668	
REGEY TOUTH REF. CS CT	220/0954/TVP3
3, 122	2201075411795
	ASSIGNMENT
pm: Date:	Veh No: SMS1009R. Yr Regn: 2020 / Feb.
alimated lost	Type: M.Oycle / Bus / Van / Lorry / Taxi / Prime Mover /
D TO VS /TP RES OD RES EVA / INV / MV	Truck / Trailer or
o Iraspecivetide No:	Make: toyota Havrier CD 1998
Workship Till	Colour Black - AC: Insured / Stil / NE / NA
	Sp.Reading 30 785 T/Radio: insured / Std / NI / NA
PC 5836S	Eng/No:
oficy No. DMB1SNW00010102200	CIND: STE Z 839 410 J 00 5 454
SNM22D207838/C02/TANKL	Gen. Cont. 9503 / Feir / Poor / Burni
um Insued: Excess:	Sizering: Inofder / Jemmed / Lesked / Burnt or
(Client's Recov)	Brake: Inortion / Jammed / Leakers / Burns or
Take of Vehi	Modi: Will / Can / STD AIRlin or
N. C.	Tyre Size: F: 235/55R/8
(Policy Condition)	R: Un.
Remark: The vet had commenced its N/S	O/S (-ES) DUN / EXNOVA / GY FFE / LIZA / MIC. / CHTEU / PIR / SUM! /
repairst the time of inspection.	TOYO I YOKO DE
Bal, or Market Value: \$150K.	Froni Rear
DALC Academi Report: Consistent? : Yes or No	R/Bal. 6 mm R/Bal 6 mm
Consisten 2 : Yes C. No	L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 31/10/2022 D.O.L (8/11/22
Lurn Sum: % 3 Val.: Yes of No	Survey held at Boweo Wh
CA, / REV / REP. / 24 HRS WP	Des. of Damages: Frt / Rear / Q/S / N/S / W/C / Rooftop of
Date: Person Contacted: Vahicle:	Marie Control of the
Date / Tima Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
31/3/23 Final fig \$9946.27 (red 9404, 4	18%)
	1
DeleTime, File Pass 40? Proli Report	
Ton Report	Days Of Repair: 6
1) : Final Report Destelline, File Return to?	Resurvey No. of Trip: Survey Fee:
21/2/22 typict	raid Fee: Site Insp. (3
	128 Feet Steinsp (8
Merimen	Comments of the comments of th
\$9946.27	Emma consul. Grant and a series of the seri





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

17 UBI ROAD 4 SINGAPORE 408611, Tel no.: 6631 1188

ESTIMATE

		Account Deta	ils	Account No.			Customer	Details	
Ans 16-0	on f	iping Insurance (S) Pte Ltd Road pringleaf Tower		S1000003 Document N 0		Mr Lee Yik He 48 Lorong 32 #07-09 Singapore 39	Geylang		
		re 079909 for Claims Dept		Document D 17/11/202		Mobile: 9722	7917		
Yea	ar	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order N	o. / Remarks
201	19	ASU60R	ANTMT E1	11/02/2020	SMS1009R	0	22134	67/DS/	SMS1009R
	(Chassis No.	Engine No.	Terms	SA / Counter		Vehicle In	C	ollected On
JT	EZ	B3GH10J005454	8ARZ185309	60	Sam San Joi	//-	0.00	//	0.00
L	Cd	i	Job/Parts Des	cription		Q	ty Unit Price	Disc %	Amount
1 2 3 4 5 6 7 8 9 10	S B B Z B S S B	DRIVE IN:31/10/2022 DATE-IN: DAT NO OF REPAIR DAYS BY: AUTHOR PSP PER PANE LABC PER PANEL APPLICA BP-LAB2 CHECK L BP-LAB2 TRANSFE R BP-SLANT SUPPLY BP-LAB2 REMOVE MMING ASSY TO AS BP-SUBLET REPLA NCING BP-SUBLET REPLA RBP-MECH2 CONDU	ACC DATE:31/10 TE SURVEY: S: RISED ON: DUR FOR PLATINI ATION LIGHTING & WIRIT ER & INSTALL CO	UM SHINEPRO & NG SYSTEM OMPONENTS TO T)-RH REAR DOO TNISH,CARPET AND CONDUCT A SPENSION SYST ALIGNMENT	SHINE NEW DOO OR AND TRI WHEEL BALA				274.7 122.4 360.0 100 × 360.0 72.0 180.0 180.0
		n behalf of o Motors (Singapore) Pte	Ltd	r's Signature	Charge S Parts Labour Sublet Lubrication/Fluid Others	ummary	Total	: Due	gi



