

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop n/s _____
 of _____
 Insured: _____
 Policy No. DHOM110166501903
 Claims No. M11D15432206
 Sum Insured: _____ Excess: 750
 (Client's Record)
 Make of Veh: _____

Veh No: PC 2424S Yr Regn: 11/2/14
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Toyota Hiace c.c. 2982
 Colour: White A/C: Insured / Std / NI / NA
 Sp. Reading: 396121 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JT EST 22P 6008 R 743
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Mod: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 195R15C
 R: 17

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or .
 Front Rear
 R/Bal. 4 mm R/Bal. 4 mm
 L/Bal. 4 mm L/Bal. 4 mm
 D.O.A. 2/6/22 D.O.I. 10/6/22
 Survey held at Sng Ah Tee
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Bal. or Market Value: _____
 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

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

Date / Time	Action / Instruction
	<u>NIV - 30K</u> * Workshop said total loss
	<u>PR - 8315</u>
	<u>NV - 21,685</u>
28/6/22	Submit uneconomical T/L - mv: \$30k Ita: \$8315 nv: \$21,685
	revised fig \$24,124.10 check items \$1633.50

Date/Time, File Pass to? : Prell. Report
 : Final Report
 1) _____
 Date/Time, File Return to?
 2) 28/6/22-typist
 Report Format: _____
 Lump Sum / I.B.E. (%) _____

Days Of Repair: _____
 Resurvey No. of Trip: _____
 Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech, Invs (\$ _____)
 : Weekend (\$ _____)

Survey Fee:	
Transportation:	
\$ + RS. \$1	
Phone	
Others	
TOTAL	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 998D

Vehicle Details

Vehicle No.: PC2424S
Vehicle to be Exported: No
Intended Deregistration Date: 12 Jun 2022
Vehicle Make: TOYOTA
Vehicle Model: HIACE HIGH ROOF COMMUTER TURBO AUTO
Primary Colour: White
Manufacturing Year: 2013
Engine No.: 1KD2362981
Chassis No.: JTFST22P600018743
Maximum Power Output: -
Open Market Value: \$36,854.00
Original Registration Date: 11 Feb 2014
First Registration Date: 11 Feb 2014
Transfer Count: 0
Actual ARF Paid: \$1,843.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 10 Feb 2024
COE Category: C - Goods Vehicle & Bus
COE Period(Years): 10
QP Paid: \$50,001.00
COE Rebate Amount: \$8,315.00
Total Rebate Amount: \$8,315.00

The information contained herein is correct as at 06 Jun 2022

OK

SNGAHTEE

MOTOR & PANEL SERVICE

Store CLKKJ
10/6/22, 12:00pm

孙亚弟汽车烧焊私人有限公司 SNG AH TEE MOTOR & PANEL SERVICE PTE LTD

BLK 3 PIONEER ROAD NORTH #01-18 SINGAPORE 628457

TEL: 62686183 (4 lines) FAX: 62681429 | www.sngahtee.com
sngahtee@singnet.com | UEN / GST REG. NO.: 200810440N

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EXG 11-?
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18 djs

C/O UNITED OVERSEAS INSURANCE LIMITED

146 Robinson Road #02-01
UOI Building (S) 068909

ATTENTION :

CONTACT : 6222 7733

FAX NO: 6327 3869/ 6327 3872

EST/QUOTE NO. SQ007397

DATE : 09/06/2022
ACCIDENT DATE : 02/06/2022
VEHICLE NO : PC2424S
CHASSIS/ENG.NO : JTFST22P600018743
VEHICLE MODEL : TOYOTA HIACE
CLAIM NO :
POLICY NO : DHOM110166501903
REMARK

S/N.	QTY	UNIT	DESCRIPTION	PRICE	DISC %	DISC/MARKUP	TOTAL AMT
** LIST PRICE **							

						SUB-TOTAL:	0.00
** SPECIAL NETT PRICE **							
1	1	PC	FRT NUMBER PLATE / BT	25.00		25.00	25.00
2	1	PC	COOLANT / hcc	40.00		40.00	40.00

