

ASS. REC. BY:

REF:

072/22006502/K

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

N/S	O/S

Bal. or Market Value:

IDAC Accident Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

06

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

GBF 2339E

Yr Regn:

08, 16

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

MIT Carter

c.c

2998

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

125042

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

FEA GIBA 20293

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: M / L / S / R / Im / STD A / R / Im or

Tyre Size:

F:

195R15X8

R:

(D)

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal.

9

mm

R/Bal.

11

mm

L/Bal.

9

mm

L/Bal.

11

mm

D.O.A.

3/7/22

D.O.I.

13/7/2022

Survey held at

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

O/S Frt

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prel. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S - RS - SI

Photos

Others

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Report Format:

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

TOTAL

REPAIR DETAILS

GBF2339E

1000Mbps
Gigabit
Ethernet

Reference

TP/CHINA

Part Source: (Last Synchronised: 12 Jul 2022)

Parts: N/A MITSUBISHI CANTER 3.0 D FEA01BR1SDEB (M) (Model not available in database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for GBF2339E)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*1 PC FRT BUMPER RH SIDE PAD	Buc/CA 0.00	0.00	*190.00 F ✓
2	1		*1 PC RH SIGNAL LAMP	Br 0.00	0.00	*160.00 F ✓
3	1		*1 PC RH HEADLAMP	mg c m 0.00	0.00	*280.00 F ✓
4	1		*1 PC RH HEADLAMP SIDE REFLECTOR	Br 0.00	0.00	*110.00 F ✓
5	1		*1 PC FRT RH CORNAL PANEL	cm 0.00	0.00	*240.00 F ✓
6	1		*1 PC FRT RH DOOR	R 0.00	0.00	*950.00 F ✓
7	1		*1 PC FRT RH DOOR TOP HINGE	R 0.00	0.00	*75.00 F X
8	1		*1 PC FRT RH DOOR BOTTOM HINGE	R 0.00	0.00	*75.00 F ✓
9	1		*1 PC FRT RH DOOR CHECKER	0.00	0.00	*38.00 F ✓
10	1		*1 PC FRT RH DOOR INNER RUBBER	CA 0.00	0.00	*160.00 F ✓
11	1		*1 PC FRT RH DOOR INNER LOWER RUBBER	CA 0.00	0.00	*18.00 F ✓
12	1		*1 PC FRT RH DOOR INNER LOWER RUBBER	R 0.00	0.00	*45.00 F ✓
13	1		*1 PC FRT RH DOOR LOWER PROTECTOR	0.00	0.00	*420.00 F ✓
14	1		*1 PC FRT RH DOOR GLASS REGULATOR	na 0.00	0.00	*40.00 F ✓
15	1		*1 PC FRT RH DOOR STICKER (DUONIC)	cm 0.00	0.00	*235.00 F ✓
16	1		*1 PC FRT RH STEP TRAY	R 0.00	0.00	*260.00 F ✓
17	1		*1 PC FRT RH WHEEL ARP PANEL	R 0.00	0.00	*80.00 F ✓
18	1		*1 PC FRT RH WHEEL ARP TOP GARNISH	na 0.00	0.00	*200.00 F ✓
18	1		*1 PC FRT RH STEP PANEL	1 0.00	0.00	*200.00 F ✓
Total Parts (\$\$)						3,576.00

F=Franchise part.

Report was unsubmitted during this print-out.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
1	1	1 PC FRT RH DOOR COY STICKER	na 20.00 ✓
Sub Total (\$\$)			20.00

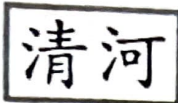
Estimates on Labour

No	Particulars	Lab.Type	Amount
1	REMOVE & REFIX FRT RH DOOR, TRANSFER DOOR ATTACHMENT, TO STRAIGHTEN, KNOCK & REPAIR FRT RH W/SCREEN PILLAR, TO CUT, WELD & RENEW FRT RH STEP PANEL, WHEEL ARP PANEL, KNOCK & REPAIR FRT RH FLOOR BOARD AND REALIGN THE SAME	New	1,100.00
2	PUTTY & RESPRAY ON FRT RH W/SCREEN PILLAR, FRT RH STEP PANEL, FRT RH WHEEL ARP PANEL, FRT BUMPER, FRT RH DOOR	New	700.00
3	REMOVE & REFIX FRT RH DOOR GLASS, CHECK CENTRE LOCKING AND POWER MIRROR	New	60.00
4	TO REWRITE ADVERTISEMENT	New	100.00
5	RUSTPROOFING	New	30.00
Gross Labour Cost (\$\$)			1,990.00

Report was unsubmitted during this print-out.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

BUNNET LOCK

**CHENG HOE MOTOR PTE LTD**

Blk 1019, Yishun Industrial Park A, #01-374/382, Singapore 768761

Tel : 67556142 Fax : 67557719

Email: chmotor@singnet.com.sg

TP INSURER:

China Taiping Insurance (Singapore) Pte. Ltd. (HQ)

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	TP/CHINA(YP4579R)
Policy No:		Date of Loss:	03/07/2022
Vehicle Reg. No.:	GBF2339E	Driveable?	
Party At Fault:	UNKNOWN		
Driver (TP):	MA TUCK MENG	Driver (Insured):	SHANMUGAM JEGADEESHKUMAR
Make/Model:	mitsubishi canter, 3.0 D FEA01BR1SDEB (M)	Vehicle Reg. Date:	22/08/2016
Vehicle Colour:	WHITE	Chassis No:	FEA01BA20293
Engine No:	4P10C24850		
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	0		
Present Location:	CHENG HOE MOTOR PTE LTD (YISHUN)		

*Not authorized
1/1/2022
Repair After Pain
6 days*

COST OF CLAIMS

	Amount
Parts	3,576.00
Miscellaneous Items	20.00
Labour	1,990.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (\$\$)	5,586.00
+ GST 7.00% (\$\$)	391.02
Nett Amount (\$\$)	5,977.02

This claim is handled by: SHARON CHIONG BENG CHOON

Generated using Merimen e-Claims Internet Estimation & Adjusting System

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 04/07/2022 18:18 (SGT)
Reported by Driver
Date of Accident 03/07/2022 06:55 (SGT)
Exact Location of Accident Singapore
Additional Location Information THOMSON RD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBF2339E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner YAKULT (SINGAPORE) PTE LTD
Company Reg No 1XXXXX922R
Email Address admin@yakult.sg
Mobile Phone No (Phone) +65-67561033
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model CANTER FEA01BR1SDEB (CBU)
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Manual
CC 2998

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number D21MTPCVE001752

DRIVER

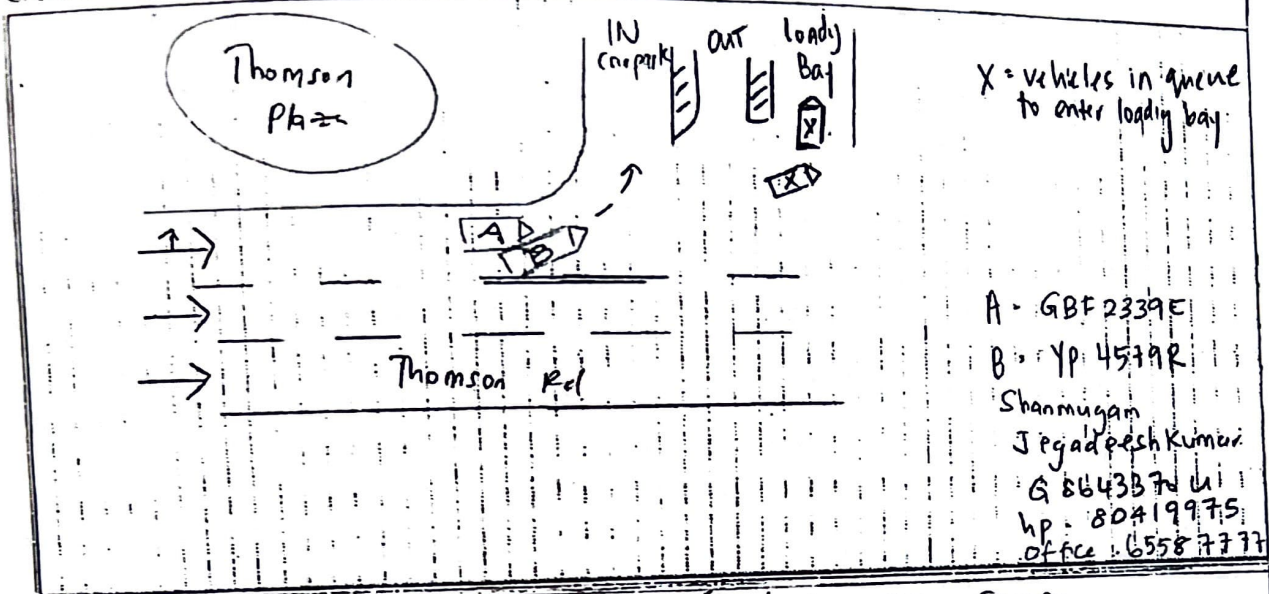
Name of Driver MA TUCK MENG
NRIC No SXXXX873E
Date Of Birth 29/10/1967
Occupation Outdoor

Describe Circumstance of the Accident

NOTE PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14 DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

() Claim Own Policy () Claim Third party () Reporting Only
() Claim OD/ TP at other workshop ()

Sketch Plan



Doc: 3/7/22

Time: 0855 hrs MS: Sompoo

Delivery lorries all in queue waiting for Thomson Plaza loading bay to open @ 7am. While my vehicle was stationary, I notice m/lorry (B) approaching to enter the carpark. While he was making the left turn into the carpark, his lorry body (left side) collided onto my stationary vehicle.

The driver apologized and gave me his particulars. Later, his office called me and proposed to settle my repairs privately.

Declaration

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

Policyholder's Signature / Date & Time
Edun (Signature) ADM (Stamp: ADM, SINGAPORE, PLE, LTD.)

Driver's Signature (if driver is not the policyholder) / Date & Time
MENA (Signature)

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) Edun (Signature) 4/7/22