(08/1133) PEE: CO / c	
ASS. REC. BY: Theyan	22003234 luny3
<u>A</u>	SSIGNMENT
From: Date:	Veh No: 0x15895 Yr Regn: 14/3 //9
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 Ambulanle
To Inspect Vehicle No:	Make: Merledes benz Sprinter c.c Zzq15
at Workshop m/s	Colour White A/C: Insured / Std / NI / NA
of	Sp.Reading Notquai T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No. DMCVSNW00138992101	C/No: WDB9066332P6442S
Claims No. SNM22D201968/C01/TANKL	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess: 1250	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / SRim / STD A/Rim or
×	Tyre Size: F: 235/6511/6
(Policy Condition)	R: 235/65 M16
Remark: The veh had commenced its N/S 0/	BS / DUN / EXNOVA / GY / FS / LIZA / MIC ) OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal, or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal mm R/Bal mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 5 mm L/Bal. 5 mm
Est. Repairs: S days Res.: Yes or No	D.O.A. 21/3/22 D.O.I. 8/4/22 /800
Lum Sum: % 3 Val.: Yes or No	Survey held at face linde to
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / O  Date: Person Contacted:	
	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
5/6/23 Submit preli report-revised fig \$89	52.80 check items \$616
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 5
1) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) 5/6/23-typist Add F	
David Francis	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$)	: Weekend (\$)
	TOTAL

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	- Volliele	
Owner ID Type:	A contraction of	
Owner ID:	Government	
Vehicle Details	035G	
Vehicle No.:	OVATOO	
Vehicle to be Exported:	QX1589J	
Intended Deregistration Date:	No	
Vehicle Make:	11 Apr 2022	
Vehicle Model:	MERCEDES BENZ	
Primary Colour:	SPRINTER 316CDI/3665	
Manufacturing Year:	White	
Engine No.:	2018	
Chassis No.:	65195534794285	
Maximum Power Output:	WDB9066332P641425	
Open Market Value:		
Original Registration Date:	\$190,214.00	
First Registration Date:	14 Mar 2019	
Transfer Count:	14 Mar 2019	
Actual ARF Paid:	0	
Intended PARF Rebate Details	\$0.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:		
PARF Rebate Amount:	13 Mar 2029	
Intended COE Rebate Details	\$0.00	
COE Rebate Amount:	\$0.00	
Total Rebate Amount:	\$0.00	
The information contained herein is correct as at 11 Apr 202	22	

SJ08223M0002 / Jin Auto Services Pte Ltd ENTRY DATE & TIME: 22/03/2022 11:53 (SGT) SUBMITTED BY: Lim Hong Guo VERSION: 1 (22/03/2022 15:32 (SGT))



## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
   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.
- Any false reporting may be referred to the Police for invastigation.
   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.
   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 ... 22/03/2022 11:53 (SGT) Date of Accident 21/03/2022 14:26 (SGT) Exact Location of Accident Woodlands Ave 12, Singapore Additional Location Information Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number QX1589J

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Singapore Civil Defence Force T08GA0035G Company Reg No ..... Email Address suhaimi@lentorambulance.com Mobile Phone No (Phone) +65-94741567 (Office) +65-94741567 Alternative Phone No.

VEHICLE PARTICULARS

Manufacturer ... Mercedes Sprinter 316CDI/3665 Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Government Transmission Auto CC 2143

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy DMCVSNW00138992101 Policy Number Cover Note Number

DRIVER

MUHAMMAD ZUKHAIR BIN ABDUL RASHID Name of Driver NRIC No 590447591

Accident report SJ0B223M0002

18/11/1990 Date Of Birth Occupation Outdoor Date Of Driving Pass 18/01/2014 8 YEARS AND 2 MONTHS Driving experience Gender (Phone) +65-85333961 Mobile Number Alt. Phone Number Email Address suhaimi@lentorambulance.com Address BLK 341 SEMBAWANG CLOSE #08-69 Address complement 750341 Postcode 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 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 PASSENGER 1 MEDIC Name Gender Male PASSENGER 2 MEDIC Male Gender ..... PASSENGER 3 MEDIC Name Gender ..... DETAILS OF POLICE ACTION Was the accident reported to the police? Traffic Police Police Station Name Police Station Phone No (Phone) +65-65470000 (Fax) +65-65474900 Alt. Police Station Phone No. Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

