

(08/11/13) wof

ASS. REC. BY: Carroll

REF:

CC4/ASM 22 009804/R p3

803H

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: 4Q 2249Bat Workshop m/s SYSTEMATIC AIR CONDITIONINGof 29, SEOKU wayInsured: ASM

Policy No. _____

Claims No. _____

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: 103K

IDAC Accident Rpt: _____ 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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Date / Time Action / Instruction

REPAIR LIMIT - 84KVeh No: 4Q 2249B Yr Regn: 2020/ MNLType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: HINO XZU 710R 14FT WDC C.C 4009Colour: WHITE A/C: Insured / Std / NI / NASp. Reading: 92357 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JHHUCV3H60K033397Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 7100R16R: 11 710BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 7 mm R/Bal. 7/7 mmL/Bal. 7 mm L/Bal. 7/7 mmD.O.A. 22/09/22 D.O.I. 04/10/22Survey held at SYSTEMATIC

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

REAR N/S

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

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

S + RS _____ SI

Photos

Others

TOTAL

Date/Time, File Return to?

2)

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

Report Format : _____

Lump Sum / I.B.I.: (\$ _____)

Systematic Airconditioning Pte Ltd

29 Senoko Way Singapore 758059

Tel : 64847188 Fax: 64841334

GST No. 199800703G

Contact: Sha (64847188)

Email : shah@systematicaircon.com

Rasul - 4p 90010068

04/10/22 @ 1400

8 days / P/P

Resurvey before paint

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:

Estimation**To: AXA Insurance Singapore Pte Ltd**

DATE:	28-Sep-22
D.O.A:	22-Sep-22
Your ref:	SHA7746K

OTC ASIA LOGISTIC - YQ2249B

No.	Description	Qty	Unit Price	Amount
1	Supply and replace one (1) length. sliding door track <i>bt</i> ✓	1	\$ 1,200.00	\$ 1,200.00
2	Supply and replace one (1) set. sliding door bearing <i>re</i> ✓	1	\$ 750.00	\$ 750.00
3	Supply and replace one (1) no. damaged composite panels <i>cr</i> ✓	1	\$ 1,870.00	\$ 1,870.00
4	Supply and replace 2ft Damaged Aluminium chequered plate skirting <i>bt</i> ✓	1	\$ 680.00	\$ 680.00
5	Supply and replace 2ft Damaged Aluminium flatsheet skirting <i>bt</i> ✓	1	\$ 550.00	\$ 550.00
6	1.7 TON ANTEO Tailgate c/w 1600 X 2500mm Aluminium Alloy Platform Inclusive of: - Joystick Control & Foot Control - PE endorsement and load testing - LTA Inspection - Roller Stopper <i>X</i>	1	\$ 12,300.00	\$ 12,300.00
7	Supply and replace one (1) no. Rear METAL BUMPER <i>bt</i> ✓	1	\$ 680.00	\$ 680.00
8	Supply and replace one (1) set BRACKET for metal bumper <i>bt</i> ✓	2	\$ 255.00	\$ 510.00
9	Supply and replace one (1) no. rear NUMBER PLATE <i>bt</i> ✓	1	\$ 55.00	\$ 55.00
10	To supply labour and material to PAINT BLACK the rear metal bumper and bracket	300		\$ 550.00
11	To supply labour and material to install rear metal bumper with bracket and rubber stopper (WELDING) To supply labour and material to install box pillars (WELDING)	600		\$ 2,800.00
12	Spray Painting 1K White on (side door & affected area)	400		\$ 800.00
13	Logo Writing on side door (Die Cut)	500		\$ 600.00
14	Supply Labour and Services – Aluminium box -Shift and levelling aluminium box	450		\$ 1,500.00
15	Supply Labour and Services - -To remove, refix and to renew affected parts	300		\$ 2,500.00

Sub Total \$ 27,345.00**7% gst \$ 1,914.15****Bal amount due \$ 29,259.15****Loss of Used 12 days x ~~\$380.00~~ 300**

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	23/09/2022 19:13 (SGT)
Reported by	Driver
Date of Accident	22/09/2022 09:53 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE TUNNEL / AYE HAVELOCK ROAD EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YQ2249B
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	OTC ASIA LOGISTICS PTE LTD
Company Reg No	2XXXXX803H
Email Address	NIGEL@OTCASIA.COM.SG
Mobile Phone No	(Phone) +65-85001095
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hino
Model	XZU710R 14FT WIDE CAB 5T
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?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	4009

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5121251666-01

DRIVER

Name of Driver	MOK YI JIAN DARREN
NRIC No	SXXXX168H
Date Of Birth	24/05/1997
Occupation	Indoor

