

ASS. REC. BY:

REF:

MSG / 22010923 / kv

C

Kenneth

## 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: SLV 3948M

Policy No. 30001962166

Claims No. 289020

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:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SM146787

Yr Regn:

11, 16

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

Truck / Trailer or

Make:

M. E200

c.c

1991

Colour

M. Grey

A/C: Insured / Std / NI / NA

Sp. Reading

78097

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WDP 2130 422A 078 932

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD / RIM or

Tyre Size:

F:

245/45R18

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

6

mm

L/Bal.

5

mm

L/Bal.

6

mm

D.O.A.

28/10/22

D.O.A.

21/12/2022

Survey held at

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

O/S / N/S

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

Date / Time

Action / Instruction

19/6/23 Typist @ 6000k Cash (red 2624.10, 30%)

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 19/6/23-typist

Days Of Repair: 4

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

S - RS - SI

: Parking

: Others

TOTAL

Report Format: Merimen

Lump Sum / t.B.t. (\$ 6000)

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	129W
<b>Vehicle Details</b>	
Vehicle No.:	SMH678Z
Vehicle to be Exported:	No
Intended Deregistration Date:	01 Nov 2022
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	E200 AVG (R18 LED)
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No.:	27492030779870
Chassis No.:	WDD2130422A078932
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$52,106.00
Original Registration Date:	21 Nov 2016
First Registration Date:	21 Nov 2016
Transfer Count:	1
Actual ARF Paid:	\$65,791.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Nov 2026
PARF Rebate Amount:	\$46,053.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	20 Nov 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$56,500.00
COE Rebate Amount:	\$22,898.00
<b>Total Rebate Amount:</b>	<b>\$68,951.00</b>

The information contained herein is correct as at 01 Nov 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	31/10/2022 22:20 (SGT)
Reported by	Driver
Date of Accident	28/10/2022 19:38 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	YISHUN AVE 9
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH678Z
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	RISHENG CONSTRUCTION & TRADE PTE LTD
Company Reg No	2XXXXX129W
Email Address	rishengconstn@gmail.com
Mobile Phone No	(Phone) +65-91915980
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E200
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1991

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNA00119032201

### DRIVER

Name of Driver	XU CHUANBO
NRIC No	SXXXX142Z
Date Of Birth	16/12/1977
Occupation	Indoor

Date Of Driving Pass .....	30/07/2007
Driving experience .....	15 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91915980
Alt. Phone Number .....	-
Email Address .....	xuchuanbo@gmail.com
Address .....	BLK 342A YISHUN RING RD #09-1906
Address complement .....	-
Postcode .....	761342
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	OWNER
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 .....	Side Swipe
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 STATEMENT

#### 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 .....	SLV3948M
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private hire
Name of Driver .....	-
Contact Number .....	-



VEH NO: SMH 6782  
INSURER: China  
DATE OF ACC: 28/10/22 @ 1938

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 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 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.



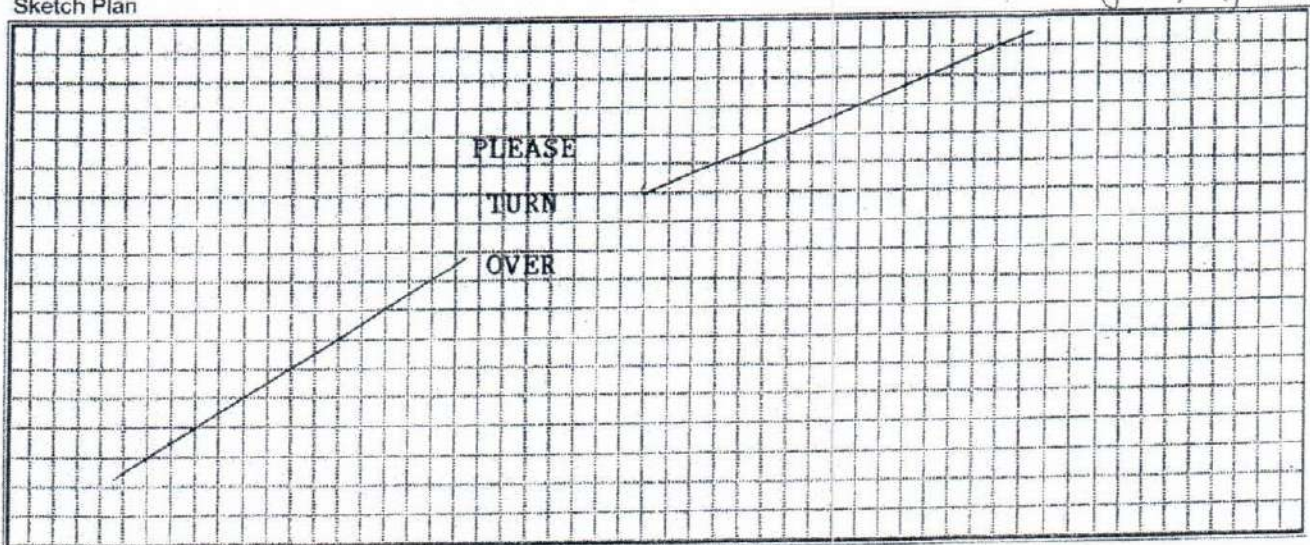
Policyholder's Signature / Date & Time

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

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

3/11/22  
Dorlyn (Ann)

Sketch Plan





Describe Circumstance of the Accident

\*\* NOTE : PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE

Claim under your Own Comprehensive policy. Pls check your policy for more information.