GBL1268B Vehicle Registration Number Kia Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Commercial vehicle Vehicle Category HIEW CHEE KEONG Name of Driver NRIC No S7773994G Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

## RESTRICTED



## STATEMENT

Name (including a Muhammad Zukha	liases, if any) of ur Bin Abdul Ra	person m shid	aking statements		Name in Chinese characters (if applicab		
Father's full name Abduk Rashid	Bin Mohd Seh	oat			Sex Male	Age 32	
Date and Place of 18/11/1990 Sin			NRIC No. S90447591	Passport No.	Nationality and I Singaporean	Dialect	
Marital Status Married	Marital Status No. of Children Singapore C		Singapore Citizen	nship Certificate No.	Vehicle No. QX15891		
Address Blk 341 Sembawa		-	The state of the s		Occupation Ambuaince Drive		
Place of Employm	ent : Lentor Am	oulance P	te Lid	Residen	Telephone Nos. 853	Office	
	ri — — —		Stater	nent Recorded			
a a	t (time) 1600			on (date) 1/03/2022		at (place) in Fire Station	
Language Spoken English		Interprete	d By	Recorded By	Rank	of Recording Officer	
NOTE: The Statement is to	o be signed and o	fated by the	ne person making i	t and by the Recorder an	d the Interpreter, if on	e is used	

### RESTRICTED

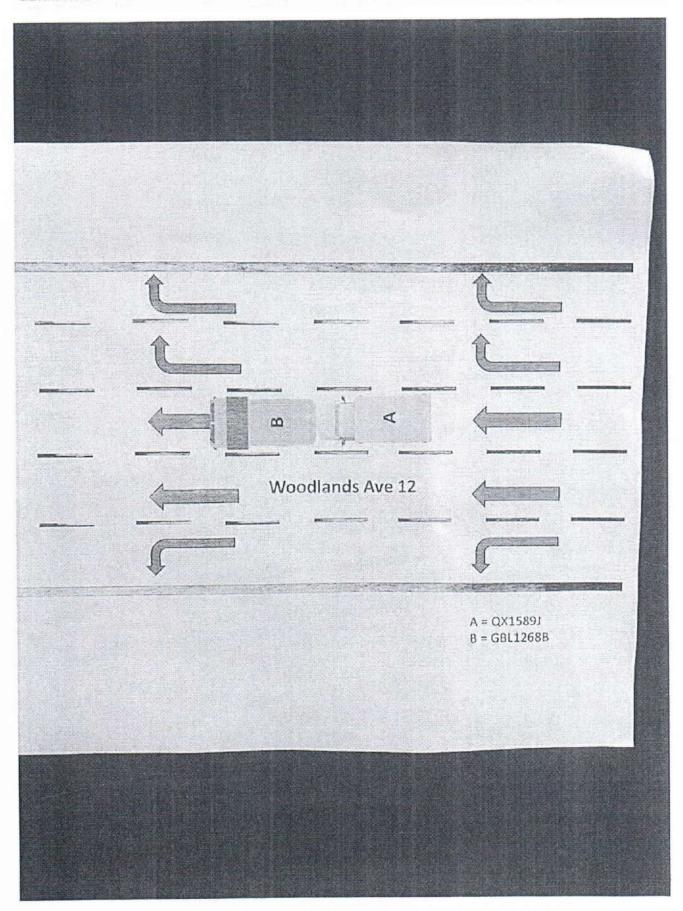
I, Muhammad Zukhair Bin Abdul Rashid was the assigned driver for ambulance, PA311, QX1589J on 21 March 2022. At around 1426hrs while return back to base from Kandang Kerbau Hospital incident number /20220321/0655, along woodlands ave 12 juction of Gambas Ave twds Woodlands Ave 10,I was traveling around 25km/hr and I was unable to stop vehicle in time and hit the lorry infont of me. I informed my PRM, Asri that I had hit the vehicle in front & proceeded to get down from my vehicle after ensuring safety. I immediately inform Lentor Ambulance Duty Manager, Rasikin of the accident. The lorry driver also get down from his vehicle & I asked if he was injured. He told me he did not sustain any injuries. We then proceeded to check for the damages on the vehicles. I exchange particular with the lorry driver, Hiew Chee Keong (S7773994G) and also handed him a copy of SCDF correspondence notice. Lorry driver was traveling alone at the time of incidents. My paramedic assessed the driver immediately after ensuring no crews was injured. No injury sustained by MOP.

