ASS. REC. BY:	05/0	11220039	03/EVy3 	
		ASSIG	NMENT	
From:	Date:		Veh No: SMQ2781Y	Yr Regn: 29/8/14
Estimated Cost:			Type: M.Carl M.Cycle / Bus / Van	
D TPIWS ITP RESIDE	RES / EVA / INV / MV	Andrews State of the State of t	Truck / Trailer or	
			Make: Jaquar XJ	cc 1999
at Workshop m/s	And the second s		Colour Black	A/C: Insured / Std / NI / NA
of	, ,		Sp.Reading 73097	T/Radio: Insured / Std / NI / NA
Insured:	the statement of the st		Eng/No:	
Policy No. DMPCS	NW00030522201		C/No: SATACIZM	XEPVILUEI.
Claims No. SNM22[D202260/C01/TANKL		Gen. Cond: Good / Fall / Poor / B	urnt ·
Sum Insured:	Excess: 1250		Steering: Inorder / Jainmed / Leal	
(Client's Record)	, ,		Brake: Inorder / Jammed / Lea	ked / Burnit or
Make of Veh;			Modi: NII / S/Rim / STD A/Rin	
			Tyre Size: F: 745	J452R19
(Policy Condition)		7	R:	//
Remark: The veh had com	menced its N/S	s O/S	BS (DUN / EXNOVA / GY / FS / L	JZÁ / MIC / OHTSU / PIR / SUMI /
repair at the time	of inspection.		TOYO I YOKO or	
Bail. or Market Value:	L		Front	Rear
IDAC Accident Rport:	Consistent? : Yes or No		R/Bal. 4 mm	R/Bal. () mm
GIA / PR Seen:	Consistent? : Yes or No		L/Bal. mm	L/Bal. mm
Est Repairs:	days Res.: Yes or No		D.O.A. 31/3/12	D.O.I. 128/4/12
Lum Sum:	% · 3 Val.: Yes or No	,	Survey held at We	rarnes — Topist
	Á UDO		Des. of Damages : Fr) / Rear /	
CA / REV / REP. /		le: IN/OUT	. 6	~
Date:Pers	son Contacted:		The U/C / Chassis frame /	Body Structure affected due to collision.
	Instruction			
MV-	· · · · · · · · · · · · · · · · · · ·			
18/5/22 Submit	uneconomical T/I m	v.\$100k /	est) lta:\$76,308 nv:\$2	3 602
	d fig \$35,720.50 chec			0,002
Tevised	λ 11g ψ00,1 20.00 011 0 0	T. ILCITIS Q	1202.00	
¥ ,				
	7	,	7	
Date/Time, File Pass to?	: Prell. Report		Days Of Repair: 7	
,	: Final Report		Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?				Transportation:
18/5/22-typist		Add Fee)\$ + RSSI
	,	. *	: Interview (\$	Photos
tep Former:			: Tech, Invs (\$) Others
ump Sum/LB.I: (4)		:Weellend (\$	
				TOTAL



SERVICE ESTIMATE 98479 - C00001 SL: SERVICE SALES - PC Ms Harlina Binti Hassan Basri GST Reg. No: M28920628X 3 Oxford Road Inv.No. . : B&P 0 Page 1 #05-07 Inv.date. : 26/04/2022 WIP No. . : 22631 Singapore 218814 Veh. In/Out: *Tel.No. . : Mobile: 98158529 Reg. No. : SMQ2781Y Closed by : Juan Paulo Bongon Ba Reg.date .: 29/08/2014 Svc Consultant : Mileage ..: Remarks : Ms Harlina Binti Has Chassis No: SAJAC12MXEPV74431 Description Mech Qty Price Disc% Pkg Amount G TO REPLACE FRONT BUMPER, 1300 x1 802 0 2600 3000.00 3,000.00 S HEADLAMP RH, PARKING SENSOR, HINGES, DAMPER, BONNET, ETC 0 2000 TO SPRAY BONNET, FRONT BUMPER, 2500.00 2,500.00 S ETC 1222 XJ 280 TO CHECK WIRING INCLUDE 621.00 621.00 RESETTING OF ALL ELECTRICAL MODULES 280 TO FOCUS HEADLAMP 207.00 207.00 TO REPLACE E-ACTUATOR, & RESET 3312 4968.00 4,968.00 S PEDESTRIAN SYSTEM R16 TOWING CHARGE 25/04/2022 0 200.00 200.00 S HINGE-BONNET LH 1.0 EA 220.90 220.90 S HINGE-BONNET RH 1.0 EA 216.60 216.60 S IMPACT SENSOR BUMPER / /PC 2.0 EA 480.60 961.20 S *E* AIRBAG BONNET XF / JR 2.0 EA 1741.50 3,483.00 S AIRBAG BRACKET BONNE 2.0 EA 21.40 42.80 S Steve CLKK) OD-M PL 28/4/72, 12.00- EXM.1.1 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

earnes Automotive Pte. Ltd.