						SUB-TOTAL	65.00
** COST PLUS MARKUP **							
1	1	PC	FRT BUMPER / OR	170.00	-10.00	187.00	187.00
2	1	PC	FRT BUMPER LWR CENTER GRILLE - OR	90.00	-10.00	99.00	99.00
3	2	PC	FRT BUMPER LWR SIDE GRILLE - OR	40.00	-10.00	44.00	88.00
4	2	PC	FRT BUMPER RETAINER / OR	55.00	-10.00	60.50	121.00
5	2	PC	FRT BUMPER TOWING COVER - OR	15.00	-10.00	16.50	33.00
6	1	PC	FRT BUMPER UPPER CTR REINF - BT	120.00	-10.00	132.00	132.00
7	1	PC	FRT BUMPER REINFORCEMENT - BT	150.00	-10.00	165.00	165.00
8	2	PC	FRT BUMPER UPPER REINF BRKT - BT	70.00	-10.00	77.00	154.00
9	2	PC	FRT BUMPER UPPER REINF ARM - BT	75.00	-10.00	82.50	165.00
10	1	PC	FRT BUMPER UNDER COVER - OR	70.00	-10.00	77.00	77.00
11	10	PC	FRT BUMPER CLIPS - MC	1.00	-10.00	1.10	11.00
12	1	PC	FRT GRILLE BASE - OR	190.00	-10.00	209.00	209.00
13	1	PC	FRT GRILLE OUTER TOP MOULDING - OR	150.00	-10.00	165.00	165.00
14	1	PC	FRT GRILLE OUTER LWR MOULDING - OR	150.00	-10.00	165.00	165.00

PAGE: 1 of 5

JANICE

ON BEHALF OF SNG AH TEE PANEL & SERVICE PTE LTD E & O E

Disclaimer clause:

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Quotation is only valid for 14 days.

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 VEHICLE MODEL : TOYOTA HIACE
 CLAIM NO :
 POLICY NO : DHOM110166501903
 REMARK :

146 Robinson Road #02-01
 UOI Building (S) 068909

ATTENTION :
 CONTACT : 6222 7733 FAX NO: 6327 3869/ 6327 3872

S/N.	QTY	UNIT	DESCRIPTION	PRICE	DISC %	DISC/MARKUP	TOTAL AMT
15	10	PC	FRT GRILLE CLIPS - <i>MC</i>	1.00	-10.00	1.10	11.00
16	1	PC	FRT BONNET - <i>00</i>	240.00	-10.00	264.00	264.00
17	2	PC	FRT BONNET HINGE - <i>RT</i>	25.00	-10.00	27.50	55.00
18	1	PC	FRT BONNET STAND - <i>RT</i>	25.00	-10.00	27.50	27.50
19	1	PC	FRT BONNET STAND CLIPS - <i>00</i>	1.00	-10.00	1.10	1.10
20	1	PC	FRT BONNET LOCK - <i>RT</i>	70.00	-10.00	77.00	77.00
21	1	PC	FRT BONNET LOCK CABLE - <i>CUT</i>	70.00	-10.00	77.00	77.00
22	1	PC	FRT BONNET EMBLEM - <i>MC</i>	25.00	-10.00	27.50	27.50
23	2	PC	FRT CORNER PANEL - <i>00 (LH)</i>	70.00	-10.00	77.00	154.00
24	2	PC	FRT CORNER PANEL UPP SIDE CVR (LH) - <i>00</i>	25.00	-10.00	27.50	55.00
25	2	PC	FRT HEADLAMP - <i>BR</i>	240.00	-10.00	264.00	528.00
26	1	PC	FRT WINDSCREEN - <i>BR</i>	480.00	-10.00	528.00	528.00
27	1	PC	FRT WIPER GARNISH - <i>BR</i>	220.00	-10.00	242.00	242.00
28	2	PC	FRT WIPER GARNISH SIDE COVER (LH) - <i>MIS</i>	40.00	-10.00	44.00	88.00
29	2	PC	FRT WIPER ARM (LH) - <i>RT</i>	70.00	-10.00	77.00	154.00
30	2	PC	FRT WIPER BLADE - <i>CUT</i>	25.00	-10.00	27.50	55.00
31	1	PC	FRT WIPER LINKAGE - <i>RT</i>	130.00	-10.00	143.00	143.00
32	1	PC	FRT WIPER PANEL - <i>00</i>	240.00	-10.00	264.00	264.00
33	1	PC	FRT WIPER PANEL SIDE LH - <i>00</i>	120.00	-10.00	132.00	132.00
34	1	PC	FRT WIPER PANEL LWR SIDE LH - <i>00</i>	120.00	-10.00	132.00	132.00
35	1	PC	FRT PANEL OUTER - <i>00</i>	150.00	-10.00	165.00	165.00
36	1	PC	FRT PANEL ASSY - <i>00</i>	450.00	-10.00	495.00	495.00
37	1	PC	FRT SUPPORT TOP - <i>00</i>	150.00	-10.00	165.00	165.00
38	1	PC	FRT SUPPORT LOWER - <i>00</i>	150.00	-10.00	165.00	165.00