## e as necessary

I hereby declare that details provided in the above are true.

Sgt Zukhair

Rank & Name with Signature



#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Pease report correctly the details of the accident to speed up the claims process.
- 2. This Fernancial be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as truthful and accurate as possible. Any wilful insrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability
- 4. The issue and acceptance of this Formby insurance companies is not an admission of policy liability on the part of the insurance
- 5 Any false reporting may be referred to the Police for investigation
- 6. The report will be forwarded by the insurers of the GA 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 todgement 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)

Funderstand, acknowledge, agree and consent that

- (a) My insurer , my wicrkshop 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 lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
- (i) processing, handing anidlar 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 chains
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me,
- (iv) administering my claims (including the imiting 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 wiell as on the external cover of envelopes/intail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims

(colectively the "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers law yers/law firms, poy/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 sted outside of Singapore, for one or more of the above Porposes

Signature / Oate &

Time 4.08 am Sketch Plan 22-03-2027

Oriver's Signature (# ariver afnot the policyholder) / Date

& Time

Witnessed by Reporting Centre

Personnel

DIFASE	REFER	10	Dolles	REDOOT	ATTACHED		
		1	f -	/ /		191-21	
					emmons - went		
		-					
						III 1992	
				nand.	and the second s		
							OFFICE OF STREET
		Secretary.					
		-					

### Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Stoffeto e / Date & Time // OBQ w

JOG-66

Driver's Signature (It friver & not the policyholder) / Date & Time

Withessed by Reporting Centre Personnel





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No: T/20220321/7039

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/03/2022 21:16		lade:	Vide Report No.:	Station Diary No.		
Informa	nt's Partice	ilars				
Name of Informant: MUHAMMAD ZUKHAIR BIN ABDUL RASHID			Address: 341 SEMBAWANG CLOSE #08-69 SINGAPORE 750341			
	/ ID No.: O / S904475	591	Contact No.: Home/Office:	Mobile: 85333961		
National SINGAP	ity: ORE CITIZ	EN	Email; zukh90@gmail.com			
Sex: Male	Age: 31	Date of Birth: 18/11/1990	Type of Informant: Driver			
Race: Malay	Race:		Language: English	Institution / School Name:		
Occupat Ambular	ion: nce driver		Driving Licence Information: Class:	Date of Expiry:		

Type of Accident:	Non-Injury Government Vel	hicle	Drink Drive: No	Date/Time of Accident: 21/03/2022 1		Type of Location: Straight Road
Location: WOODLAND:	S AVENUE 12					
W. Observed		10	10.4		Jose Jacobs	
Weather: Sunny		Road	d Surface:			d Speed Limit; Km/h
		Dry Traffi	d Surface: ic Control: ic Light - Wo	rking	60 K	

Vehicle No.	Type	Make	Model	Color	Conditio	No of
	Lorry	KIA		White	Slightly Damaged	0
QX1589J	Van					0



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



2013 Report No. T/20220321/7039

## CONTINUATION OF REPORT

Any Pedestrian Ir	n Involved	TO THE STATE OF TH	neuve e	16	
No. of Pedestrian		Use of Pe	destrian	Cross	ing: NA
Driver					
Name	HIEW CHEE KEONG				S7773994G
Related Vehicle	GBL1268B (Lorry)			ct No.	96341552
Hospital/Clinic	NIL			of e &	Class: 3 Date of Explry: NIL
Date	NIL	Date		NIL	A Control of the Cont
No. of Days gran	ted Medical Leave NIL	Degree o	f	NIL	
Driver					
Name	MUHAMMAD ZUKHAIR BIN RASHID	ABDUL	ID No.		\$90447591
Related Vehicle	QX1589J (Van)		Contact No.		85333961
Hospital/Clinic	NIL TO THE RESERVE THE PROPERTY OF THE PROPERT		Class Driving Licence Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL	Date		NIL	
	ted Medical Leave NIL	Degree o	of	NIL	

### Brief Details.

I, Muhammad Zukhair Bin Abdul Rashld was a driver on that duty for PA311, QX1589J on March 21st 2022. Around 1426hrs, while returning back to base from KKH, incident number /20220321/0655 along Woodlands Ave 12, junction of Gambas Avenue towards Woodlands Ave 10, I was unable to stop vehicle in time and hit lorry (GBL 1268B) infront of me. No MOP was injured.