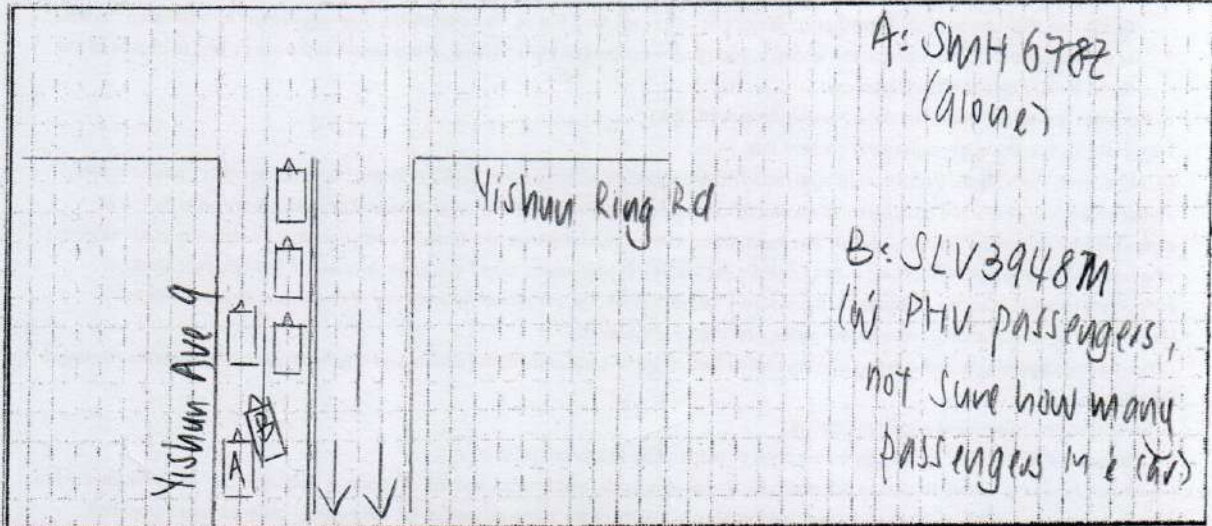
( ) Claim Own Policy

( ☒ ) Claim Third party

( ) Reporting Only

( ) Claim OD/ TP at other workshop ( \_\_\_\_\_ )

Sketch Plan



Vehicle No: SMH 6782 (China)

Date & Time: 28/10/22 @ 1938

(legally)

I follow front vehicles to move forward, m/cav SLV3948M steered into my lane without checking and collided onto my vehicle front RH portion. No one was injured.

Declaration

I declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

*[Signature]*

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

*[Signature]*

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



# Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761  
 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg  
 GST:201001158E RCB NO:201001153E

M/S : MSIG INSURANCE (S) PTE LTD (SGX)

16 RAFFLES QUAY

#24-01 HONG LEONG BUILDING

SINGAPORE 048581

TEL: 68277660

FAX: 62257402

ATTN: Motor Claim Department

WS Ref: TP/MSIG/AMK

Claim Type: Third Party

Accident Date: 28/10/2022

TP Veh Reg No: SLV3948M

Estimate No: ES2291330/AMK

Date: 20 Dec 2022

Policy No: DMPCSA00119032201

Veh Reg No: SMH678Z

Make/Model: MERCEDES BENZ E200

Chassis No: WDD2130422A078932

Engine No: 27492030779870

Reg. Date: 21/11/2016

## Estimate Repair Cost to Vehicle No :SMH678Z

Description	U/Price	Quantity	List Price	Amount
			SS	SS
<b>List Price</b>				
1 FRONT BUMPER <i>1975</i>	1,975.00	1 PC	<i>Bu</i> 1,975.00	<i>✓</i>
2 FRONT BUMPER RH SIDE RETAINER	24.00	1 PC	<i>DI</i> 24.00	<i>✓</i>
3 HEADLAMP RH <i>3870</i>	3,870.00	1 PC	<i>GA</i> 3,870.00	<i>✓</i>
4 FRONT RH FENDER	1,180.00	1 PC	<i>AG</i> 1,180.00	<i>✓</i>
5 FRONT RH FENDER INNER SHIELD CLIP	10.00	6 PC	<i>MA</i> 60.00	<i>✓</i>
6 FRONT RH RIM 18"	<i>6-X</i> 740.00	1 PC	<i>500</i> 740.00	<i>1505M</i>
			7,849.00	
		Less 10%	784.90	7,064.10
<b>Labour</b>				
7 REMOVE & REFIX FRT BUMPER & ATTACHMENTS,GRILLE,HEADLAMP,FRT RH FENDER;KNOCKING & REPAIR FRT RH FENDER INNER PANEL & REALIGN THE SAME	700.00	1 LA	700.00	<i>4501</i>
8 PUTTY & RESPRAY FRT BUMPER & PARKING SENSORS,FRT RH FENDER & INNER PANEL & ALL AFFECTED AREAS	700.00	1 LA	700.00	<i>4501</i>
9 REMOVE & REFIX FRT RH RIM,TYRE,BALANCE & REALIGN THE SAME	50.00	1 LA	50.00	<i>201</i>
10 TO CONDUCT COMPUTERIZED WHEEL ALIGNMENT	80.00	1 PC	80.00	<i>601</i>
11 RUSTPROOFING	30.00	1 LA	30.00	<i>✓</i>
			1,560.00	1,560.00
			Total	SS 8,624.10
			Add GST @ 7%	603.69
			Total Amount Payable	SS 9,227.79

\* SURVEY VEHICLE AT ANG MO KIO WORKSHOP

**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 surveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

For Cheng Hoe Motor Pte Ltd

*[Signature]*

AUTHORISED SIGNATURE