ASIS, RECIBY: TOURN - REF. CS/CTI. 2	2009663/Twy3
	IGNMENT
Erom: Date:	Veh No: GLP8723T Yr Regn: 2017, June
From: Date:	Type: McCar M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / NO / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
	11116
To Inspectivehicle No:	A Total Total
at Workshopm/s	8
of	Sp.Reading 4(3982 T/Radio: Insured / Std / N1 / NA
insured:	Eng/No:
Policy No.	C/No: MHFB 29 F300 = 2010352
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nii / S/Rim / STD A/Rim or
* <u> </u>	Tyre Size: F: 195/6 50 R! 6
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS DUN EXNOVA GY -FS LIZA MIC OHTSU PIR SUMI
repair at the time of inspection.	TOYO / YOKO of
Bal. or Market Value:	<u>Front</u> Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.L. 30/4/22
Lum Sum: % 3 Val.: Yes or No	Survey held at Source Motor & Pander
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear / O/S / N/S / U/C / Rooffop or
Vehicle: IN / O	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
	1
	9 5 B
	3
Date/Time, File Pass 40? : Preli. Report	Days Of Repair:
i) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add	Fee: : Site Insp (\$) _s+Rs_si
	: Interview (\$) Photos
Repersonal:	:Tech. Invs (\$) Others
Lump Sum / LB.A: (F)	:Weelend (\$
	TOTAL



Borneo Motors



Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9 No. 2 PANDAN CRESCENT

SINGAPORE 128462, Tel no.: 6631 1188

ESTIMATE

Account Details				Account No	Account No.		Customer Details				
THIRD PARTY CLAIM		and Consideration	S1000020 / TPCLAIM Document No. 0		M/S Grab Rentals Pte Ltd 3 Media Close #01-03/06 Singapore 138498						
				Document Date 29/09/2022		Work: 6570392					
Ye	ar	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order N	lo. / Remarks		
20	17	NSP151R C	EXRKT Q1	21/06/2017	SLP8723T	0	17764	75/DS/	/SLP8723T		
	(Chassis No.	Engine No.	Terms	SA / Counter	V	ehicle In	Collected On			
M	HFE	329F3002010352	2NRX148917	60	Ng Mei Yen	//	0.00	//	0.00		
L	Cd		Job/Parts Des	cription		Qty	Unit Price	Disc %	Amount		
1 2 3 4 5 6 7 8 9 10 11 12 13 14	B B Z L B B 1 2 3 4	BP-ECU2 TO RESEBP-LAB2 DRILL HOID BP-SLANT SUPPLY SUPPLAB2 REPLACOSTRAIGHTEN & PANE BP-RES2 RESPRAY K52159-0U908 COV K52023-0D100 REIN K52155-0D090 SUP	1.00 1.00 1.00 1.00 1.00	565.60 360.10 25.00 25.00 65.00		180.00 180.00 180.00 100.00					
		behalf of Motors (Singapore) Pte Lt	Customer' Please acknowledg	's Signature ge receipt of vehicle	Charge Sur Parts Labour Sublet Lubrication/Fluid Others	mmary	Total 7 NP Resurved fau 1 M Less 1	49	12 01/30 ne point- anto con lays.		



Borneo Motors

TOYOTA

Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9 No. 2 PANDAN CRESCENT SINGAPORE 128462, Tel no.: 6631 1188

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

				ES	TIMATE	is subject t	to final approv	nust be resurvey al from Insuranc	ed <u>and</u> e Company		
Account Details			Account	nt No. Acknowledged by Repairer Customer Details							
THIRD PARTY CLAIM				S1000020 / TPCLAIM Signature: M/S Grab Renta			ls Pte Ltd				
			Documen 0	nt No.	#01-	3 Media Close #01-03/06 Singapore 138498			_		
					Document Date 29/09/2022		Work: 65703925				
Ye	ear	Model	Variant	Reg. Date	Reg. No.	Kilom	eters V	Vip No.	Order N	o. / Remarks	
20	17	NSP151R	CEXRKT Q1	21/06/2017	SLP8723T		0	17764	75/DS/	SLP8723T	
	(Chassis No.	Engine No.	Terms	SA / Count	er	er Veh		In Collected On		
М	HFE	329F3002010352	2NRX148917	60	Ng Mei Ye	en	//	0.00	//	0.00	
L	Cd		Job/Parts Des	cription		_	Qty	Unit Price	Disc %	Amount	
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	0 1 2 3 4 5 6 7 8 9 0 1 2	T52161-16010 P K58307-0D250 F K64401-0D160 P K64461-0D130 V K64503-0D040 A K64503-0D040 A K64610-0D080 L K75442-0D250 P K90975-T2006 E K75444-0D460 P K81550-0D550 L K81560-0D550 L K81580-0D120 L K81580-0D190 L K81590-0D150 SPZ061-0D035 24	SEAL, RR BUMPER SIECE, RR BUMPER PANEL SUB-ASSY, EVANEL SUB-ASSY, LUCARM SUB-ASSY, LUCARM SUB-ASSY, LUCARM SUB-ASSY, LUCATE, LUGGAGE COMBLEM, SYMBOL PLATE, LUGGAGE COMP ASSY, RR COMAMP ASSY, RR COMAMP ASSY, RR, RH AMP ASSY, RR, LH BACK SENSOR GRI	BODY JUGG JUGGAG G CO GE C OMPT OMPT MBIN MBIN E			1.00 10.00 1.00 1.00 1.00 1.00 1.00 1.0	65.00 4.80 775.70 852.90 190.10 65.00 65.00 101.80 49.40 57.50 38.50 345.90 70.80 205.00 205.00 149.90		* 65.00 48.00 775.70 852.90 190.10 65.00 101.80 49.40 *** 345.90 345.90 7 70.80 *** 205.00 7 205.00 7 149.90	
or & on behalf of orneo Motors (Singapore) Pte Ltd Customer's Si		Signature	ure Charge Summary		Total 12,042		12,042.10				
			Please acknowledge	receipt of vehicle	Parts		4,672.10	GST 7.00	%	842.95	
					Labour Sublet Lubrication/Fluid		7,290.00 80.00 0.00	Less		0.00	
			_		Others		0.00	Amount D	ue	12,885.05	

