

08/11/13 Wef

ASS. REC. BY: 22/11/13

REF:

CS/EH/22012016/Rqy3

255R

# ASSIGNMENT

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

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

☒ TP / ☐ WS / ☐ TP RES / ☐ OD RES / ☐ EVA / ☐ INV / ☐ MV

To inspect Vehicle No: XE 6697P

at Workshop n/s Woon menh

of BUKIT BAYU CRESCENT

Insured: EH1

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

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

Sum Insured: \_\_\_\_\_ Excess: 2500

(Client's Record)

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

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value: 186K

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lump Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / ☒ REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Date / Time Action / Instruction

REPAIR LIM IT - 147K

Veh No: XE 6697P Yr Regn: 2021 / Anh

Type: ☒ M. Car / ☐ M. Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Tadi / ☐ Prime Mover /

☒ Truck / ☐ Trailer or

Make: SCANIA P410A 4X2N2 CC 12742

Colour: MULTI A/C: ☒ Insured / ☐ Std / ☐ N/A

Sp. Reading 106880 T/Radio: ☒ Insured / ☐ Std / ☐ N/A

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

C/No: 452P4X20005626229

Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ Burnt

Steering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or

Brake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or

Modi: ☒ Air / ☐ SRim / ☐ STD Air / ☐ Rim or

Tyre Size: F: 315/80R22.5

R: \_\_\_\_\_

BS / ☒ DUN / ☐ EXNOVA / ☐ CY / ☐ FS / ☐ LIZA / ☐ MIC / ☐ OHTSU / ☐ PIR / ☐ SUMI /

TOYO / YOKO or

Front

R/Bal: 8 mm

L/Bal: 8 mm

D.O.A. 26/11/22

Survey held at Woon menh

Des. of Damages: ☒ Fnt / ☐ Rear / ☐ O/S / ☐ N/S / ☐ U/C / ☐ Rooftop or

PRT N/S

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

Date/Time, File Pass to?

☐ : Prefl. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

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

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

Survey Fee:

Transportation:

\$ + RS. \$

Photos:

Others

TOTAL

Report Format :

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

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)

☐ : Interview (\$ \_\_\_\_\_)

☐ : Tech. Invs (\$ \_\_\_\_\_)

☐ : Weekend (\$ \_\_\_\_\_)

**Woon Meng Motor Pte Ltd** (Co.Reg.No:200603678M)

50 Bukit Batok Street 23,, #01-06 Midview Building

Singapore 659578

Tel: 6316 1131 Fax: 6316 7050 Email: woonmeng@singnet.com.sg

**INSURER: ERGO Insurance Pte. Ltd. (HQ)****PARTICULARS OF CLAIM**

|                     |                               |                       |            |
|---------------------|-------------------------------|-----------------------|------------|
| Claim Type:         | OD (OWN DAMAGE)               | Ref. No:              |            |
| Policy No:          | DMCG22009586                  | Date of Loss:         | 26/11/2022 |
| Vehicle Reg. No.:   | <b>XE6697P</b>                | Driveable?            |            |
| Driver Age/Info:    | 25 / MALE                     | Party At Fault:       | UNKNOWN    |
| TP Injury Involved? | NO                            | Third Party Involved? | YES        |
| Insured/Claimant:   | CALL LADE ENTERPRISES PTE LTD |                       |            |
| Driver:             | CHINNATHAMBI MURUGESH         |                       |            |

|                 |                               |                    |                   |
|-----------------|-------------------------------|--------------------|-------------------|
| Make/Model:     | SCANIA P410A4X2NZ, 12.7 D (M) | Vehicle Reg. Date: | 30/08/2021        |
| Vehicle Colour: | WHITE/RED                     |                    |                   |
| Engine No:      | DC13163L017299364             | Chassis No:        | YS2P4X20005626229 |
| Odometer:       | 0 KM                          |                    |                   |

|                               |           |
|-------------------------------|-----------|
| Paint Type:                   |           |
| Total Loss?                   | <b>NO</b> |
| Est. Duration of Repair (day) | 25        |

|                   |                                       |
|-------------------|---------------------------------------|
| Present Location: | WOON MENG MOTOR PTE LTD (BUKIT BATOK) |
|-------------------|---------------------------------------|

