

(08/11/13) wef  
ASS. REC. BY: *John*

REF:

CS3/LPL22005495/R<sub>qy3</sub>

7531

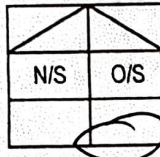
COE XPIRY: 2028/MAY

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
To Inspect Vehicle No: *WC 2187T*  
at Workshop m/s *RS AUTO*  
of *6, DEER LAKE 12*  
Insured: *LPL*  
Policy No. \_\_\_\_\_  
Claims No. *22/22/22/VC05/025891*  
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: *62K*  
IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
Est. Repairs: \_\_\_\_\_ days Res.: Yes or No  
Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: *WC 2187T* Yr Regn: *2008 / MAY*  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or *CEMENT-TRUCK*  
Make: *NISSAN CB45CLSMNB* c.c *13074*  
Colour *GREEN* A/C: *Insured / Std / NI / NA*  
Sp. Reading *360839* T/Radio: *Insured / Std / NI / NA*  
Eng/No: \_\_\_\_\_  
C/No: *CB4CL500138*  
Gen. Cond: *Good / Fair / Poor / Burnt*  
Steering: *In order / Jammed / Leaked / Burnt* or  
Brake: *In order / Jammed / Leaked / Burnt* or  
Modi: *Nil / S/Rim / STD A/Rim* or  
Tyre Size: F: *295/80R22.5*  
R: *- 2* *S/P*

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or *PROLOAD*

| Front                  |    | Rear                   |    |
|------------------------|----|------------------------|----|
| R/Bal. <i>8</i>        | mm | R/Bal. <i>8/8</i>      | mm |
| L/Bal. <i>8</i>        | mm | L/Bal. <i>8/8</i>      | mm |
| D.O.A. <i>04/06/22</i> |    | D.O.I. <i>13/06/22</i> |    |

Survey held at *RS AUTO*

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

*REAR O/S*

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

Date / Time Action / Instruction

*REPAIR LIMIT - 40K*

*ESTIMATE RANGE OF REPAIR (NO. OF DAY) - (2K-3K) / 4 days*

15/06/22 Submit PRS.

Date/Time, File Pass to?

☐

Prel. Report

1) 15/06 Typist

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

) S + RS, SI

) Photos

) Others

TOTAL

Report Format : PRS

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





## 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              | 06/06/2022 14:33 (SGT)     |
| Date of Accident                | 04/06/2022 08:30 (SGT)     |
| Exact Location of Accident      | Rochor Canal Rd, Singapore |
| Additional Location Information | TO SELEGIE ROAD            |
| Country/State of Loss           | Singapore                  |

### DETAILS OF OWN VEHICLE

|                             |                          |
|-----------------------------|--------------------------|
| Vehicle Registration Number | WC2187T                  |
| INSURED/POLICYHOLDER        |                          |
| Is company?                 | Yes                      |
| Name Of Registered Owner    | LBL CONSTRUCTION PTE LTD |
| Company Reg No              | 200902753C               |
| Email Address               | ANDY.LEE@PAS.SG          |
| Mobile Phone No             | (Phone) +65-96470913     |
| Alternative Phone No        | +65-96470913             |

### VEHICLE PARTICULARS

|  |                     |
|--|---------------------|
| Manufacturer   | Nissan              |
| Model  | CG845CL5MNB         |
| Variant  | -                   |
| Exact purpose for which vehicle was being used at time of accident           |                     |
| Are you claiming under your own insurance policy for repair to your vehicle? | Employment          |
| Vehicle Category   | No - Reporting only |
| Transmission   | Commercial vehicle  |
| CC   | Manual              |
|  | 13074               |

### INSURANCE COMPANY

|                           |                          |
|---------------------------|--------------------------|
| Name of Insurance Company | ERGO Insurance Pte. Ltd. |
| Type of Coverage          | Comprehensive            |
| Fleet Policy              | No                       |
| Policy Number             | DMCG22006081             |
| Cover Note Number         | -                        |