5 Lang Rea Road, Singapore 159103 T 6430 4700 www.wearnes.com

o reg no. 199501400R / GST reg no. M28920628X



CEDVI	CE	ESTIMATE
Sec. 14. 100 V		

SL: SERVICE SALES - PC 98479 - C00001 GST Reg.No:M28920628X Ms Harlina Binti Hassan Basri 0 Page Inv.No. . : B&P 3 Oxford Road Inv.date. : 26/04/2022 WIP No. . : 22631 #05-07 Veh. In/Out: Singapore 218814 *Tel.No. . : Mobile: 98158529 Reg. No. . : SMQ2781Y Reg.date .: 29/08/2014 Closed by : Juan Paulo Bongon Ba Mileage ..: Svc Consultant : Chassis No: SAJAC12MXEPV74431 Remarks : Ms Harlina Binti Has

Op.No	Description	Mech Qty	Price Disc%	Pkg Amount	G
	AIRBAG BRACKET (DNO) / NEC DEPLOYABLE BONNET MO AIRBAG SENSOR FRT XJ BONNET STRUT XJL BUMPER COVER FRT XJL / OO INSERT-FOAM HEADLAMP RH / CFA MODULE-BALLAST PARKING AID 90 Degre X MOUNTING-BRACKET RH X MODULE-RESTRUT CNTRL PANEL-BONNET FRT / OO BUMPER NUT XF	2.0 EA 1.0 EA 2.0 EA 1.0 EA 1.0 EA 1.0 EA 1.0 EA 1.0 EA 1.0 EA 1.0 EA 1.0 EA 1.0 EA	43.40 2307.60 APC 357.30 99.10 (phnb) 3829.70 519.20 4398.30 535.10 426.10 67.20 2307.60 8131.90 5.30	86.80 2,307.60 714.60 198.20 3,829.70 519.20 4,398.30 535.10 1,704.40 67.20 2,307.60 8,131.90 79.50	
	, , ,				

			Gross Total.	41,300.00
Labour Parts Package	Total Total Total	11,496.00 29,804.60 0.00	Net GST @ 7.0% Total Paid Please Pay	41,300.60 2,891.04 44,191.65 0.00 44,191.65

GST: S=StdRated; O=OutOfScope; Z=ZeroRated

41 300 60

Cross Total

SA1C22410002 / Auto Insure Pte Ltd [608586] ENTRY DATE & TIME: 01/04/2022 17:40 (SGT) SUBMITTED BY: NUR RUZANNA BINTE JAMALUDDIN VERSION: 1 (01/04/2022 17:40 (SGT))





SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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
- 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.
- S. 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

01/04/2022 17:40 (SGT) 31/03/2022 13:45 (SGT) KPE, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMQ2781Y

INSUREDIPOLICYHOLDER

Is company? Name Of Registered Owner NRIC No Email Address

Mobile Phone No Alternative Phone No HARLINA BINTI HASSAN BASRI S1758111B rashidun7@yahoo.com

(Phone) +65-96800407 +65-96800407

VEHICLE PARTICULARS

Manufacturer

Model Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission

CC

Jaguar Χį

Private use

No - Claiming third party

Private car Auto 1999

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy **Policy Number** Cover Note Number China Taiping Insurance (Singapore) Pte. Ltd.

Comprehensive

DMPCSNW00030522201

DRIVER

Name of Driver NRIC No

ABDUL RASHID BIN ABDUL RAHIM S1386748H



Accident report SA1C22410002

Page 1 of 13

Date Of Birth
Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number

Mobile Number Alt. Phone Number Email Address Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

28/08/1959 Indoor 18/08/1980

41 YEARS AND 7 MONTHS

Male

(Phone) +65-98158529

rashidun7@yahoo.com 3 OXFORD RD #05-07

218814 No Spouse Yes

SLR1812E

NTUC Income Insurance Co-operative Ltd

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface Hit by fallen tree / Other objects

Clear Dry

No

2

No

Yes

1

No

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
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?

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

REFER SKETCH.

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Was there any audio recorded?

Yes No No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer

Vehicle Model Vehicle Variant Vehicle Colour

Vehicle Category

Name of Driver Contact Number

Address complement

XD2328L

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Goods vehicle

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Accident report SA1C22410002

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Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)



SKETCH PLAN

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.
- 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 flability.
- 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 investigation.
- 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.
- 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)

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 end/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 :
 - 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.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to ail 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

(ii) for complying with requirements under any regulations, laws or court orders

1/4/22 1118

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.:

QUANT WHITE WHOM JOB VE

Accident report SA1C22410002

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SKETCH PLAN	The state of the s
proposed and a second second	
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and the second of the second o	

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 31/5 >> at around 1. Appn lengered the KPE tunnel from PiE (Tuas) I was on The way to the city hence I stought on my lane going towards Est (city) A truck over the volling in the next lane and as I was driving metal scraft from the track feel to the wood and but my car but the driver was not aware. When There were several metal (rusted) bars (井) continue to fell when it hit my car the impact caused the airbogs in The bonnet to activate and because of Thus my bonnet was opened and The warning lights in my dashboard flashed The hazard lights also started to blink. I saw the truck proceeding towards and followed the truck before signalling to the right 1 squalled and drove alongside The truck and harted him to Strp. I surtook stopped as a distance and he followed car. I then informed him of what hoppened He district on top of his truck and adjusted the metal pieces. I took down his farticulars and Spote to his Boss on The his high trand calling that Turnel energency but was not successful. I called 911 but also no riply. It was very mossy in the turned and can briefly have aughing on the hp. It was dangerous in the tunnel as There were mong lowery related that drove post I was footful for my decided to slessly drive out of the hand and control and stopped they can all languant 9AF and called a tow truck to tow my can to DECLARATION by Moreshop I lake called the during bors and accord for I/We declare the foregoing particulars are true in every respect. An account Consequent. He reserve and the on the That

IS WELL AXA

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: \

1/4/12 HOLH

Reporting Central Personna's Signature Name: NRICH IN No.

contental Southernial form 1/8