**COST OF CLAIMS**

|                           | Amount           |
|---------------------------|------------------|
| Parts                     | 20,756.80        |
| Miscellaneous Items       | 222.96           |
| Labour                    | 5,810.00         |
| Paintwork Labour          | 1,400.00         |
| Towing                    | 0.00             |
| <b>Gross Total (\$\$)</b> | <b>28,189.76</b> |
| <b>+ GST 7.00% (\$\$)</b> | <b>1,973.28</b>  |
| <b>Nett Amount (\$\$)</b> | <b>30,163.04</b> |

**This claim is handled by: HENG SEW SOW**



## REPAIR DETAILS

## Reference

Part Source: (Last Synchronised: 30 Nov 2022)  
 Parts: N/A SCANIA P410A4X2NZ 12.7 D (M) (Model not available in database)  
 Labour: Repairer's (Price-denominated Standard List)

Print Code: Woon Meng Motor Pte Ltd/XE6697P/30/11/2022 19:02

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk \*.

7:03 PM  
 Estimates on  
 Qty Particulars  
 1 1  
 2 1  
 3 1  
 4 1  
 5 1  
 6 1  
 7 1  
 8 1  
 9 1  
 10 1  
 11 1  
 12 1  
 13 1  
 14 1  
 15 1  
 16 1  
 17 1  
 18 1  
 19 1  
 20 1  
 21 1  
 22 1  
 23 1  
 24 1  
 25 2  
 26 1  
 27 1  
 28 1  
 29 2  
 30 1  
 31 1  
 32 1  
 33 1  
 34 1  
 35 4  
 36 1  
 37 1

