

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/CT122008834/UVY3

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. DMCVSNW00110942102

Claims No. SNM22D206226/C02/TOHHS

Sum Insured:

Excess:

(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 Rpt:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

N/S	O/S

Veh No:

XE1430A

Yr Regn:

29/03/03

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

Truck / Trailer or

Make:

MIF FV517

c.c 11945

Colour:

Green

A/C: Insured / Std / NI / NA

Sp. Reading:

821860

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

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

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 28/9/22-typist

Report Format: Merimen

Lump Sum / I.B.I: (\$ 1200

☐: Preli. Report☐: Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

TOTAL

28/9/22 P/P \$1200 informed S. Gu: (red 11,459.62, 90%)

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	926C
Vehicle Details	
Vehicle No.:	XE1430A
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Sep 2022
Vehicle Make:	MITSUBISHI
Vehicle Model:	FV517P2RDEB
Primary Colour:	White
Manufacturing Year:	2002
Engine No.:	6D24327760
Chassis No.:	FV517PA00265
Maximum Power Output:	-
Open Market Value:	\$73,988.00
Original Registration Date:	29 Mar 2003
First Registration Date:	29 Mar 2003
Transfer Count:	1
Actual ARF Paid:	\$3,700.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	28 Mar 2023
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$58,461.00
COE Rebate Amount:	\$4,213.00
Total Rebate Amount:	\$4,213.00

The information contained herein is correct as at 23 Sep 2022

OK

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	01/09/2022 16:56 (SGT)
Reported by	Driver
Date of Accident	01/09/2022 09:00 (SGT)
Exact Location of Accident	Jln Buroh, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE1430A
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LIAN HUAT HENG (88) PTE LTD
Company Reg No	1XXXXX926C
Email Address	lianhuatheng88@gmail.com
Mobile Phone No	(Phone) +65-83033863
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Fv517
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	11945

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	GA540029

DRIVER

Name of Driver	N PREM KUMAR
NRIC No	SXXXX440B
Date Of Birth	03/02/1967
Occupation	Outdoor

Date Of Driving Pass	11/09/2007
Driving experience	15 YEARS
Gender	Male
Mobile Number	(Phone) +65-82924870
Alt. Phone Number	-
Email Address	lianhuatheng88@gmail.com
Address	APT BLK 292A BUKIT BATOK EAST AVENUE 6 #12-210
Address complement	-
Postcode	651292
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 - Opening Door of Vehicle
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

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

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XE4328T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	KOH CHEE HONG
NRIC No	SXXX658A

Contact Number	-
Address	APT BLK 208 BOON LAY PLACE #18-177
Address complement	-
Postcode	640208
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

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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.**
6. This report will be forwarded by the insurers to 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 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

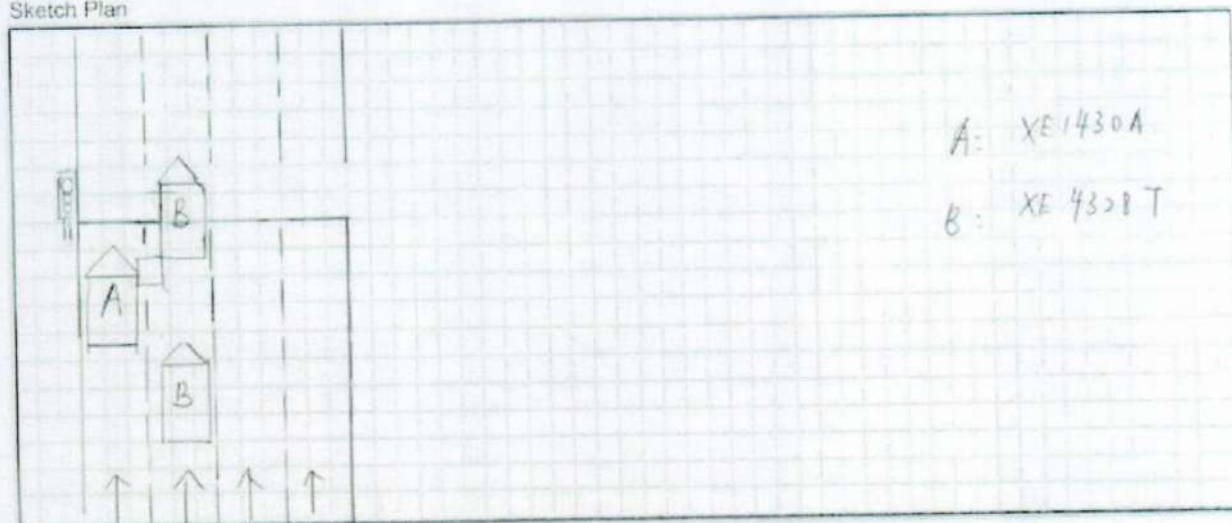
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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