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PAGE: 2 of 5

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 CHASSIS/ENG.NO : JTFST22P600018743
 VEHICLE MODEL : TOYOTA HIACE
 CLAIM NO :
 POLICY NO : DHOM110166501903
 REMARK :

S/N.	QTY	UNIT	DESCRIPTION	PRICE	DISC %	DISC/MARKUP	TOTAL AMT
39	1	PC	FRT BRACE PANEL / <i>00</i>	40.00	-10.00	44.00	44.00
40	1	PC	FRT DOOR(LH) / <i>00</i>	580.00	-10.00	638.00	638.00
41	1	PC	FRT DOOR HINGE(LH)(TOP) / <i>01</i>	40.00	-10.00	44.00	44.00
42	1	PC	FRT DOOR HINGE(LH)(BOTTOM) / <i>01</i>	40.00	-10.00	44.00	44.00
43	1	PC	FRT DOOR CHECKER(LH) / <i>01</i>	70.00	-10.00	77.00	77.00
44	1	PC	FRT DOOR INNER TRIMBOARD LH / <i>01</i>	380.00	-10.00	418.00	418.00
45	1	PC	FRT DOOR RUBBER(LH) / <i>01</i>	90.00	-10.00	99.00	99.00
46	1	PC	FRT DOOR LOCK(LH) / <i>01</i>	150.00	-10.00	165.00	165.00
47	1	PC	FRT DOOR LOCK CABLE(LH) ?	150.00	-10.00	165.00	165.00
48	1	PC	FRT DOOR OUTER HANDLE(LH) ?	70.00	-10.00	77.00	77.00
49	1	PC	FRT DOOR INNER HANDLE (LH)	70.00	-10.00	77.00	77.00
50	1	PC	FRT DOOR GLASS(LH) / <i>01</i>	180.00	-10.00	198.00	198.00
51	1	PC	FRT DOOR GLASS REGULATOR(LH) / <i>01</i>	90.00	-10.00	99.00	99.00
52	1	PC	FRT DOOR GLASS MOTOR LH ?	240.00	-10.00	264.00	264.00
53	1	PC	FRT DOOR GLASS INNER MLDG LH / <i>01</i>	70.00	-10.00	77.00	77.00
54	1	PC	FRT DOOR GLASS OUTER MLDG LH / <i>01</i>	70.00	-10.00	77.00	77.00
55	1	PC	FRT DOOR GLASS RUN CHANNEL(LH) / <i>01</i>	90.00	-10.00	99.00	99.00
56	1	PC	FRT DOOR FRAME INNER TRIM LH / <i>01</i>	320.00	-10.00	352.00	352.00
57	1	PC	FRT SIDE MIRROR ASSY(LH) / <i>01</i>	270.00	-10.00	297.00	297.00
58	1	PC	FRT DOOR REAR PANEL(LH) / <i>01</i>	240.00	-10.00	264.00	264.00
59	1	PC	FRT FUEL FILLER COVER LH X	120.00	-10.00	132.00	132.00
60	1	PC	FRT WHEEL HOUSE PANEL(LH) / <i>01</i>	280.00	-10.00	308.00	308.00
61	1	PC	FRT SCUFF PLATE(LH) ?	90.00	-10.00	99.00	99.00
62	1	PC	FRT PILLAR OUTER(LH) / <i>01</i>	240.00	-10.00	264.00	264.00

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 VEHICLE MODEL : TOYOTA HIACE
 CLAIM NO :
 POLICY NO : DHOM110166501903
 REMARK :

