

A.E.S. REC-3Y: T. J. M.

REF:

CS/LPC 22011 633/Ty3

## ASSIGNMENT

CoE 2032 Apr. 1

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / VS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

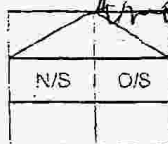
Sum Insured: \_\_\_\_\_

Excess: 769

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection.Bal. or Market Value: \$125K

IDAC Accident Report \_\_\_\_\_

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

Date: \_\_\_\_\_

Person Contacted: Ms Henry

Vehicle: IN / OUT

Veh No: YN3/48TYr Regn: 2012 May

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

Truck / Trailer or \_\_\_\_\_

Make: Mitsubishi FM65C.O. 7545Colour: white

A/C: Insured / Std / NI / NA

Sp. Reading: 401825

T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: FM65 FMA 00205Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim orTyre Size: F: 295/80R22.5R: (D)

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

TOYO / YOKO or Big Harvest

Front

Rear

R/Bal. 6 mmR/Bal. 6/6 mmL/Bal. 6 mmL/Bal. 6/6 mm

D.O.A. \_\_\_\_\_

D.O.I. 18/11/22Survey held at Wilson MayDes. of Damages: Fr. / Rear / O/S / N/S / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

Date/Time Action/Instruction

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: \_\_\_\_\_

1) Date/Time, File Return to?

☐ : Final Report

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

2) \_\_\_\_\_

Transportation: \_\_\_\_\_

Add Fee: ☐

: Site Insp (\$ \_\_\_\_\_)

S + RS. \$ \_\_\_\_\_

☐

: Interview (\$ \_\_\_\_\_)

Photos \_\_\_\_\_

☐

: Tech. Invs (\$ \_\_\_\_\_)

Others \_\_\_\_\_

☐

: Weekend (\$ \_\_\_\_\_)

Repair Form: \_\_\_\_\_

Lum Sum / L.B. a/c \_\_\_\_\_

# Woon Meng Motor Pte Ltd

Office : 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578

Workshop: 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578

Tel: 6316 1131 HP: 9730 2017 Fax: 6316 7050

42, Sungei Kadut Ave, Singapore 729666 Tel : 63268523

( Email Adress : woonmeng @singnet.com.sg )

Co Reg No. 200603678M

GST Reg No. 20-0603678M

## Estimate

## OD CLAIM

To : Lonpac Insurance Bhd  
Motor Claims Dept

Date : 18 Nov 2022

Dear Sirs :

Fax : 6896 8706

**RE : ESTIMATE COST FOR MITSUBIAHI FM65F - YN3148T**  
**ALONG BUKIT BATOK ROAD (LAMO POST 87 ON 04/11/2022)**

<u>ITEMS</u>	<u>DESCRIPTION</u>	<u>QTY</u>	<u>PRICE</u>
1	Front bumper	1pc	\$ 950.00 <i>bf</i>
2	Front side bumper @\$300ea	2pcs	\$ <del>LHR</del> 600.00 <i>RH-bf</i>
3	Front bumper lower	1pc	\$ 450.00 <i>x</i>
4	Front headlamp @\$780ea	2pcs	\$ <del>LH</del> 1,560.00 <i>RH-cna</i>
5	Front center grille	1pc	\$ 790.00 <i>cna</i>
6	Emblem	1pc	\$ 280.00 <i>no</i>
7	Front panel	1pc	\$ 2,300.00 <i>cna</i>
8	Fuso	1pc	\$ 230.00 <i>nei</i>
9	Front corner panel rh	1pc	\$ 1,050.00 <i>dis</i>
10	Front corner panel lamp rh	1pc	\$ 250.00 <i>cna</i>
11	Front windscreen glass	1pc	\$ 1,650.00 <i>cna</i>
12	Front windscreen rubber	1pc	\$ 350.00 <i>nei</i>
13	Front door rh	1pc	\$ 4,999.00 <i>XR</i>
14	Front door lock/ actuator rh	1pc	\$ 850.00 <i>XR</i>
15	Front door hinge @\$360earh	2pcs	\$ 720.00 <i>Rp</i>
16	Front step panel rh	1pc	\$ 220.00 <i>cna</i>
17	Front wheel mudguard rh	1pc	\$ 250.00 <i>x</i>
			\$ 17,499.00
Add 15%			\$ 2,624.85
<b>Sum Carried Forward</b>			<b>\$ 20,123.85</b>

**Sum Carried Forward****\$ 20,123.85**

- 18 Front ERP bracket  
19 Front number plate

1pc \$ 15.00 *ag*  
1pc \$ 25.00 *bf*

**Labour Charge & Misc**

To remove, repair, replace & install front  
damaged parts.

} \$ 1,200.00 *900*  
}

To R & R front windscreen glass

\$ 150.00 ✓

To remove & install door mechanism &  
check for function

} \$ 180.00 ✕  
}

To company logo "Teng Leng Industries"

\$ 250.00 *180*

To R & R wiring

\$ 60.00 *30*

To putty & spray painting.

\$ 1,500.00 *1000*

**Total****\$ 23,503.85**

All prices quoted are subjected to 7% GST.

This is a computer generated document. No signature is required.