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

Sketch Plan



Describe Circumstance of the Accident

At the above Mention date & time, I was travelling along Jalan Buroh. Both of Vehicle was waiting traffic light. While traffic light was turn green, Both vehicle was moving. Out of sudden, vehicle B rear upper door open & hit onto my vehicle front right door portion. My vehicle front right door got damages. No One was injured.

At the first, the other party want to private settle, but after the other party ask us to claim against this vehicle insurance.

I got message to proved our conversation that they did want to private settle at first.

Declaration

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



Policyholder's Signature / Date & Time

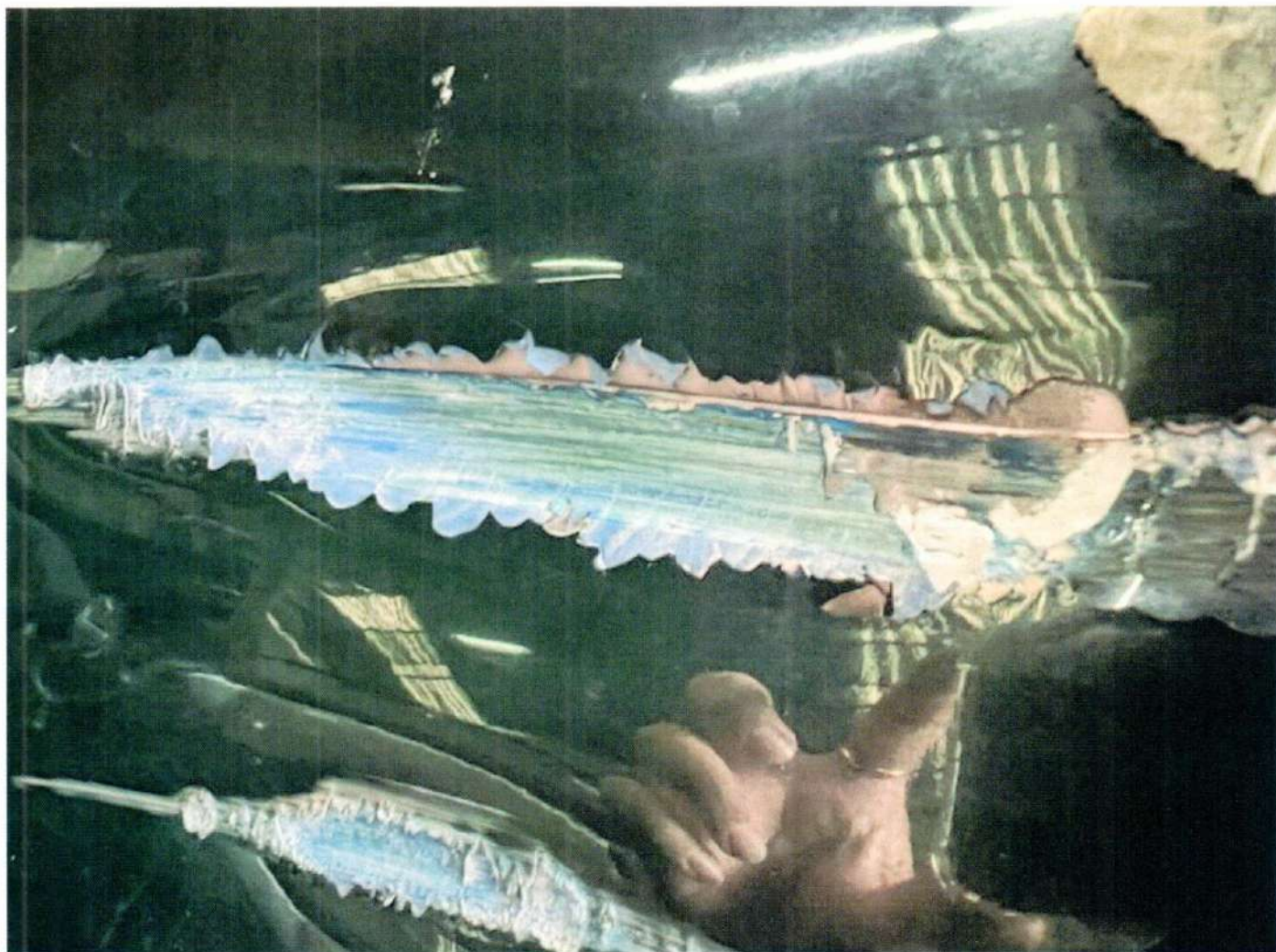



Driver's Signature (if driver is not the policyholder) / Date & Time



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







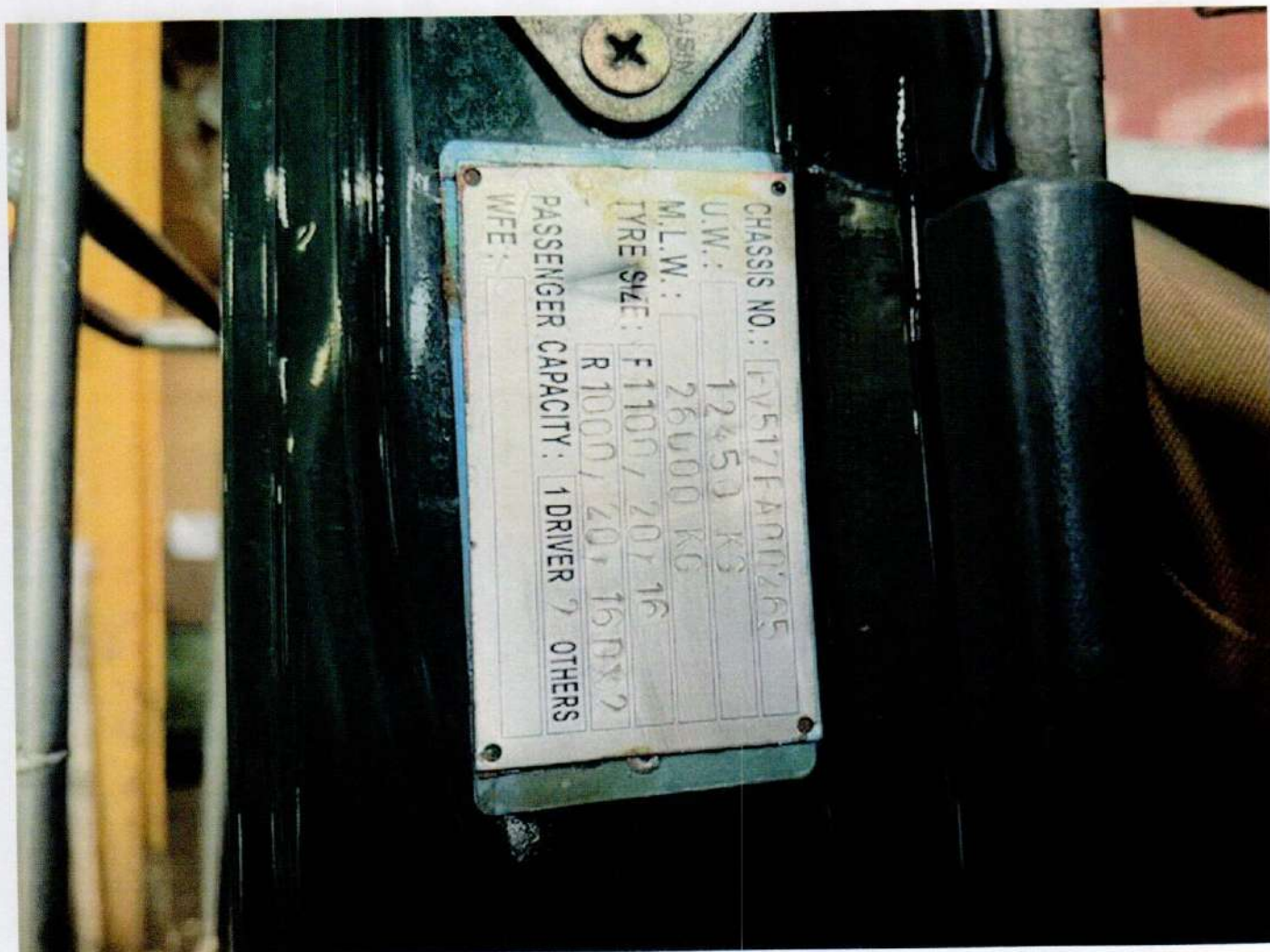








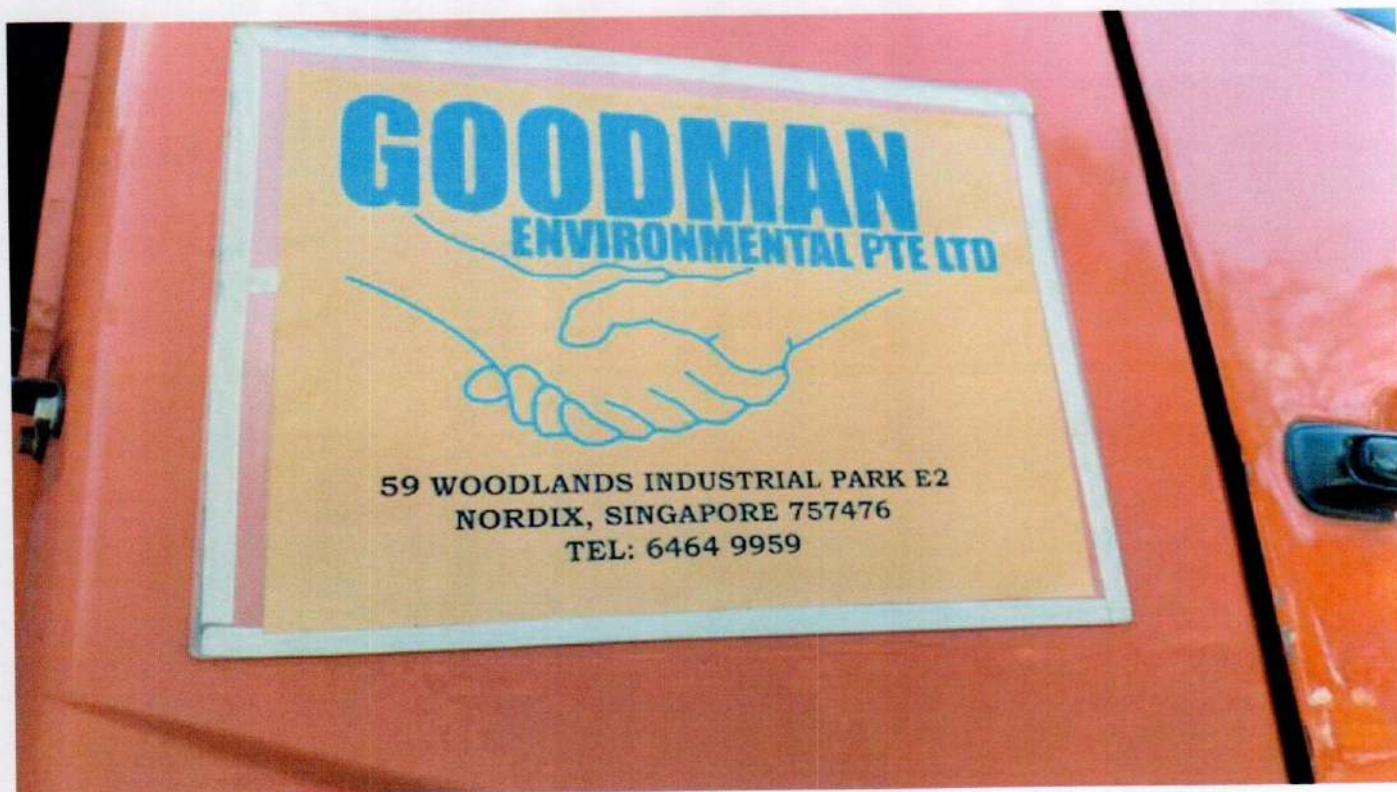


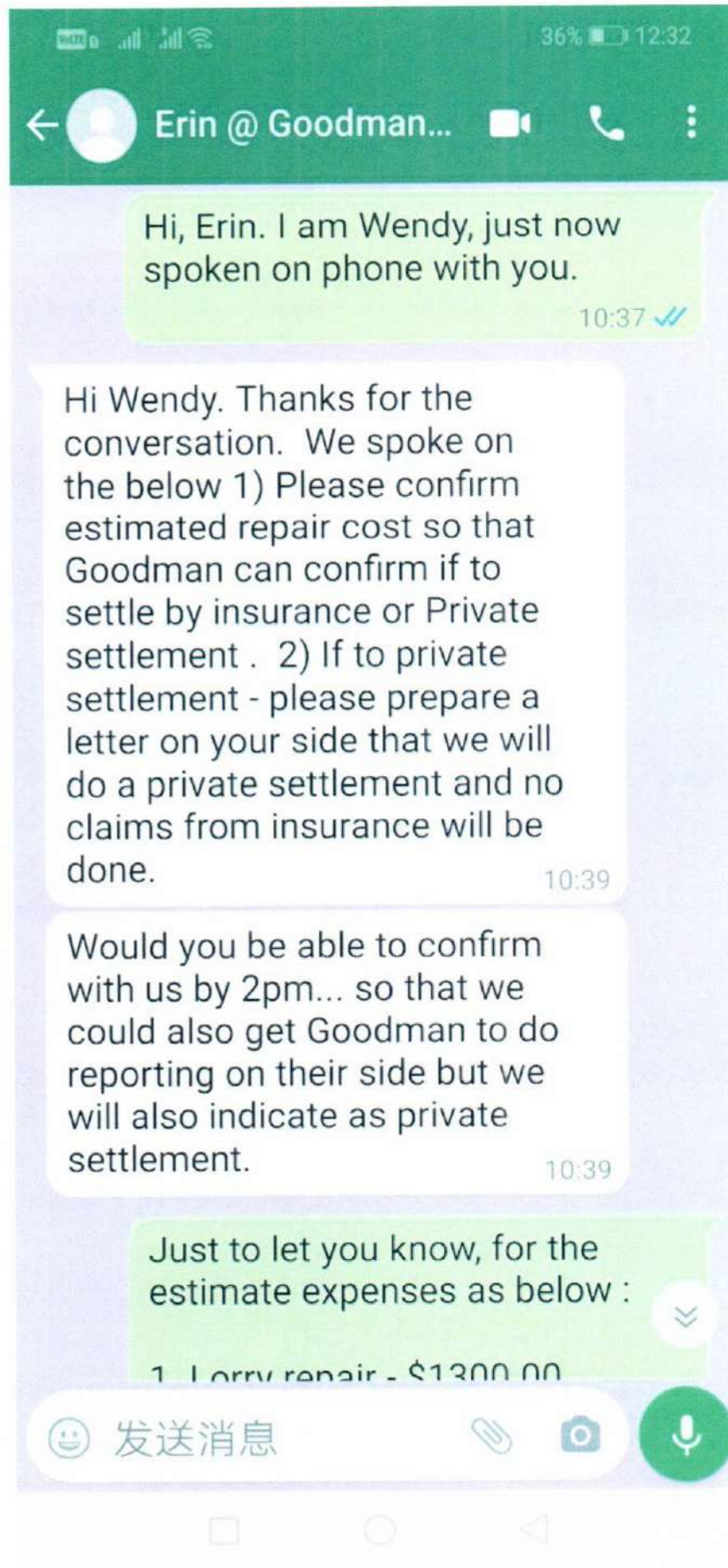












MAH LIAN MOTOR VEHICLE REPAIRER

No.38 Defu Lane 9 Singapore 539278
 TEL: 62823336 FAX: 62893336 Email: mahlian@singnet.com.sg
 GST:M90362564P RCB NO:201327339E

M/S : China Taiping Insurance (Singapore) Pte Ltd