TOYOTA

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

17 UBI ROAD 4

SINGAPORE 408611, Tel no.: 6631 1188

ESTIMATE

				LOTI	IIVIAIE					
		Account 0	Details	Account No.				mer Deta	ils	
4nsc 6-00	on Ro	oringleaf Tower	Ltd	\$1000003 Document N		Mr Lee Yik H 48 Lorong 32 #07-09 Singapore 3	2 Geylang			
igap n: N	ore lotor	e 079909 or Claims Dept		Document D 17/11/202		Mobile: 9722	27917			
/ea	ir	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Or	der No	o. / Remarks
201	9	ASU60R	ANTMT E1	11/02/2020	SMS1009R	0	22134	67	/DS/S	SMS1009R
		Chassis No.	Engine No.	Terms	SA / Counter		Vehicle In		Co	ollected On
JT	EZE	B3GH10J005454	8ARZ185309	60	Sam San Joi	oi//	<i>I</i>	0.00	//	- VV
	Cd		Job/Parts Des	scription		0	Qty Unit P	rice D	isc %	Amoun
11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	B 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 5	STRAIGHTEN & A BP-RES2 RESI AREAS T67003-48170 T75987-48060 T75951-48020 T75951-48020 T75953-48020 T67871-48070 T61601-48030 T75741-48080 T75850-48030 T52159-48933 T52169-48100	LACE RH REAR ACCI ALIGN RH REAR ACCI PRAY JOB ON RH RE PANEL SUB-ASSY, I STRIPE, RR DOOR, STRIPE, RR DOOR, TAPE, BLACK OUT TAPE, BLACK OUT WEATHERSTRIP, R PANEL SUB-ASSY, MOULDING, RR DO MOULDING, RR DO MOULDING ASSY, I COVER, RR BUMPE COVER, RR BUMPE PIECE, RR BUMPE WHEEL, DISC ABSORBER, SHOC ARM ASSY, RR	RR	ED AREAS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.00	30.90 47.40 26.40 26.40 31.80 18.50 81.60 31.10 42.50 34.20 04.00 66.00 4.50 78.60 315.70		1680.9 1680.9 1680.9 1680.9 1680.9 1680.9 1680.9 1680.9 1680.9 18.1 18.1 18.1 18.1 18.1 142. 1531. 142. 142. 143. 144. 145. 146. 146. 147. 147. 149.
-3555000		n behalf of o Motors (Singapore	e) Pte Ltd	ner's Signature		Summary	Le		ue	