## Estimates on Parts

| No. | Qty | Part No. | Particulars                                    | %Disc | %Depr | Amount      |
|-----|-----|----------|------------------------------------------------|-------|-------|-------------|
| 1   | 1   |          | *FRONT WINDSCREEN GLASS <i>cm</i>              | 0.00  | 0.00  | *862.84 F   |
| 2   | 1   |          | *FRONT SUNVISOR TOP <i>cm</i>                  | 0.00  | 0.00  | *224.36 F   |
| 3   | 1   |          | *FRONT SUNVISOR LOWER <i>cm</i>                | 0.00  | 0.00  | *266.88 F   |
| 4   | 1   |          | *FRONT TOP MIRROR <i>br</i>                    | 0.00  | 0.00  | *375.48 F   |
| 5   | 1   |          | *FRONT WIPER LOWER SIDE GARNISH LH <i>mis</i>  | 0.00  | 0.00  | *87.35 F    |
| 6   | 1   |          | *FRONT PANEL <i>sc</i>                         | 0.00  | 0.00  | *1,058.93 F |
| 7   | 1   |          | *SCAN <i>sc</i>                                | 0.00  | 0.00  | *61.24 F    |
| 8   | 1   |          | *IA <i>sc</i>                                  | 0.00  | 0.00  | *51.85 F    |
| 9   | 1   |          | *FRONT PANEL SIDE GRILLE <i>sc</i>             | 0.00  | 0.00  | *90.85 F    |
| 10  | 1   |          | *FRONT LOWER PANEL <i>sc</i>                   | 0.00  | 0.00  | *637.98 F   |
| 11  | 1   |          | *FRONT INNER PANEL                             | 0.00  | 0.00  | *2,085.89 F |
| 12  | 1   |          | *COVER <i>cm</i>                               | 0.00  | 0.00  | *86.70 F    |
| 13  | 1   |          | *FRONT PANEL LOCK LH                           | 0.00  | 0.00  | *39.20 F    |
| 14  | 1   |          | *FRONT CORNER PANEL LH <i>bug</i>              | 0.00  | 0.00  | *675.68 F   |
| 15  | 1   |          | *FRONT HEADLAMP LH <i>cm</i>                   | 0.00  | 0.00  | *1,339.52 F |
| 16  | 1   |          | *FRONT HEADLAMP GRILLE LH <i>bt</i>            | 0.00  | 0.00  | *128.51 F   |
| 17  | 1   |          | *FRONT HEADLAMP MEAT LH <i>bt</i>              | 0.00  | 0.00  | *202.66 F   |
| 18  | 1   |          | *FRONT HEADLAMP GRILLE SIDE COVER LH <i>cm</i> | 0.00  | 0.00  | *15.61 F    |
| 19  | 1   |          | *FRONT BUMPER <i>bt</i>                        | 0.00  | 0.00  | *3,247.19 F |
| 20  | 1   |          | *FRONT BUMPER SIDE COVER LH <i>sc</i>          | 0.00  | 0.00  | *50.87 F    |
| 21  | 1   |          | *FRONT FOG LAMP COVER LH <i>sc</i>             | 0.00  | 0.00  | *28.52 F    |
| 22  | 1   |          | *FRONT HEADLAMP MEAT HINGE LH                  | 0.00  | 0.00  | *17.02 F    |
| 23  | 1   |          | *FRONT CORNER PANEL BRACKET LH <i>bt</i>       | 0.00  | 0.00  | *68.23 F    |
| 24  | 1   |          | *FRONT CORNER PANEL SEAL LH <i>na</i>          | 0.00  | 0.00  | *75.49 F    |
| 25  | 2   |          | *FRONT CORNER PANEL BRACKET LH <i>bt</i>       | 0.00  | 0.00  | *128.74 F   |
| 26  | 1   |          | *FRONT DOOR LH <i>br</i>                       | 0.00  | 0.00  | *3,427.32 F |
| 27  | 1   |          | *FRONT DOOR SIDE SEAL LH <i>na</i>             | 0.00  | 0.00  | *45.12 F    |
| 28  | 1   |          | *FRONT DOOR LOCK LH                            | 0.00  | 0.00  | *330.48 F   |
| 29  | 2   |          | *FRONT DOOR HINGE LH                           | 0.00  | 0.00  | *279.58 F   |
| 30  | 1   |          | *FRONT DOOR INNER TRIM LH                      | 0.00  | 0.00  | *840.04 F   |
| 31  | 1   |          | *FRONT DOOR RUBBER LH                          | 0.00  | 0.00  | *283.05 F   |
| 32  | 1   |          | *FRONT STEP PANEL LH <i>cm</i>                 | 0.00  | 0.00  | *786.99 F   |
| 33  | 1   |          | *FRONT HEADLAMP BRACKET LH                     | 0.00  | 0.00  | *154.02 F   |
| 34  | 1   |          | *FRONT HEADLAMP SEAL LH                        | 0.00  | 0.00  | *24.72 F    |
| 35  | 4   |          | *FRONT TOP MIRROR NOISE ABSORBENT <i>cm</i>    | 0.00  | 0.00  | *69.56 F    |
| 36  | 1   |          | *FRONT SUNVISOR SIGNAL LAMP LH <i>mis</i>      | 0.00  | 0.00  | *91.06 F    |
| 37  | 1   |          | *ROOF TOP PANEL LH <i>br</i>                   | 0.00  | 0.00  | *630.29 F   |

F=Franchise part.

Sub Total (\$\$) 18,869.82  
 + Margin on L,N Items 10.00% (\$\$) 1,886.98  
 Total Parts (\$\$) 20,756.80

## Estimates on Miscellaneous Items

No Qty Particulars

Amount

Miscellaneous Items

|                |   |                                   |        |
|----------------|---|-----------------------------------|--------|
| 1              | 1 | FRONT ERP BRACKET <i>new</i>      |        |
| 2              | 1 | FRONT WINDSCREEN SEALANT <i>m</i> | 15.00  |
|                |   |                                   | 207.96 |
| Sub Total (\$) |   |                                   | 222.96 |