S/N.	QTY	UNIT	DESCRIPTION	PRICE	DISC %	DISC/MARKUP	TOTAL AMT
63	1	PC	FRT PILLAR INNER(LH) / <i>DD</i>	240.00	-10.00	264.00	264.00
64	1	PC	FRT PILLAR INNER TRIM(LH) / <i>CR4</i>	220.00	-10.00	242.00	242.00
65	1	PC	FRT PILLAR INNER LOWER(LH) ?	120.00	-10.00	132.00	132.00
66	1	PC	FRT STEP PANEL(LH) ?	70.00	-10.00	77.00	77.00
67	1	PC	FRT STEP GARNISH(LH) ?	55.00	-10.00	60.50	60.50
68	1	PC	COOLANT SPARE TANK / <i>CR4</i>	150.00	-10.00	165.00	165.00
69	1	PC	WASHER TANK / <i>CR4</i>	75.00	-10.00	82.50	82.50
70	1	PC	AIRCON CONDENSER / <i>DD</i>	450.00	-10.00	495.00	495.00
71	1	PC	AIRCON HIGH PRESSURE PIPE / <i>RT</i>	190.00	-10.00	209.00	209.00
72	1	PC	AIRCON LOW PRESSURE PIPE ?	190.00	-10.00	209.00	209.00
73	1	PC	RADIATOR ASSY / <i>BR</i>	550.00	-10.00	605.00	605.00
74	1	PC	INTER COOLER ASSY / <i>DD</i>	550.00	-10.00	605.00	605.00
75	1	PC	INTER COOLER HOSE ?	120.00	-10.00	132.00	132.00
76	1	PC	FRT HORN ?	70.00	-10.00	77.00	77.00
77	1	PC	FRT DASHBOARD / <i>BR</i>	400.00	-10.00	440.00	440.00
78	1	PC	FRT DASHBOARD SUPORT BEAM / <i>RT</i>	350.00	-10.00	385.00	385.00
79	1	PC	AIRCON BLOWER / <i>BR</i>	450.00	-10.00	495.00	495.00
80	1	PC	HEATER BLOWER / <i>BR</i>	1,700.00	-10.00	1,870.00	1,870.00
81	1	PC	AIRCON CONDITIONER PANEL ?	120.00	-10.00	132.00	132.00
82	1	PC	AIRCON AIR VENT PANEL ?	120.00	-10.00	132.00	132.00
83	1	PC	FRT GLOVE BOX(LH) / <i>BR</i>	150.00	-10.00	165.00	165.00
84	1	PC	FRT GEAR KNOB PANEL / <i>CR4</i>	240.00	-10.00	264.00	264.00
85	2	PC	FRT AIRBAG SENSOR / <i>MC</i>	170.00	-10.00	187.00	374.00
86	1	PC	DRIVER AIRBAG / <i>BR</i>	1,300.00	-10.00	1,430.00	1,430.00

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S/N.	QTY	UNIT	DESCRIPTION	PRICE	DISC %	DISC/MARKUP	TOTAL AMT
87	1	PC	FRT PASSENGER AIRBAG ✓ <i>OK</i>	1,700.00	-10.00	1,870.00	1,870.00
88	2	PC	FRT SEAT BELT ✓ <i>Jan</i>	450.00	-10.00	495.00	990.00
89	1	PC	FRT CLOCK SPRING ✓ <i>MC</i>	240.00	-10.00	264.00	264.00
90	1	PC	FRT FLOOR PANEL X <i>R</i>	1,800.00	-10.00	1,980.00	1,980.00
91	1	PC	FRT FLOOR MAT X	800.00	-10.00	880.00	880.00
						----- SUB-TOTAL	25,180.10

**** WORK LABOUR ****

TO KNOCK RR SLIDING DOOR LH & REPLACE ABOVE PARTS	<i>1400</i>	1600.00	1,600.00
TO PUTTY & RESPRAY PAINTING ON AFFECTED AREA	<i>800 1200</i>	1400.00	1,400.00
TO CHECK WIRING		30.00 ✓	30.00
TO REMOVE & FIX FRONT WINDSCREEN		120.00 ✓	120.00
TO REMOVE & FIX DASHBOARD	<i>150</i>	180.00	180.00
TO REMOVE & FIX INTERIOR UPHOLSTERY	<i>X</i>	150.00	150.00
TO REMOVE & FIX AIRBAG	<i>200</i>	280.00	280.00
TO DIAGNOSE & PROGRAM AIRBAG SYSTEM	<i>100</i>	200.00	200.00
TO TRANSFER FRT DOOR LH COMPONENT	<i>50</i>	60.00	60.00
TO TOP UP AIRCON GAS		100.00 ✓	100.00
TO KNOCK STRAIGHTEN, JACK FRT CHASSIS LH	<i>200</i>	300.00	300.00
TO REMOVE & FIX FUEL TANK	<i>X</i>	180.00	180.00
TO REDO COMPANY LOGO	<i>180</i>	280.00	280.00
		----- SUB-TOTAL	4,880.00