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

T/20220321/7039

Report No. T/20220321/7039

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / TPIB / MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476201

NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time: 21/03/2022 21:16

Classification Of Case:



#### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

Operating Hours: Monstay to Friday, 09:00 – 17:00 ULN: \$66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

## **ADDENDUM** (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: QX1589J SJ0B223M0002 Original Report No :\_ Vehicle Registration No: \_\_\_ S90447591 Name(as shown in NRIC): MUHAMMAD ZUKHAIR BIN ABOUL RASHIDNRIC/FIN/Passport No : (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate BLK 341 SEMBAWANG CLOSE #08-69 Address Singapore( 750341 ) 8533 3961 Contact (Tel) Mobile No.: suhaimi@lentorambulance.com **Email Address** 21/03/2022 14:26 Date of Accident Time of Accident : WOODLANDS AVE 12 Place of Accident CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. Insurance Company: (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: WEATHER CONDITION : CLEAR & DRY Jordan Reporting Centre Personnel's Signature Policyholder / Driver's Signature Date:

Accident report SJ0B223M0002

Name:

NRIC/FINNo.:

Date:



No . 39 DEFU LANE 12, SINGAPORE 539139 Tel: (65) 382 2736 FAX: (65) 6382 2817

## ACCIDENT REPAIR ESTIMATES

Our Ref: TP / QX1589J		Vehicle No.	: QX1589J
Type of Claim	OD	venicle No.	. QX13033
		Make & Model	: MERCEDES SPRINTE
		Year of Manufacture	: 2018
		Chassis No.	WDB9066332P641425
Suggested Days of Repair :	5	Case Owner	LENTOR AMBULANCE
Repair Estimates		Date of Accident	: 11/3/2022
Parts (a) Cost / List Price Items	\$ 8,208.00	LKK Auto Cons	sultants hence notify
Plus/ <del>Less</del> - 10.0%	\$ 820.80	the Repairer of	
Total of Cost / List	\$ 9,028.80	<ul> <li>To display damag</li> </ul>	ged part(s) during resurvey subject to confirmation
		The state of the s	y is on a "Without Prejudice" basis
Labour	\$ 800.00		lem(s) must be resurveyed and approval from Insurance Company
Total Repair Cost	\$ 9,828.80	Acknowledged by I	Repairer
Till Control of the C			

Name of Surveyor	: ,	Theran			
Company	4	Lhh			
Survey conducted on	:	8/4/22	at	1800	
Remarks By Surveyor					
Remarks By Surveyor  (a) The repair of this vehicle is a	uthorized	d / is not authorized ur	til further notice	e.	
		d / is not authorized ur	til further notice _day(s)	a.	



VEHICLES & EQUIPMENT DIVISION

No . 39 DEFU LANE 12, SINGAPORE 539139 Tel: (65) 382 2736 FAX: (65) 6382 2817

Vehicle No.

: QX1589J

MERCEDES SPRINTER

Case Owner Year of Manufacture LENTOR

Make & Model Chassis No.

WDB9066332P641425

Type of Claim

2018 OD

#### Labour Estimate

S/No	Labour Description	Esimated Price	Adjusted Price
1	Remove & replace front bumper	\$180.00	
2	Remove & replace front grille , apron panel & number plate	\$180.00	100
3	Remove & replace Headlamp & wiring	\$80.00	30
4	Replace & Spray paint Engine Hood	\$180.00	/.n.
5	Detailing for Engine Hood Stickers & Decals	\$180.00	Ago, Masal S

TOTAL

\$800.00

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.

#### Parts Estimate

S/No	Part Description	QTY	Cost Price
1	Front Bumper Assembly	1	\$1,320.00
2	Front Grille Panel	1	\$1,125.00
3	Front Grille Apron	1	\$255.00
4	Head Lamp Support Bracket	1	\$560.00
5	Head Lamp RH Assembly	1	\$1,854.00 /
6	Head Lamp LH Assembly	1	\$1,854.00
7	Front Engine Hood	1	\$840.00
8	Sticker & Decal for Engine Hood	1	\$400.00
			-

TOTAL

\$8,208.00

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