## Estimates on Labour

No Particulars

Lab.Type

Amount

Paintwork Labour

1 TO PUTTY &amp; SPRAY PAINTING

New *1000* 1,400.00Labour Items

2 TO REMOVE, REPLACE, REPAIR &amp; REFIX DAMAGED PARTS

New *2800* ~~2400~~ 3,500.00

3 TO R &amp; R ROOF TOP INNER TRIM

New *200* 300.004 TO R & R FRONT DASHBOARD *photo?*New *350* 450.00

5 TO REMOVE &amp; INSTALL DOOR MECHANISM &amp; CHECK FOR FUNCTION

New *100* 250.00

6 TO R &amp; R FRONT WINDSCREEN GLASS

New *300* 350.007 TO R & R DRIVER SEAT AND PASSENGER SEAT *?*New *200* 280.00

8 TO R &amp; R WIRING

New *600* 80.00

9 TO NUMBERING LOGO

New 600.00

Gross Labour Cost (\$)

7,210.00

Woon Meng Motor Pte Ltd/XE6697P/30/11/2022 19:02. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

&lt; END OF ESTIMATES &gt;

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:

Rasul  
Hp 9001006810 ~~days~~

P/P

01/12/22 @ 1545

EXCESS: 2500

Resurvey  
Resurvey before paint



# 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              | 28/11/2022 18:19 (SGT) |
| Reported by                     | Owner                  |
| Date of Accident                | 26/11/2022 05:30 (SGT) |
| Exact Location of Accident      | Jln Buroh, Singapore   |
| Additional Location Information | -                      |
| Country/State of Loss           | Singapore              |

## DETAILS OF OWN VEHICLE

|                             |                               |
|-----------------------------|-------------------------------|
| Vehicle Registration Number | XE6697P                       |
| INSURED/POLICYHOLDER        |                               |
| Is company?                 | Yes                           |
| Name Of Registered Owner    | CALL LADE ENTERPRISES PTE LTD |
| Company Reg No              | 1XXXXX755R                    |
| Email Address               | MATTHEW@CALLADE.COM           |
| Mobile Phone No             | (Phone) +65-90490359          |
| Alternative Phone No        | -                             |

## VEHICLE PARTICULARS

|                                                                              |                    |
|------------------------------------------------------------------------------|--------------------|
| Manufacturer                                                                 | Scania             |
| Model                                                                        | P410A4X2NZ         |
| Variant                                                                      | -                  |
| Exact purpose for which vehicle was being used at time of accident           | Employment         |
| Are you claiming under your own insurance policy for repair to your vehicle? | Yes                |
| Vehicle Category                                                             | Commercial vehicle |
| Transmission                                                                 | Auto               |
| CC                                                                           | 12742              |

## INSURANCE COMPANY

|                                   |                          |
|-----------------------------------|--------------------------|
| Name of Insurance Company         | ERGO Insurance Pte. Ltd. |
| Policy Number / Cover Note Number | DMCG22009586             |

## DRIVER

|                 |                       |
|-----------------|-----------------------|
| Name of Driver  | CHINNATHAMBI MURUGESH |
| Passport No/FIN | GXXXX011T             |
| Date Of Birth   | 13/04/1997            |
| Occupation      | Outdoor               |

|                                                              |                           |
|--------------------------------------------------------------|---------------------------|
| Date Of Driving Pass                                         | 05/08/2020                |
| Driving experience                                           | 2 YEARS AND 3 MONTHS      |
| Gender                                                       | Male                      |
| Mobile Number                                                | (Phone) +65-98650698      |
| Alt. Phone Number                                            | -                         |
| Email Address                                                | MATTHEW@CALLADE.COM       |
| Address                                                      | 23 TELOK BLANGAH CRESCENT |
| Address complement                                           | #04-38                    |
| Postcode                                                     | 090023                    |
| 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   | Collided into Property |
| Weather Conditions | Clear                  |
| Road Surface       | Dry                    |