 3 Anson Road
 #15-00 Springleaf Tower
 Singapore 079909

TEL: - FAX: -
 ATTN: Motor Claim Department

Your Ref No: LIAN HUAT HENG (88)
 Claim Type: Third Party
 Accident Date: 01/09/2022
 TP Veh Reg No: XE4328T

Estimate No: ES1700998
Date: 01 Sep 2022
Policy No: GA540029
Veh Reg No: XE1430A
Make/Model: MITSUBISHI
 FV517P2RDEB
Chassis No: FV517PA00265
Engine No: 6D24327760
Reg. Date: 29/03/2003

Estimate Repair Cost to Vehicle No :XE1430A

Description	U/Price	Quantity	List Price SS	Amount SS
List Price				
1 Front Corner Panel -RH	1,098.23	1 PC	1,098.23	
2 Front Corner Panel Seal -RH	196.45	1 PC	196.45	
3 Front Door Assy -RH	6,773.42	1 PC	6,773.42	
4 Front Door Garnish -RH	220.86	1 PC	220.86	
5 Rear Corner Panel -RH	2,151.31	1 PC	2,151.31	
6 Rear Corner Panel Handle -RH	197.60	1 PC	197.60	
7 Front Fender Garnish -RH	279.53	1 PC	279.53	
8 Front Fender -RH	1,455.41	1 PC	1,455.41	
			12,372.81	
		Less 25%	3,093.20	9,279.62
Labour				
9 Labour to straightening ,knocking ,weld ,cutting ,repair and renew all dented parts .	1,800.00	1 JOB	1,800.00	
10 To spray & painting at all dented area .	1,200.00	1 JOB	1,200.00	
11 To rust proofing .	380.00	1 JOB	380.00	
			3,380.00	3,380.00
			Total	SS 12,659.62
			Add GST @ 7%	886.17
			Total Amount Payable	SS 13,545.79

TOTAL: SINGAPORE DOLLAR THIRTEEN THOUSAND FIVE HUNDRED FORTY FIVE AND CENTS SEVENTY NINE ONLY

For MAH LIAN MOTOR VEHICLE REPAIRER

AUTHORISED SIGNATURE

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:

Not Authorised
 23/9/22

is subject to their approval from Insurance Company
 • Supplemental (if any) must be reviewed and
 • No legal notification is allowed
 • That only money in on a "Without Prejudice" basis
 • Part must be subject to confirmation
 • To display damaged parts during recovery
 • To review before any spray painting
 the Reporter of the following:

Signature:
 Date:
 Acknowledged by Reporter