### DRIVER

|                 |                        |
|-----------------|------------------------|
| Name of Driver  | KARUPPASAMY MARIKANNAN |
| Passport No/FIN | G2708856U              |

|  |   |
|--|---|
| Date Of Birth  | 26/08/1986                                |
| Occupation   | Outdoor                                   |
| Date Of Driving Pass   | 16/10/2018                                |
| Driving experience   | 3 YEARS AND 8 MONTHS                      |
| Gender   | Male                                      |
| Mobile Number  | (Phone) +65-98901259                      |
| Alt. Phone Number  | -   |
| Email Address  | LBLCONTRACTS@GMAIL.COM                    |
| Address  | 5037 ANG MO KIO INDUSTRIAL PARK 2 #01-391 |
| Address complement   | -   |
| Postcode   | 569540                                    |
| 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       | 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)   | 1   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No  |

#### 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 ATTACHED  
STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

#### 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 | GBE9086T             |
| Vehicle Manufacturer        | -                    |
| Vehicle Model               | -                    |
| Vehicle Variant             | -                    |
| Vehicle Colour              | -                    |
| Vehicle Category            | -                    |
| Name of Driver              | Commercial vehicle   |
| NRIC No                     | AW YONG HENG         |
| Contact Number              | S2127264G            |
|                             | (Phone) +65-96343189 |



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

-  
-  
-  
-  
-  
-  
-

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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.
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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)**

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 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, 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.

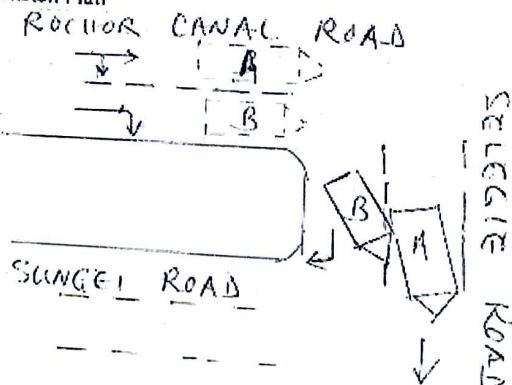


*[Signature]*  
Policyholder's Signature / Date & Time

*[Signature]*  
Driver's Signature (If driver is not the policyholder) / Date & Time

*[Signature]*  
Witnessed by Reporting Centre Personnel

**Sketch Plan**



A: WC2127T  
B: GR59026T

Describe Circumstances of the Accident

AS PER STATEMENT ATTACHED

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

*[Signature]*  
Policyholder's Signature / Date & Time

*[Signature]*  
Driver's Signature (If driver is not the policyholder) / Date & Time

*[Signature]*  
Witnessed by Reporting Centre Personnel





On 4/6/2022 at about 8.30am, I was driving WC2187T traveling on the 2nd lane from right along Rochor Canal Road. And 3rd party GBE9086T was traveling on the 1st lane from right.

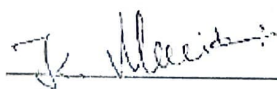
I am turning right from Rochor Canal Road to travel towards Selegie Road and 3rd party is making an U-turn to travel towards Sungei Road.

While we were making our right turn, 3rd party has made a wide right turn resulting in cutting into my lane and his vehicle left front corner has hit onto my vehicle right rear corner while turning.

After the accident we exchanged our particulars and no injuries in this accident.

I want to claim 3rd party for my damages.

3rd party name is Aw Yong Heng (I/C No: S2127264G) and HP: 96343189



Name: J. MARI KANDAN

Fin No: G127088560

Date: 06/06/2022

> Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle**

**Vehicle Owner Particulars**

Owner ID Type:

Company

Owner ID:

753C

**Vehicle Details**

Vehicle No.:

WC2187T

Vehicle to be Exported:

Yes

Intended Deregistration Date:

10 Jun 2022

Vehicle Make:

NISSAN

Vehicle Model:

CGB45CLSMNB

Primary Colour:

White

Manufacturing Year:

2007

Engine No.:

GE13334437B

Chassis No.:

CGB4CLS00138

Maximum Power Output:

-

Open Market Value:

\$126,846.00

Original Registration Date:

06 May 2008

First Registration Date:

06 May 2008

Transfer Count:

5

Actual ARF Paid:

\$6,343.00

**Intended PARF Rebate Details**

PARF Eligibility:

No

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

**Intended COE Rebate Details**

COE Expiry Date:

05 May 2028

COE Category:

C - Goods Vehicle & Bus

COE Period(Years):

10

PQP Paid:

\$35,729.00

COE Rebate Amount:

\$21,088.00

**Total Rebate Amount:**

**\$21,088.00**

The information contained herein is correct as at 10 Jun 2022

OK