#### OTHER INFORMATION

|                                                                                                     |     |
|-----------------------------------------------------------------------------------------------------|-----|
| Was any foreign vehicle involved in the accident?                                                   | No  |
| Number of vehicles involved in the accident                                                         | 1   |
| 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?  | Yes                                                                       |
| Police Station Name                       | Bukit Merah East Neighbourhood Police Centre                              |
| Police Station Phone No                   | (Phone) +65-18002369999                                                   |
| Alt. Police Station Phone No              | (Fax) +65-62204360                                                        |
| Police Station Address                    | 391 New Bridge Road Police Cantonment Complex Block A<br>Singapore 088762 |
| Was notice of intended Prosecution given? | No                                                                        |
| If yes, against whom?                     | -                                                                         |

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE SKETCH PLAN

#### 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 | - |
| Vehicle Manufacturer        | - |
| Vehicle Model               | - |



|                                         |            |
|-----------------------------------------|------------|
| Vehicle Variant                         | -          |
| Vehicle Colour                          | -          |
| Vehicle Category                        | Government |
| 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)     | -          |



**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.
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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.

**5. 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' 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.



26/11/2022

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**



**Describe Circumstances of the Accident**

LICENSE PLATE: XE 6697 P ACCIDENT DATE & TIME: 26 Nov 2022 0350hrs  
 CONTACT NUMBER: 90490359 E-MAIL ADDRESS: matthew@callade.com  
 LOCATION: Jalan Buroh.

I was travelling from PSA Tuas Terminal towards Pahr Panjung  
 when I lost control of my vehicle XE6697P along Jalan Buroh  
 and hit a lamp post.

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN  
 OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION

Please state

☒ Claim Own Policy

☐ Claim Third Party

☒ Claim/OD/TP at other workshop

☒ Reporting Only

**Declaration**

We declare the foregoing particulars are true in every respect

  
 Policyholder's Signature / Date & Time 26/11/2022

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

  
 Witnessed by Reporting Centre Personnel



**SINGAPORE  
POLICE FORCE**



T/20221126/2046

Police Station Of Origin:  
Bukit Merah East N.P.C  
391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No: 1800-2369999

1 of 3

Report No T/20221126/2046

**REPORT OF A TRAFFIC ACCIDENT**

|                                            |                                      |                          |
|--------------------------------------------|--------------------------------------|--------------------------|
| Date/Time Report Made:<br>26/11/2022 13:43 | Video Report No.:<br>D/20221126/0050 | Station Diary No.:<br>48 |
|--------------------------------------------|--------------------------------------|--------------------------|

**Informant's Particulars**

|                                             |            |                              |                                                                           |                            |  |
|---------------------------------------------|------------|------------------------------|---------------------------------------------------------------------------|----------------------------|--|
| Name of Informant:<br>CHINNATHAMBI MURUGESH |            |                              | Address:<br>APT BLK 65 NEW UPPER CHANGI ROAD #02-1138<br>SINGAPORE 460065 |                            |  |
| ID Type / ID No.:<br>FIN NO / G8537011T     |            |                              | Contact No.:<br>Home/Office: Mobile: 98650698                             |                            |  |
| Nationality:<br>INDIAN                      |            |                              | Email:                                                                    |                            |  |
| Sex:<br>Male                                | Age:<br>25 | Date of Birth:<br>13/04/1997 | Type of Informant:<br>Driver                                              |                            |  |
| Race:<br>Indian                             |            |                              | Language:<br>English                                                      | Institution / School Name: |  |
| Occupation:<br>Trailer-truck driver         |            |                              | Driving Licence Information:<br>Class: 2B,3,4 Date of Expiry:             |                            |  |

**General Information of the Accident**

|                                                          |                    |                                            |                                     |
|----------------------------------------------------------|--------------------|--------------------------------------------|-------------------------------------|
| Type of Accident:<br>Non-Injury<br>Attended by Police    | Drink Drive:<br>No | Date/Time of Accident:<br>26/11/2022 05:30 | Type of Location:<br>Straight Road  |
| Location:<br>JALAN BURUH                                 |                    |                                            |                                     |
| Weather:<br>Drizzling                                    |                    | Road Surface:<br>Wet                       | Road Speed Limit:<br>50 Km/h        |
| Traffic Flow:<br>One Way                                 |                    | Traffic Control:<br>Not Controlled         | Traffic Volume:<br>Light            |
| Type of Collision:<br>Moving Vehicle Against - Lamp Post |                    |                                            | Anyone conveyed by ambulance:<br>No |