JANICE

Janice

ON BEHALF OF SNG AH TEE MOTOR & PANEL SERVICE PTE LTD

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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 confirmed

Signature: _____
 Date: _____

E & O E

SUB-TOTAL : S\$ 30,125.10
 ADD 7% GST. S\$ 2,108.76
GRAND TOTAL : S\$ 32,233.86

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 03/06/2022 18:09 (SGT)
Date of Accident 02/06/2022 10:00 (SGT)
Exact Location of Accident Tuas South Ave 7, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PC2424S

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner HAI LECK ENGINEERING (PRIVATE) LTD
Company Reg No 1XXXXX998D
Email Address melvin_tan@haileck.com
Mobile Phone No (Phone) +65-96148196
Alternative Phone No (Office) +65-81468466

VEHICLE PARTICULARS

Manufacturer Toyota
Model Hiace
Variant HIGH ROOF COMMUTER TURBO AUTO
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? Yes
Vehicle Category Commercial vehicle
Transmission Auto
CC 2982

INSURANCE COMPANY

Name of Insurance Company United Overseas Insurance Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DHOM110166501903
Cover Note Number -

DRIVER

Name of Driver SAFIEE BIN SUKAR
NRIC No SXXXX430F

Date of Birth	02/01/1968
Occupation	Outdoor
Date Of Driving Pass	27/06/1988
Driving experience	34 YEARS
Gender	Male
Mobile Number	(Phone) +65-92440207
Alt. Phone Number	-
Email Address	logistics@haileck.com
Address	BLK 20 TELOK BLANGAH CRESCENT #02-86
Address complement	-
Postcode	090020
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)	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

ON 02/06/2022 @ ABT 1000HRS. I WAS DRIVING ALONG TUAS SOUTH AVE 7 ON THE LEFT MOST LANE. WHEN DRIVING, SUDDENLY VEHICLE B (XE6044Z) WHICH IS IN FRONT OF ME STOP & PARK THE VEHICLE AT THE ROAD SIDE. AS IT WAS TOO SUDDEN, I DO NOT HAVE ENOUGH TIME TO REACT, I THEN KNOCKED ONTO THE SAID VEHICLE AT REAR. NO ONE WAS INJURED IN THIS ACCIDENT. THAT'S ALL.

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	XE6044Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	ABDUL HALIL BIN OSMAN
NRIC No	SXXXX984J

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

(Phone) +65-86525784

-
-
-
-
-
-

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/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. 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.
7. 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 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.
- (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 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
 - (ii) for complying with requirements under any regulations, laws or court orders.