Borneo Motors

TOYOTA

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

17 UBI ROAD 4

SINGAPORE 408611, Tel no.: 6631 1188

ESTIMATE

					ESIII	IVIAIL					
		Account I	Details		Account No.			С	Customer D	Details	
Anson 6-00	n Roa	ringleaf Tower	Ltd		S1000003 Document No		Mr Lee Yik H 48 Lorong 33 #07-09 Singapore 3	32 Geylan	ıg		
		079909 Claims Dept			Document Da 17/11/2022		Mobile: 9722				
Year	<u> </u>	Model	Varia	ant	Reg. Date	Reg. No.	Kilometers	Wip	No.	Order N	No. / Remarks
2019	3	ASU60R	ANTMT	T E1	11/02/2020	SMS1009R	0	221	134	67/DS/	/SMS1009R
		hassis No.	Enç	gine No.	Terms	SA / Counter		Vehic	ile In	C	Collected On
JTE		3GH10J005454	8AR	Z185309	60	Sam San Joi	/	-/	0.00	//-	0.00
(50.3×4.0×	Cd	A TO THE PROPERTY OF THE PARTY	Jo	b/Parts Descr	ription		(Qty Un	nit Price	Disc %	6 Amoun
30 31 32 33	8 T 9 T 0 T	T48760-48110 T42304-42020 T48770-42040 T48730-42050 T42450-42040 U90269-04051 Taylin 9 Fayfilm	CARRIER ARM ASS' ARM ASS' HUB & BR RIVET	SY, RR RG ASSY, RF	, RR R		1 1	1.00 1.00 1.00 1.00 1.00 4.00	574.10 503.40 381.30 524.40 1090.40 1.70		\$ 574.1 \$ 503.4 \$ 381.3 \$ 524.4 \$ 1090.4 \$ 6.8 3.4
		behalf of Motors (Singapore			r's Signature		Summary	2 2 376	Total	00%	19,350
			Pie	ease acknowleds	Je Leceibt of Active 2	Parts Labour Sublet	6,	2,111.10 5,532.40 706.77 0.00	Less	10,12	C
			71			Lubrication/Fluid	V.	0.00			

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 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.

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

31/10/2022 12:25 (SGT) Date of Submission Both Reported by 31/10/2022 07:30 (SGT) Date of Accident Singapore ALONG SERVICE ROAD OF 3 BEDOK RESERVIOR VIEW Exact Location of Accident Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

SMS1009R Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? LEE YIK HUN Name Of Registered Owner S8089096F NRIC No YIKHUN@YAHOO.COM **Email Address** (Phone) +65-97227917 Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

Toyota Manufacturer Harrier Model M GRADE Variant Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Private car Vehicle Category Auto Transmission 1998

INSURANCE COMPANY

Direct Asia Insurance (Singapore) Pte Ltd Name of Insurance Company MT/00890490/01 Policy Number / Cover Note Number

DRIVER

LEE YIK HUN Name of Driver S8089096F NRIC No 04/02/1980 Date Of Birth Indoor Occupation

Date Of Driving Pass 14 YEARS AND 7 MONTHS Driving experience Male Gender (Phone) +65-97227917 Mobile Number Alt. Phone Number YIKHUN@YAHOO.COM Email Address 3 BEDOK RESERVOIR VIEW #11-03 Address Address complement 478927 Postcode Yes Is the driver the policyholder? If No, Relationship of the Driver with the Insured 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 Collision - Cross Junction Type of Accident Clear Weather Conditions Dry Road Surface 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? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes 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 DETAILS OF POLICE ACTION Yes Was the accident reported to the police? Traffic Police Police Station Name (Phone) +65-65470000 Police Station Phone No (Fax) +65-65474900 Alt. Police Station Phone No 10 Ubi Avenue 3 Singapore 408865 Police Station Address Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE POLICE REPORT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? DETAILS OF OTHER VEHICLE PROPERTY 1 PC5836S Vehicle Registration Number Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Verilloid Goldan	Commercial vehicle
Vehicle Category	
Name of Driver	3 = 3
Contact Number	1340
Address	7 ≥
Address complement	F4
Postcode	-
Insurance Company Name	-
Nature Of Damage	=
Details of property damaged in accident	20 高
No. Of Passenger (Including Driver)	

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 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
- 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
- 7. By the lodgment 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

31/10/22

9.42 am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

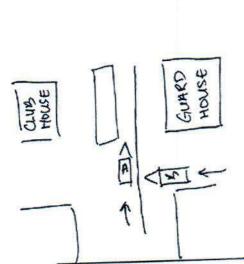
Accident Toolkit

Sketch plan

Sketch of accident scene:

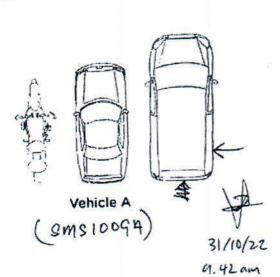
Please illustrate the layout of roads with arrows showing the direction and position of vehicles at the time of impact. Also please note the road names, road signs and vehicle registration numbers.

If safe, please take photos or videos from all angles.

