

(08/11/8) wef  
ASS. REC. BY: JIT KEONG

REF: CS/FCI22008085/Rv3

B  
335M

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
To Inspect Vehicle No: YP 4338U  
at Workshop m/s JIT KEONG  
of 28 BEND PL  
Insured: SBS 6367D FCI 2  
Policy No. \_\_\_\_\_  
Claims No. D22002600MFBP  
Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
(Client's Record)  
Make of Veh: \_\_\_\_\_

Veh No: YP 4338U Yr Regn: 2016 / OCT  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or \_\_\_\_\_  
Make: MITSUBISHI CANTOR 3.0 D.T c.c. 2498  
Colour: WHITE A/C: Insured / Std / NI / NA  
Sp. Reading: 264134 T/Radio: Insured / Std / NI / NA  
Eng/No: \_\_\_\_\_  
C/No: FEB50543960  
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

11am

N/S	O/S

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

Tyre Size: F: 205/85R16  
R: \_\_\_\_\_  
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or WSTLAKE

Bal. or Market Value: 57K  
IDAC Accident Rport: 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

Front 7 mm R/Bal. 7/7 mm  
L/Bal. 7 mm L/Bal. 7/7 mm  
D.O.A. 19/08/22 D.O.I. 24/08/22  
Survey held at JIT KEONG

CA / REV / REP. / 24 HRS  
Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
O/S FR  
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction  
REPAIR LIMIT - 54K

13/10/22 Rasul informed LS \$500 (Red 513.34, 50%)

Date/Time, File Pass to?  : Preli. Report  
 : Final Report

Days Of Repair: 1  
Resurvey No. of Trip: 1

Date/Time, File Return to?  
2) 13/10/22-typist

Add Fee:  : Site Insp (\$ )  
 : Interview (\$ )  
 : Tech. Invs (\$ )  
 : Weekend (\$ )

Survey Fee:	
Transportation:	
Photos	
Others	
TOTAL	

Report Format : TP  
Lump Sum / t.B.: (\$ 500 )



# 日強貿易私人有限公司 JIT KEONG TRADING CO. PTE. LTD.

**bizSAFE<sub>3</sub>**

Co. Reg. / GST Reg. No.  
201900335M

No. 28 Benoi Place Singapore 629945. Tel: 6863 4186 Fax: 6861 3533  
E-mail: main@jitkeong.com.sg

Date : 20 Aug 2022

To : **MS First Capital Insurance Ltd**  
6 Raffles Quay  
#21-00  
Singapore 048580

Attn. : Motor Claim Department Person In-Charge  
Tel : 6222 2311 Fax : 6222 3547  
Your Ref No.: SBS6367D

*RASUL*  
*Hp 90010068*  
*1 day*  
*4/5*  
*24/08/22 P1045*  
*Resy after repair*

**RE : Accident On 19/08/2022 @ 07:15hrs involing YP4338U & SBS6367D along Toh Guan Road East towards Toh Guan Road**

**Estimate Repair Bill For Vehicle No.: YP4338U**

**Parts:**

S/n	Product Description	Qty	Unit Price	Amount S\$
1	R/H Wing Mirror Arm <i>bt</i>	1 pc	\$ 547.62	\$ 547.62
2	R/H Wing Mirror <i>cut</i>	1 pc	\$ 119.43	\$ 119.43
SUB-TOTAL				\$ 667.05
Gst 7%				\$ 46.69
				\$ 713.74

**Labour & Equipment use charge:**

S/n	Product Description	Qty	Unit Price	Amount S\$
1	Labour To Remove Damage Parts & Replace	1 job	\$ 280.00	\$ <del>280.00</del> <i>150</i>
SUB-TOTAL				\$ 280.00
Gst 7%				\$ 19.60
				\$ 299.60

Parts \$ 713.74  
Labour \$ 299.60  
**TOTAL \$ 1,013.34**

Note: The above estimate does not include any hidden damage parts that is are not visible at the time of repair. If any hidden damage found after dismanting, we will advise you accordingly.  
Remark: Contact Person : Sunny Yeoh (Hp: 9662 1626)

**JIT KEONG TRADING CO. PTE LTD**

*[Signature]*

Authorised Signature

**LKK Auto Consultants** hence notify the Repairer of the following damage

- 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  
Signature:  
Date:

# 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 Actual 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	19/08/2022 16:03 (SGT)
Reported by	Driver
Date of Accident	19/08/2022 07:15 (SGT)
Exact Location of Accident	Toh Guan Rd E, Singapore
Additional Location Information	TOWARDS TOH GUA RD
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number YP4338U

### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	JIT KEONG TRADING CO PTE. LTD.
Company Reg No	201900335M
Email Address	RENTAL@JITKEONG.COM.SG
Mobile Phone No	(Phone) +65-68634186
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Canter
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	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	P2353362

### DRIVER

Name of Driver	CHANDRABABU PRAGANANTHAN
NRIC No	G2374914P
Date Of Birth	22/05/1993
Occupation	Outdoor

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

12/05/2017  
 5 YEARS AND 3 MONTHS  
 Male  
 (Phone) +65-86484365

RENTAL@JITKEONG.COM.SG  
 1 CHANGI BUSINESS PARK CRESCENT #04-01/02/03  
 PLAZA 8 CHANGI BUSINESS PARK TOWER 14  
 486025

No  
 Employee  
 No

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) ..... 7  
 Has the driver been approached by unknown person(s)  
 soliciting/offering accident claims assistance? ..... No  
 Translator's name ..... -  
 Translator's ID ..... -  
 Translator's phone number ..... -  
 Translator's email ..... -  
 Original language used in the statement ..... -

PASSENGER 1

Name ..... JAMAL NIL  
 Gender ..... Male

PASSENGER 2

Name ..... HOQUE MD MONIRUL  
 Gender ..... Male

PASSENGER 3

Name ..... MIIAH MD SUJON  
 Gender ..... Male

PASSENGER 4

Name ..... KHAN MD ALAMIN  
 Gender ..... Male

PASSENGER 5

Name ..... SAJAN MD HAFIZUR RAHMAN  
 Gender ..... Male

PASSENGER 6

Name ..... SARKER MD ABDULLAH  
 Gender ..... Male

DETAILS OF POLICE ACTION

ASS.P

Was the accident reported to the police?  
Was notice of intended Prosecution given?  
If yes, against whom?