I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR

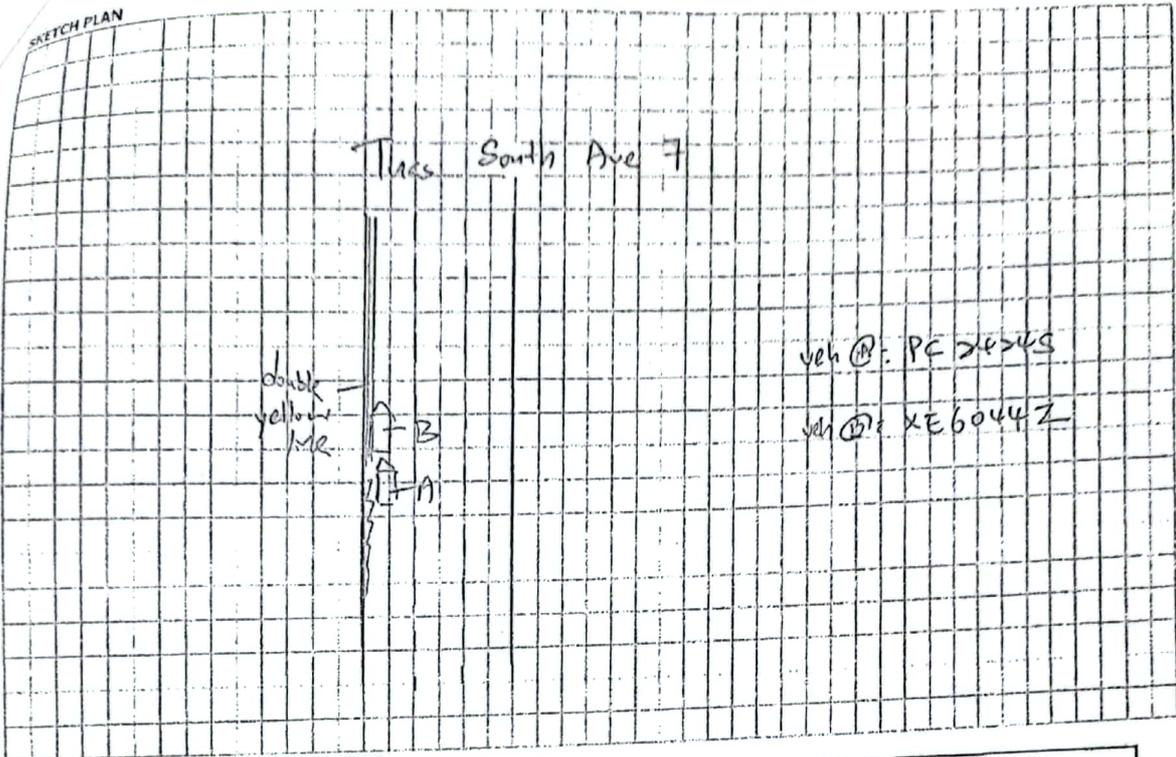


Policyholder's Signature
Date & Time: 03/06/22

Driver's Signature
(If driver is not the policyholder) 14:15
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 02/06/2022 @ abt 100hrs

Refer to attachment.

Claim own policy
 Claim third party
 Claim OD / TP at other workshop
 For record purpose
 Policy No. DHOM 110166501903
 Insurer UOI (C) Veh. No. PC 2424S

DECLARATION

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

[Signature]



Policyholder's Signature
 Date & Time: 02/06/22

[Signature] 01.06.22
 Driver's Signature
 (if driver is not the policyholder) 14:15
 Date & Time:

[Signature]

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

INCIDENT INTERVIEW STATEMENT OF INJURED / WITNESS

Contractor:	<u>Hai Leck E&C Pte Ltd</u>	Project:	<u>Nil</u>
Statement of:	<u>Safiee Bin Sukar (EC2890)</u>	Date of Birth:	<u>JAN 02 / 1968</u>
Trade / Designation:	<u>Driver</u>	NRIC / Permit No:	<u>S — 0430 F</u>
Date / Time of Statement:	<u>02 June 22 / 1500hrs</u>	Interpreted By:	<u>Not necessary</u>
		Recorded By:	<u>HSEM Marhafis</u>

Date & Time of accident: 02/06/22 Location: Tuas South Avenue 7

Total no. of persons involved (witnesses + injured persons): 0

No. of years / months with - 1. Company: 10 years

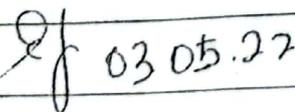
2. Current Project: Driver for Mechanical Dept at 47 TVC

Direct Superior / In-charge: Sankar

Machinery / Tools involved: Passenger Van

Description:
I just finished sending workers to 40 Workshop. My Supervisor Sankar told me to do. I was driving along Tuas South Avenue 7 alone, at lane 3. Then in front of me I saw a trailer But he got hazard light on. To me I cannot assume he is parking. Because a lot of vehicle at This stretch of the road put on hazard light then suddenly move off. So I stick to my lane, Waiting for him to accelerate and I actually expect him to change to middle lane. When I get Nearer to him, I then realize he is actually not going to move. But it's too late already. The road I think is about 70km/hr. I also driving I think around that speed, 69 to 70 km/hr Like that. Everything happen very fast. I know my mistake I never slow down. I should not guess or Assume he was going to move off or change lane. I also know by right if I want to overtake I must overtake by right. My mistake I know. But I am relieve I did not get hurt. That is all I have to say.

(Use additional sheets if necessary)

Signature of Interviewee	Signature of Recorder	Signature of Interpreter Certifying above statement is correct
		-