*Tanphun 97495749*  
*Not Authorised 18/11/22 @ 350 pm*  
*Ex: fb9*  
*L/S Resurvey after repair*  
*tanphun@lkh.com.hk*  
*27 days*

**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 items must be resurveyed and  
is subject to final approval from Insurance Company

Acknowledged by Repairer  
Signature  
Date:



## 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	05/11/2022 09:27 (SGT)
Reported by	Driver
Date of Accident	04/11/2022 13:30 (SGT)
Exact Location of Accident	Bukit Batok, Singapore
Additional Location Information	Bukit Batok Road (Lamp-post 87)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN3148T
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Teng Leng Industries Pte Ltd
Company Reg No	2XXXXX939C
Email Address	tenglengindustries@gmail.com
Mobile Phone No	(Phone) +65-91736375
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Fm65fm1rdea
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?	Yes
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	7545

#### INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z22VC05011932

#### DRIVER

Name of Driver	Stalin Chakrapani
Passport No/FIN	GXXXX081X
Date Of Birth	05/03/1971
Occupation	Outdoor



Date Of Driving Pass	16/11/2012
Driving experience	10 YEARS
Gender	Male
Mobile Number	(Phone) +65-98648942
Alt. Phone Number	-
Email Address	tenglengindustries@gmail.com
Address	Blk 187, Boon Lay Ave, #21-80
Address complement	-
Postcode	640187
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	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 attached 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	with driver.

#### DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	GBK9438E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Mohammad Shariff Bin Abdullah

NRIC No	SXXXX255B
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Describe Circumstance of the Accident

On 04/11/22, @ 13:30 hrs, I was travelling along Bukit Batok Road, and moved to the second lane, which was the lane I was travelling in. a bus suddenly came out of the bus-stop, and vehicle in front, 4BK 9438E suddenly braked. I also braked, but could not stop in time and hit into the vehicle in front. There was road blockage on the lane 3.

1. Was this statement translated from another language?

( ) Yes ( ☒ ) No

\*\* If Yes, please assist to provide the original statement and the details of the translator below:-

\*\* NOTE: Translated statement is to be signed off by the Translator

2. What is the original language used in the statement?

( ) English ( ) Mandarin ( ) Malay ( ) Tamil ( ) Others: \_\_\_\_\_

**2. Translator Information (all information required to be provided)**

Name of Translator: \_\_\_\_\_

Translator ID: \_\_\_\_\_

Translator Mobile No.: \_\_\_\_\_

Translator Email: \_\_\_\_\_

**Declaration**

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



Policyholder's Signature / Date & Time

*[Signature]* 4/11/22

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

*[Signature]*

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

## 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:

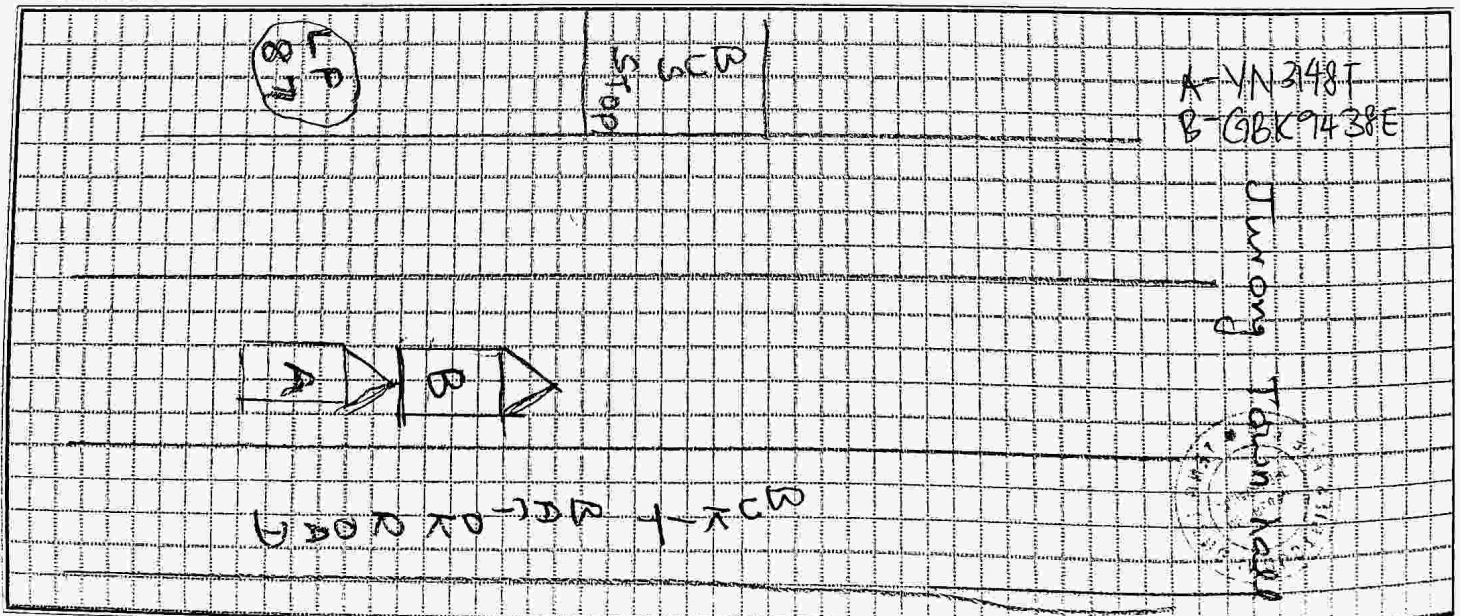
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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)

#### Sketch Plan



Please note that you might be able to submit an Own Damage Claim under your own policy within 14 days. 1

( ) Claim Own Damage ( ) Claim Third Party ( ) Reporting Only ( ) Claim OD/TP at other workshop