No  
No  
-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

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

Yes  
No

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SBS6367D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	MOHAMED RAFI BIN MOHAMED NASSER
NRIC No	S8622486J
Contact Number	(Phone) +65-94570080
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**

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.



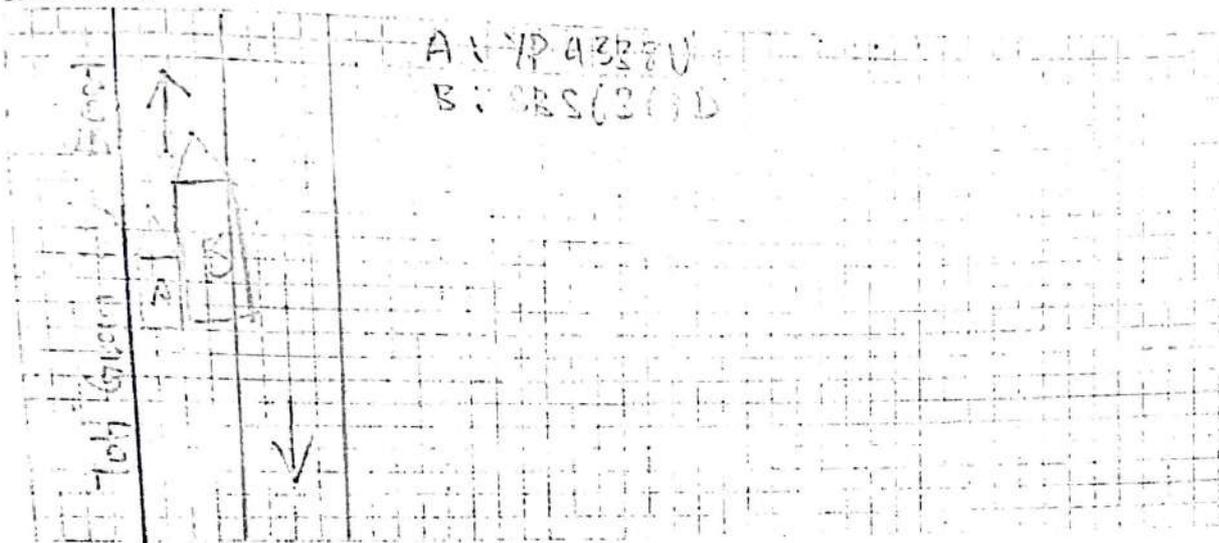
Policyholder's Signature  
Date & Time:

*C.P.S.P.*  
Driver's Signature  
(I driver is not the policyholder)  
Date & Time: 19/08/22 10.44 am

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

I AM AWARE 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 MORE DETAILS.

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At about 7:15am I am in the vehicle YP 4338U waiting to pick up workers. A bus over took my vehicle and collide into the right side of my vehicle. Bus vehicle plate is SBS 6367D.

DECLARATION

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

Claim own policy  
 Claim third party  
 Claim OD / TP at other works hop Jit Keong  
 For record purpose  
 Policy No. P2353362  
 Insurer AYA Veh.No. YP4338U



Policyholder's Signature  
Date & Time:

C. P. K.  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 19/08/22 . / 10.44 am

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

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	335M
Vehicle No.:	YP4338U
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Aug 2022
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER 3.0 DIESEL TURBO M/T
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	4P10C08197
Chassis No.:	FEB50543960
Maximum Power Output:	-
Open Market Value:	\$37,286.00
Original Registration Date:	13 Oct 2016
First Registration Date:	13 Oct 2016
Transfer Count: -	1
Actual ARF Paid:	\$1,865.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	12 Oct 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$4,912.00
COE Rebate Amount:	\$2,183.00
Total Rebate Amount:	\$2,183.00

The information contained herein is correct as at 25 Aug 2022

OK

# Mitsubishi Fuso Canter 3.0M

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**YOUR ONE-STOP COMMERCIAL VEHICLE  
SOLUTION PROVIDER**

<b>Price</b>	<b>\$65,800</b>	<b>Lifespan</b> ?	11-May-2037
<b>Depreciation</b> ?	\$13,960 /yr View models with similar depre	<b>Reg Date</b>	12-May-2017 (4yrs 8mths 16days COE left)
<b>Mileage</b>	N.A.	<b>Manufactured</b> ?	2016
<b>Road Tax</b> ?	N.A.	<b>Transmission</b>	Manual
<b>Dereg Value</b> ?	\$12,266 as of today (change)	<b>Fuel Type</b>	Diesel
<b>COE</b> ?	\$26,029	<b>OMV</b> ?	\$39,724
<b>Engine Cap</b>	2,998 cc	<b>ARF</b> ?	\$1,987
<b>Curb Weight</b> ?	3,340 kg	<b>No. of Owners</b> ?	2