Date Of Driving Pass 28/07/2022
Driving experience 2 MONTHS
Gender Male
Mobile Number (Phone) +65-96955250
Alt. Phone Number -
Email Address MYJDARREN@GMAIL.COM
Address BLK 417A FERNVALE LINK #19-178
Address complement -
Postcode 791417
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 - Head to Rear
Weather Conditions Raining
Road Surface Wet

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) 2
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 TAN XUE BOON
Gender Male

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

PLS REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? Yes
Reasons for not uploading a video of the accident CLIENT NO GIVE VIDEO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHA7746K
Vehicle Manufacturer -
Vehicle Model -


Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Taxi
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

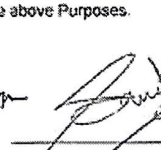
SKETCH PLAN

IMPORTANT NOTICE

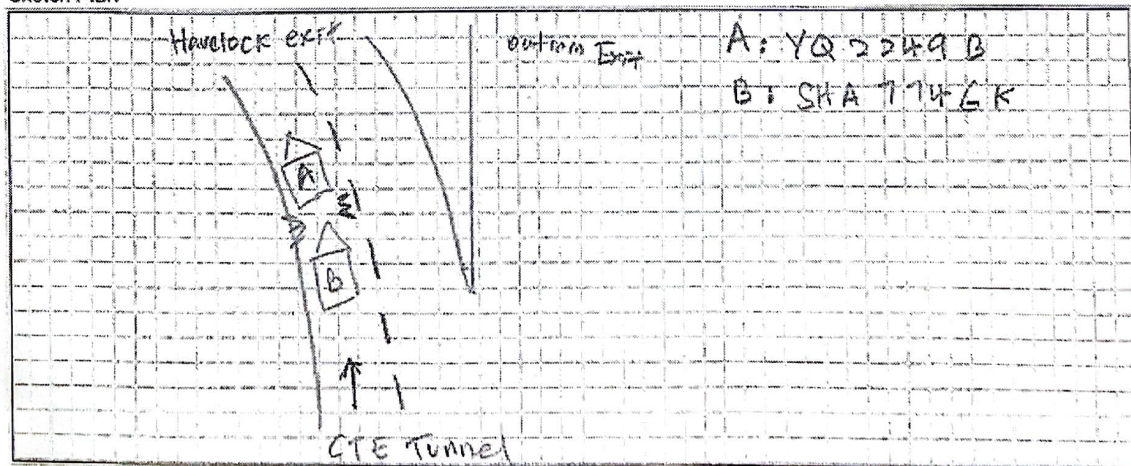
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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the 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


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


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

Sketch Plan



vJun2022

Describe Circumstance of the Accident

I was on Havelock exit tunnel during morning around 0950hr.
 And the road is — heavily congested — and slow moving. As I was
 about to stop the vehicle the vehicle B ram on my back of the
 left on the floor
 car. ~~the~~ and my side door drop due to the impact.

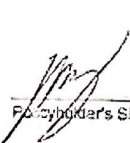
After accident my rear power gate not working.

There were 2 person in vehicle B including driver


TP CLAIM. other workshop (Systematic). Vls
 email to them.

Declaration


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

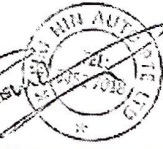

 Policyholder's Signature / Date & Time




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

22/01/2022
 2.35 pm


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



KHONG YEE TENG

vJun2022

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	803H
Vehicle No.:	YQ2249B
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Oct 2022
Vehicle Make:	HINO
Vehicle Model:	XZU710R 14FT WIDE CAB 5T
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	N04CVV11100
Chassis No.:	JHHUCV3H60K033397
Maximum Power Output:	-
Open Market Value:	\$34,541.00
Original Registration Date:	16 Mar 2020
First Registration Date:	16 Mar 2020
Transfer Count:	0
Actual ARF Paid:	\$1,728.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	15 Mar 2030
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$25,001.00
COE Rebate Amount:	\$18,609.00
Total Rebate Amount:	\$18,609.00

The information contained herein is correct as at 05 Oct 2022

OK

Hino XZU710R

Overview

Financial

Accessories

Similar

Research

Photos

Map

NETLINK

Your Commercial Specialist

Specialized in New & Used Commercial Vehicles. Insurance. Hire Purchase. Scrap/Export

Price	\$103,800	Lifespan	22-Mar-2042
Depreciation	\$10,960 /yr View models with similar depre	Reg Date	23-Mar-2022 (9yrs 5mths 17days COE left)
Mileage	N.A.	Manufactured	2021
Road Tax	N.A.	Transmission	Manual
Dereg Value	\$25,648 as of today (change)	Fuel Type	Diesel
COE	\$27,088	OMV	\$32,670
Engine Cap	4,009 cc	ARF	\$1,634
Curb Weight	2,500 kg	No. of Owners	1