SA1K229T0001 / Aspectus Consultancy Pte Ltd ENTRY DATE & TIME: 29/09/2022 10:58 (SGT) SUBMITTED BY: Weine Chieng VERSION: 1 (29/09/2022 10:58 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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.

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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

29/09/2022 10:58 (SGT) Driver 29/09/2022 08:10 (SGT) TPE, Singapore SLIP ROAD Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLP8723T

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address**

Mobile Phone No Alternative Phone No

GRAB RENTALS PTE LTD

2XXXXX200G

gr.sg.accident@grab.com (Phone) +65-81009206 (Office) +65-66550005

VEHICLE PARTICULARS

Manufacturer

Model 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? Vehicle Category Transmission CC

Private hire

Toyota

Vios

No - Claiming third party

Private hire Auto 1497

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

MSIG Insurance (Singapore) Pte. Ltd. 400001149

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

WOO KUAN CHOON SXXXX815A 28/09/1961 Outdoor

Date Of Driving Pass

Driving experience

Gender

Mobile Number Alt. Phone Number

Email 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Weather Conditions Road Surface

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 name Translator's ID

Translator's phone number

Translator's email

Original language used in the statement

PASSENGER 1

Name Gender

Geridei

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

ON THE 29/09/2022 AT ABOUT 0810 HOURS, I WAS DRIVING VEHICLE A (SLP8723T) ON LANE 1 ALONG A SLIP ROAD TOWARDS TPE (SENGKANG DIRECTION) IN STANDSTILL TRAFFIC WHILE IN STATIONARY POSITION BEHIND A LONG QUEUE OF CARS WHEN SUDDENLY VEHICLE B (SLH7000U) REAR ENDED ME. I GOT DOWN AND REALISED THAT THERE IS ANOTHER VEHICLE C (YQ3662J) BEHIND WHO HAD REAR ENDED VEHICLE B AS WELL. NOBODY IS INJURED.

26/07/1979

Male

824306

Chain Collision

Raining

Wet

No

No

Yes

2

No

UNKNOWN

Female

No

No

3

No

No

Hirer

43 YEARS AND 2 MONTHS

(Phone) +65-81009206

gr.sg.accident@grab.com

BLK 306D PUNGGOL DRIVE #06-907

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

SLH7000U

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

Mercedes

Private car

WILLIAM

(Phone) +65-82985578

2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

YQ3662J

Mitsubishi

Fuso

Commercial vehicle

(Phone) +65-98677988

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 <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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)

Lunderstand, acknowledge, agree and consent that

- (a) Myinsurer , 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' law yers/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' 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), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Sketch Plan

Driver's Signature (If driver is not the policyholder) / Date 8 Time

Date Witnessed by Reporting Centre
Personnel



A - SLP8723T

B - SLH7000U

C - YQ3662J

Describe Circumstances of the Accident

ON THE 29/09/2022 AT ABOUT 0810 HOURS, I WAS DRIVING VEHICLE A (SLP8723T) ON LANE 1 ALONG A SLIP ROAD TOWARDS TPE (SENGKANG DIRECTION) IN STANDSTILL TRAFFIC WHILE IN STATIONARY POSITION BEHIND A LONG QUEUE OF CARS WHEN SUDDENLY VEHICLE B (SLH7000U) REAR ENDED ME. I GOT DOWN AND REALISED THAT THERE IS ANOTHER VEHICLE C (YQ3662J) BEHIND WHO HAD REAR ENDED VEHICLE B AS WELL. NOBODY IS INJURED.

Declaration

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

Policyholder's Signature / Date &

8 Time 29/09/22 (CIC)

Witnesses by Reporting Centre Personnel