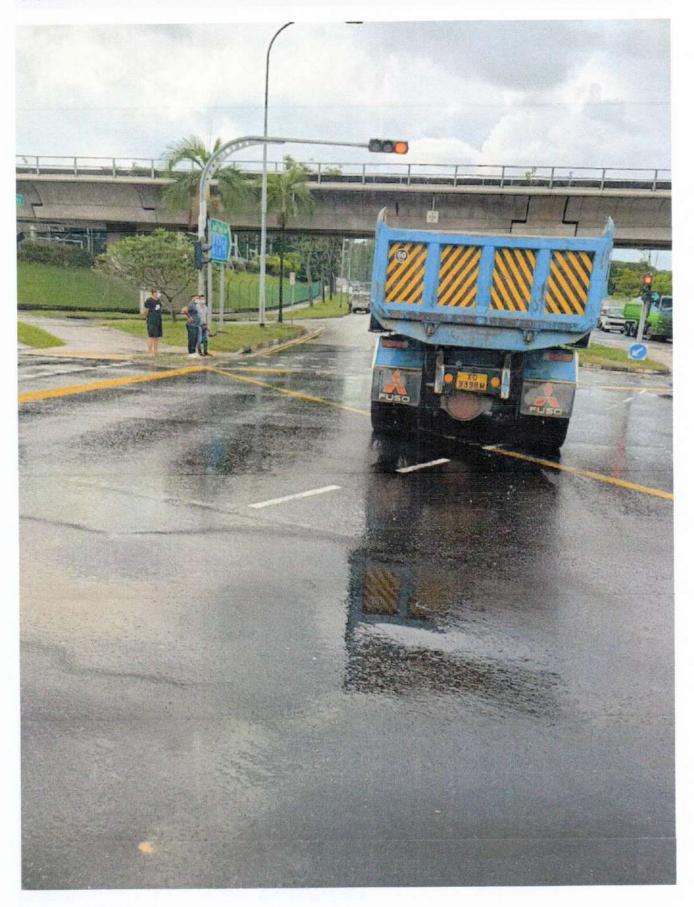




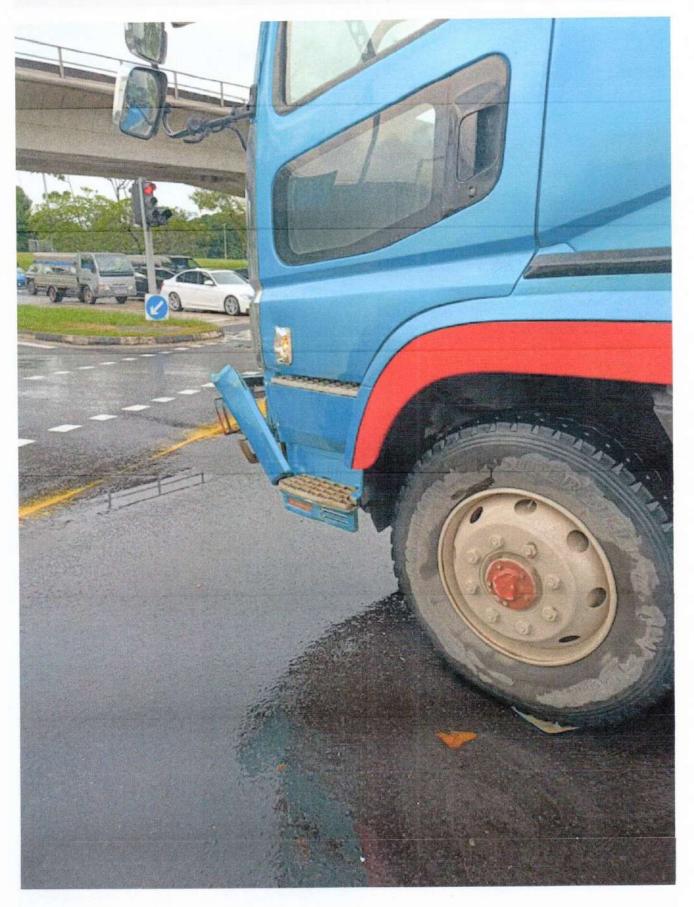


















MAH LIAN MOTOR VEHICLE REPAIRER

No.38 Defu Lane 9 Singapore 539278
TEL: 62823336 FAX: 62893336 Email: mahlian@singnet.com.sg
GST:M90362564P RCB NO:201327339E

M/S: China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road

FAX: -

#15-00 Springleaf Tower

Singapore 079909

TEL: -

ATTN: Motor Claim Department

Your Ref No: MAJESTIC CIVIL ENG Claim Type: Third Party

Accident Date: 17/12/2021 TP Veh Reg No: GBC2770H Estimate No:

