ASS. REC. BY:	112008087/Kg
He Kennerh	ASSIGNMENT
From: Date:	
Esumated Cost:	Veh No: 6816957A Yr Regn: 06, 19
OD //IP /WS / TP RES / OD RES / EVA / INV / MV	Type: M.Car / M.Cycle / Bus / Wan / Lorry / Taxl / Prime Mover /
To Inspect Vehicle No:	Truck / Trailer or
at Workshop m/s	Make: Suzuki Every c.c (58
of Falcan	Colour White AC: Insured / Std / NI / NA
Insured:	38011 Sp.Reading 50773 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	C/No: DA17V. 261198
Sum Insured:	Gen. Cond; Good / Fair / Poor / Burnt
(Client's Record)	Steering: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
	Modi: NTC/S/Rim / STD A/Rim or
PoliceControl	- Committee of the control of
(Policy Condition)	
Remark: The veh had commenced its	0/5 155R12 x8
repair at the time of inspection.	BS / BUR / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SILMI /
Bal. or Market Value:	TOYOTYOKO or
IDAC Accident Rport: Consistent2 . V.	Eroni Rear
GIA / DD C-	R/Bal. • mm R/Bal
Est Receive Consistent?: Yes or No	L/Bal. 7 mm L/Bal.
Lum Sum:	DOA 22/1/10
% 3 Val.: Yes or No	Survey held at D.O.I. 24/8/202
CA / REV / REP. / 24 HRS	
Deter	Des. of Damages Frt Rear O/S N/S U/C Rooftop or
Person Contacted:	
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
LKg Said 1.B. I unable to 10	
1,01124 60 /6	cole Insports. (Parellel imported van)
	and the second of the second o
hate/Time, File Pass to?	The second secon
: Prell. Report	Days Of Repair:
: Final Report	
ta/Time, File Return to?	Resurvey No. of Trip: Survey Fee:
	Transaction
Add Fee	l'Site loss /e
•	1-3-13. 31
oort Format :	: Interview (\$) Finds
	Tech Invs (\$) Others
np Sum / I.B.I: (\$	Weekend (\$
• • • • •)
	TOTAL

A314-3

FALCON-AIR

NISSIN FOODS SINGAPORE PTE LTD C/O 176 SIN MING DRIVE #01-06/07 SIN MING AUTOCARE 575721

Attention : Motor Claim Department Attention : Motor Claim Department

Not Asthair

Date: 23/08/2022

Vehicle Num:: GBJ 6457A

Make/Model: SUZUKI EVERY-2017/2019

Chassis/Eng#: DA17V261198

Accident Date: 22/08/2022

Claim No.:

Reference: TP - TOKIO AGT UOI (SM)

Policy No.: MK000221

Estimate: ES012445

Date: 23/08/2022

S/N Quantity Particular

Unit Price

Amount S\$

Total Parts Purchased S\$:	1. 1 PC 2. 2 PCS 3. 1 PC 4. 1 PC 5. 1 PC 6. 1 PC 7. 1 PC 8. 1 PC 9. 1 PC 10. 1 PC	RADIATOR HOSE LOWER
		10.00% Of The Above Parts S\$:
		Based On Cost Plus S\$:
Based On Cost Plus S\$:	4.0	SPECIAL NETT ITEMS:
SPECIAL NETT ITEMS:	1 SET	ASSORTED CLIPS
		Special Nett Total S\$:
SPECIAL NETT ITEMS: 1 SET ASSORTED CLIPS		

285.00 40.00 X 18.00 475.00 250.00 240.00 75.00 250.00 90.00 15.00 7 1,738.00

173.80 1,911.80

LABOUR:

1.

TO VACUUM, RE-OIL AND RE-GAS AIR CON

Ma 80.00 6012

80.00

120.00 (00)

CONTINUE / ...

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 resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

FALCON - AIR AUTO SERVICES PTE LTD (a subsidiary of Falcon-Air Holdings Pte Ltd)

FALCON-AIR

ERVICES PTE LTD Co. Reg. No.: 199501140D GST Reg. No.: 199501140D

Estimate: ES012445

Date: 23/08/2022 Vehicle Num: GBJ 6457A Make/Model: SUZUKI EVERY-2017/2019

Chassis/Eng#: DA17V261198 Accident Date: 22/08/2022

Claim No. :

FALCON - AIR AU'

Reference: TP - TOKIO AGT UOI (SM) Policy No.: MK000221

S/N Quantity

Particular

NISSIN FOODS SINGAPORE PTE LTD

C/O 176 SIN MING DRIVE #01-06/07

SIN MING AUTOCARE 575721

Attention: Motor Claim Department Attention: Motor Claim Department

Unit Price

Amount S\$

TO REPAIR RH INNER SUPPORT PANEL INCLUDING REPLACEMENT

TO SPRAY PAINT ON BONNET, FRONT BUMPER, RH INNER SUPPORT

Labour Total S\$:

700.00 100

A314-32

1,420.00

E. & O.E.

Total S\$:

3,411.80

========

ON AIR AUTO SERVICES PTE LTD

ead Office: Bik 1/6 Sin Mand Drive #01-06/07/12 #05-1/ Sin 11n: Autor

n was prepared from visual inspection. Futher materials and labour charges may be required when repair We will advise you accordingly.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>.
 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

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

23/08/2022 11:05 (SGT) Date of Submission Reported by Driver 22/08/2022 15:15 (SGT) Date of Accident **Exact Location of Accident** Singapore CAR PARK OF BLK 608 AMK AVE 5 Additional Location Information

Singapore

Country/State of Loss

DETAILS OF OWN VEHICLE

Employment

Goods vehicle

No - Claiming third party

Vehicle Registration Number **GBJ6457A**

INSURED/POLICYHOLDER

Is company? Yes NISSIN FOODS SINGAPORE PTE LTD Name Of Registered Owner Company Reg No 2XXXXX380H **Email Address** iris.lim@nissin.com (Phone) +65-62652447 Mobile Phone No

Alternative Phone No.

VEHICLE PARTICULARS

Manufacturer Suzuki Model Every 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?

Vehicle Category

Transmission **Auto** CC 660

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Policy Number / Cover Note Number 22-MK000221-R03

DRIVER

Name of Driver CHYE CHIAN HSIUNG NRIC No SXXXX007F Date Of Birth 21/01/1974 Occupation Outdoor

SKETCHPLAN

IMPORTANT NOTICE

- Please report garreally the details of the accident to seeed up the claims process
- This Form must be completed by the Policyholder and/or the Actual Driver
- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to the GIA Records Management Centru 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 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 agencylauthority (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 dains:
- (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

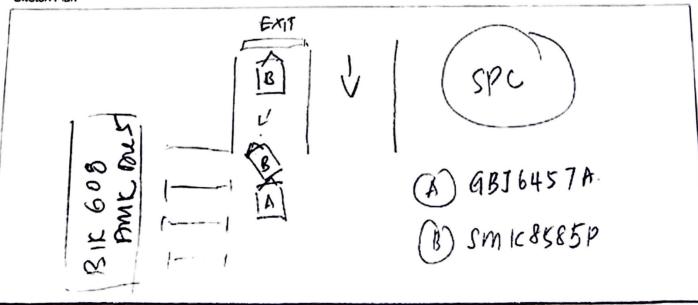
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents 55/NGA), which may be sited outside of Singapore, for one or more of the above Purposes. (including their lawve

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personne (Name as in NRIC/ID card)

Sketch Plan



Jun2022