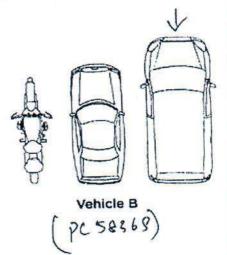


At 730 am twis morning (31/10/22), I was exiting Aquarius By the Park Cordo (Bedok Reservoir Van and I was not by a Van (P(58365) at the rear driver side door. Attached are the photos and rideos of the accident.

Please indicate on vehicle A (your vehicle) and, vehicle B(third party vehicle), the point of impact and area(s) of visible damage with an arrow.



direct asla • Insurance



Call us direct
Customer Care
6665 5555
Ctelms Support 24/7 Hotiline
6532 1818





1 of 3

Report No. T/20221031/7005

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

DEPORT OF A TRAFFIC ACCIDENT	DEBORT OF	A TRAFFIC	ACCIDENT
------------------------------	-----------	-----------	----------

Date/Time 31/10/202	e Report M 22 08:38	ade:	Vide Report No.:	Station Diary No.		
Informan	t's Particu	lars	Section 1997 Annual Section 1997			
	Informant:		Address: 3 BEDOK RESERVOIR VIEV	V #11-03 SINGAPORE 478927		
ID Type /	ID No.:	96F	Contact No.: Home/Office:	Mobile: 97227917		
NRIC NO / S8089096F Nationality: MALAYSIAN			Email: YIKHUN@YAHOO.COM			
Sex:	Age:	Date of Birth: 04/02/1980	Type of Informant:			
Race: Chinese	Race:		Language: English	Institution / School Name:		
Occupati	ion:		Driving Licence Information: Class: 3	Date of Expiry:		

eneral Inform	mation of the Accide	Drink	Date/Time of	Type of Loc	ation
Type of Accident:	Non-Injury Others	Drive: No	Accident: 31/10/2022 07:30	Car Park	
Location: BEDOK RES	ERVOIR VIEW				
THE RESIDENCE OF THE PARTY OF T		Road Surface:		Road Speed Lim	it:
Weather: Cloudy Traffic Flow: Two Way		Road Surface: Dry Traffic Control: Not Controlled		The second secon	it:

Details of V		Make	Model	Color	Conditio	No of
Vehicle No.	Туре			Black	Slightly	1
PC 5836S	Van	TOYOTA	HIACE Super GL	Diack	Damaged	
			WARRIED M	Disek	Slightly	1
SMS1009R	Car	TOYOTA	HARRIER M GRADE	Black	Damaged	



2 of 3

Report No. T/20221031/7005

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

CONTINUATION OF REPORT

The state of the s	urance		Effective	Expiry Date
Vehicle No. Insurance	e Company	Insurance No	A 1 100 A	
Vehicle No. Insulance	ASIA INSURANCE	MT/00890490/01	10/02/2021	11/02/2023

Details of Person	Involved					
Any Pedestrian In	volved: No		Use of Per	destrian Cros	sing: NA	
No. of Pedestrian	s Injured: NIL	B. WANES L.	Use of the	geoman e.		
Driver				ID No.	S1443575A	
Name	TAY KIM HUANG			ID IVO.		
Related Vehicle	PC 5836S (Van)			Contact No.	NIL	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: 3 Date of Expir	y: NIL
Date	NIL		Date	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree o	f NIL		
Driver				ID No.	S8089096F	LIBX#XWest
Name	LEE YIK HUN			ID Ito.		
Related Vehicle	SMS1009R (Car)			Contact No	97227917	
Hospital/Clinic	NIL	9		Class of Driving Licence & Expiry	Class: 3 Date of Expir	ry: NIL
Date	NIL		Date	NIL		
No. of Days gran	nted Medical Leave	NIL	Degree	of NIL		

Brief Details.

I was exiting the Aquarius By The Park (Condominium complex on 1 Bedok Reservoir View) when I was hit by a Van (PC 5836S) on the drivers side rear door. The accident occurred next to the Security Booth and my vehicle was damaged as a result of the collision.

I have pictures of the accident and the van driver has admitted fault. I also have eyewitness at the security booth that saw the accident.