ES1700948

Date: 17 Dec 2021

Policy No: GA396393 Veh Reg No: XD9398M

Make/Model: MITSUBISHI

FV51JJD4RDEA

Chassis No:

FV51JJA00941

Engine No: Reg. Date: 6M70453838 16/11/2012

Estimate Repair Cost to Vehicle No :XD9398M

	Description	U/Price	Quantity	List Price Amoun	
				<u>SS</u> <u>S</u>	
	List Price				
1	Front Bumper Sallar 2200.83	2,861.07	1 PC	2.861.07	
2	Front Bumper Cover -LH CNE /M-S	205.26	1 PC	205.26	
3	Front Bumper Side - LH	192.41	1 PC	192.41	
4	Front Bumper Bracket -LH	633.36	1 PC	633.36 🗶	
5	Headlamp Assy - LH	1,272.03	1 PC	1,272.03	
6	Headlamp Aluminium Bracket - LH 11	870.06	1 PC	870.06 🗶	
7	Headlamp Rim -LH	153.63	1 PC	153.63	
8	Fog Lamp Assy -LH	361.67	1 PC	361.67 ×	
9	Fog Lamp Rim -LH	177.34	1 PC	177.34	
10	Front Corner Panel -LH	1,427.69	1 PC	1,427.69	
11	Front Corner Panel Rubber Seal -LH	127.41	1 PC	127.41	
12	Front Corner Panel Signal Lamp -LH n -1	361.67	1 PC	361.67	
13	Front Corner Panel Signal Lamp Socket -LH 11	116.54	1 PC	116.54 X	
14	Front Door Lamp -LH 3/h	361.81	1 PC	361.81	
15	Front Door Pillar -LH	3,106.53	1 PC	3,106.53 🗶	
16	Front Door Pillar Inner Garnish -LH	364.93	1 PC	364.93 ×	
17	Front Door Pillar Inner Panel -LH	1,164.51	1 PC	1,164.51	
18	Stand Panel -LH	2,073.81	1 PC	2,073.81	
19	Step Panel -LH (/v	594.41	1 PC	594.41	
20	Step Panel Lower -LH	253.79	1 PC	253.79 🗶	
21	Step Panel Under Cover -LH 11	189.18	1 PC	189.18 🗴	
22	Step Alloy Top -LH 🔥 🐧	520.63	1 PC	520.63 🗡	
23	Step Alloy Lower -LH 10	393.40	1 PC	393.40 🗡	
24	Step Panel Reflector -LH	233.53	1 PC	233.53 🔀	
	The control of the co			18,016.67	
			Less 25%	4,504.17 13,512.5	
	Labour				
25	To remove & refit headlamp ,foglamp & refit wiring & refocus all light .	200.00	1 JOB	200.00 30	
26	Labour to knock & cut & dismantle & refit all above parts.	1,300.00	1 JOB	1,300.00 800	
27	To spray & painting at accident affected area .	980.00	1 JOB	980.00 500	
28	To rust proofing on affected area.	480.00	1 JOB	11 480.00 X	

MAH LIAN MOTOR VEHICLE REPAIRER

No.38 Defu Lane 9 Singapore 539278 TEL: 62823336 FAX: 62893336 Email: mahlian@singnet.com.sg GST:M90362564P RCB NO:201327339E

M/S: China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road

FAX: -

#15-00 Springleaf Tower

Singapore 079909

TEL:

ATTN: Motor Claim Department

Your Ref No:

MAJESTIC CIVIL ENG

Claim Type: Accident Date: Third Party 17/12/2021

TP Veh Reg No:

GBC2770H

Estimate No:

ES1700948

Date:

17 Dec 2021

Policy No:

GA396393

Veh Reg No:

XD9398M

Make/Model:

MITSUBISHI FV51JJD4RDEA

Chassis No:

FV51JJA00941

Engine No:

6M70453838

Reg. Date:

16/11/2012

Estimate Repair Cost to Vehicle No :XD9398M

U/Price	Quantity	List Price	Amount
		S\$	The state of the s
		2,960.00	
		Total	S\$ 16,472.53
	Add G	Add GST @ 7%	1,153.08
Total Amount Payable		t Payable	S\$ 17,625.61
	U/Price	Add GS	S\$ 2,960.00 Total Add GST @ 7%

TOTAL: SINGAPORE DOLLAR SEVENTEEN THOUSAND SIX HUNDRED TWENTY FIVE AND CENTS SIXTY ONE ONLY

> For MAH LIAN MOTOR VEHICLE REPAIRER

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: