ASSIGNMENT From: Date: Summed Cost OD / TH / WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: at Worlshop m/s of Sum Intured: Colour Black ACC Insured / Std / Ni / Ni Sum Intured: (Cilent's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bla. or Market Value: IDAC Addient Riport Consistent? Yes or No Lum Sum: Sum Rese: Consistent? Yes or No Lum Sum: Action / Instruction CA / REV / REP. / 24 HRS Desc / Time Action / Instruction Policy Time Action /	= #	14.
Estimated Cost OD/TT/WS/TP RES/OD RES/EVA/INV/MV To Inspect Vehicle No: at Workshop m/s of Policy No. Claims No. Samm Insured: (Client's Record) Make: Miss Cost	ASS, PEC. BY:	C3/AG1 22006 90 HANY3
Type: M.Čar / M.Cyole / Bus(\Van\) Lorry / Taxl / Prime Mover / Truck / Trailer or Make: \(Nissan N	The second secon	ASSIGNMENT
Truck / Trailer or Truck / Trailer or Makie: Nissa NV350 c.s 2488 AC: Insured / Std / Ni / Ni Sp. Reading 9623 / TirRadio: Insured / Std / Ni / Ni Insured Policy No. Claim's No. Sum insured: Excess: (Cliert's Record) Make cf Veh: (Policy Condition) Remark The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Lum Sum: % 3 Vel.: Yes or No Lum Sum: % 3 Vehicle: IN / OUT Date: Person Contacted: Person Contacted: Vehicle: IN / OUT Date: Person Contacted: The Urc / Chassis frame / Body Structure effected due to collise of the Person of Policy of Repair: Survey held at Sin Hyele: Policy Time Action / Instruction Addition (unfirmed Lump Sum \$ H4000 and \$ days of Real; Yes or No Date / Time Action / Instruction Date / Time Action / Instruction Province of Repair: Survey Fee: Survey No. of Trip: Survey Fee: Survey Fee: Survey No. of Trip	From: Date:	Veh No: GR76D. Yr Regn: 2017, Nov
To inspect Vehicle No: at Workshop m/s of Insured Policy No. Claims No. Sum insured: (Client's Record) Make of Veh: (Policy Condition) Remark The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: IDAC Accident Rport: CA / REV / REP. / 24 HRS Person Contacted: Date / Time Action / Instruction The Workshop m/s Older Time Action / Instruction The Workshop m/s Repair 1 Jamma / Laked / Burnt or Modi	Estimaled Cost:	Type: M.Car / M.Cycle / Bus (Van) / Lorry / Taxi / Prime Mover /
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Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport:		
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Transportation.		Transportation:
	2)	Add Fee: Site Inso (\$)_8-Rssi



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 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.

- Any false reporting may be referred to the Police for investigation.
 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 18/07/2022 15:31 (SGT) Reported by Both Date of Accident 17/07/2022 13:32 (SGT) Exact Location of Accident Tampines, Singapore Additional Location Information TAMPINES AVE 5 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Vehicle Registration Number GR76D INSURED/POLICYHOLDER

Is company? Name Of Registered Owner ARMIX MARKETING PTE LTD Company Reg No

AXXXXXX226H Email Address ARMIX38@GMAIL.COM

Mobile Phone No (Phone) +65-96250262 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Nissan Model Nv350

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? No - Claiming third party Vehicle Category Commercial vehicle

Transmission Manual 1998

INSURANCE COMPANY

Name of Insurance Company Great Eastern General Insurance Limited Policy Number / Cover Note Number 2021-V0114819-VCV-R001

DRIVER

Name of Driver ARMIX MARKETING PTE LTD Company Reg No AXXXXXX226H Date Of Birth 03/09/1957 · Indoor

Date Of Driving Pass Driving experience Gender 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	11/03/1977 45 YEARS AND 4 MCNTHS Male (Phone) +65-96250262
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
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? Translator's ID	No 2 No - Yes 1 No -
Translator's phone number Translator's email Original language used in the statement	
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	
PLEASE SEE ATTACHED.	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No.
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category	SMF1928G Honda Vezel - Private car
Name of Driver NRIC No	KYAW LINN THAN SXXXX926B

Contact Number	·(Phone	+65	-820	0071	7
Address	-				
Address complement				Ÿ	
Postcode	7°-				
Insurance Company Name	-		51		
Nature Of Damage	_				
Details of property damaged in accident	-				
No. Of Passenger (Including Driver)	1 ·			,	

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrapresentation 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.
- 8. 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 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 w orkshop 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 making 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' law yers/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 law yers/law firms), w (sich may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date &

Oriver's Signature (# driver is not the policyholder) / Date & Time

Sketch Plan

Witnessed by Reporting Centre

Personnel

escribe Circumsta	nces of the Accider	nt		- *	-
(GR7615) The 5 Tight t Midwent Cute t The ci	was stood while I urn to I later in he parts	Landones Sandones Sandones Sandones	SMF 11. Vely de	my vehicle long Tampine 28 (+ hd 28 (+ hd	-
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Declaration

We declare the foregoing particulars are true in every respect.



Principalities's Signature / Date 3.

Orived's Signature of driver is not the policyholde

Data Wilnes

Wilnessed by Reporting Centre Resource

SIN HWEE MOTOR PTD LTD

BLK 3023A UBI RD 1 #01-59 SINGAPORE 408717 UEN: 201327079M

VEHICLE NO

Name / Addre	ess	
ARMIX MARKE	ETING PTE LTD	
	3 gr	

MODEL

LKK Auto Consultants he Estimate

the Repairer of the following

- To resurvey before/al@ateay painting Estimate #
- To display da maged part(s) during lesurve
 Parts prices are submit to good and the section of the sect
- Parts prices are supper/2022/irmation 1011
- . 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

Signature:

Date:

TP Bridged Direct. Xiao Chun INIMCZEZ6Z

GR 76 D	NISSAN NV350				*
	Description		Qty	Rate	Total
AILGATE - NETT Dev	Day.			2,157.00 350.78	24 0 2,1 37.00 350.78
AILGATE CHROME - NET				636.32	636.32
ISSAN CENTER LOGO - N V350 + URVAN LOGO - N	formanian.		1	70.00 118.70	70.00 118.70
EAR BUMPER - NETT	De d		1	780.88	688 780.88
	iem ct			287.00	287.00
VEATHER STRIP - NETT	pe u	4275.23		175.41	175.41
END PANEL - NETT	tested ,	N 000 000		498.10	498.10
END PANEL TOP CHROME	E-NETT Dested	3847.70		85.77	85.77
VINDSCREEN SEAL - NET	T	384110		75.88	75.88
SUBTOTAL					5,235.84
LESS 10%			1	-523.58	-523.58
70K/H STICKER				28.00	28.00
BUMPER CLIP Kun			10	4.50	45.00
REVERSE SENSOR	and.			280.00	280.00
CEVERSE SENSOR	INSTALL REVERSE SENSO	R		120.00	120.00
DO BELLOUE AND BEEN				180.00	480.00
FO REMOVE AND REFIX I FO SUPPLY WINDSCREEN			100	180.00 120.00	120.00
TO SOTTET WINDSCREET	GLALANI		8	120.00	19000
TO TRANSFER BOOTLID ! BOOTLID	MECHANISM, FITTINGS AN	D TRIMS TO NEW		250.00	250.00
TO DISMOUNT AND MOU	NT INNER CARPET AND BO	OARDS TO FACILITATE		250.00	250.00
REPAIR WORK		한 10 시간 16 시간 20 시간	2285	3000 1000	
TO REPLACE END PANEL	S INCLUDE KNOCKING, CU	ITTING AND WELDING	100	1,200.00	1,200.00
	ND ALIGN AFFECTED PART			.,=00100	
SPEC SPEC					
TO SPRAY PAINT TAILGA	ATE, BUMPER AND END PA	NEL ()		1,200.00	1,200.00
TO CUIDDLY AND THEF PA	OTE	Adrian L		120.00	120:00
TO SUPPLY AND TUFF K	JIE	11 21/20 22		120.00	1,20,00
TO CARRY OUT WIRE CH	IECKING	r 2 1 104 1		120.00	120,00
io cidati out time of		1 1 0000	1 %	0100	

Total

Told: 6132-70

\$8,625.26

HS: 49K