**Details of Vehicle Involved**

| Vehicle No. | Type  | Make   | Model          | Color | Condition           | No of Passenger |
|-------------|-------|--------|----------------|-------|---------------------|-----------------|
| XE6697P     | Lorry | SCANIA | P410A4X2N<br>Z |       | Slightly<br>Damaged | 1               |

**Details of Person Involved**

|                                                                |
|----------------------------------------------------------------|
| Any Pedestrian Involved: No                                    |
| No. of Pedestrians Injured: NIL Use of Pedestrian Crossing: NA |





**SINGAPORE  
POLICE FORCE**



T/20221126/2046

Police Station Of Origin:  
Bukit Merah East N.P.C  
391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No: 1800-2369999

2 of 3

Report No. T/20221126/2046

**CONTINUATION OF REPORT**

|                                   |                       |                                        |                                      |
|-----------------------------------|-----------------------|----------------------------------------|--------------------------------------|
| <b>Driver</b>                     |                       |                                        |                                      |
| Name                              | CHINNATHAMBI MURUGESH | ID No.                                 | G8537011T                            |
| Related Vehicle                   | NIL                   | Contact No.                            | 98650698                             |
| Hospital/Clinic                   | NIL                   | Class of Driving Licence & Expiry Date | Class: 2B,3,4<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                   | Date Discharge                         | NIL                                  |
| No. of Days granted Medical Leave | NIL                   | Degree of injury                       | NIL                                  |

**Brief Details.**

On 26/11/2022, at about 0530hrs, I was driving from PSA Tuas to PSA Pasir Panjang terminal. The floor was wet and there was some light rain. Along Jln Buroh towards West Coast Rd, I was driving along the 4th lane and suddenly lost control of the vehicle and crash into the lamp post. I came out of the vehicle and called my company and the police.

The vehicle suffered a dented bumper and smashed windscreen. I was not injured from this incident and did not collide into any other vehicle. There was an in-vehicle camera at the front. The police advised me to lodge a police report as the accident involves government property.





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin  
Bukit Merah East N.P.C  
391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No. 1800-2369993



1202211262046

Report No. T202211262046

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:

A /  
SGT 1 LOTUS TAN LER SZE

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
STAFF SGT SYED MUHAMMAD ISA BIN  
OMAR ALHABSHEE  
Contact No.: 65476187

NP168

Signature Of Informant

Date/Time  
26/11/2022 13:43

Classification Of Case:



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

|                               |                   |
|-------------------------------|-------------------|
| Owner ID Type:                | Company           |
| Owner ID:                     | 755R              |
| Vehicle No.:                  | XE6697P           |
| Vehicle to be Exported:       | No                |
| Intended Deregistration Date: | 02 Dec 2022       |
| Vehicle Make:                 | SCANIA            |
| Vehicle Model:                | P410A4X2NZ        |
| Primary Colour:               | Multicolor        |
| Manufacturing Year:           | 2021              |
| Engine No.:                   | DC13163L017299364 |
| Chassis No.:                  | YS2P4X20005626229 |
| Maximum Power Output:         | -                 |
| Open Market Value:            | \$107,401.00      |
| Original Registration Date:   | 30 Aug 2021       |
| First Registration Date:      | 30 Aug 2021       |
| Transfer Count:               | 0                 |
| Actual ARF Paid:              | \$5,371.00        |

|                               |        |
|-------------------------------|--------|
| PARF Eligibility:             | No     |
| PARF Eligibility Expiry Date: | -      |
| PARF Rebate Amount:           | \$0.00 |

|                      |                         |
|----------------------|-------------------------|
| COE Expiry Date:     | 29 Aug 2031             |
| COE Category:        | C - Goods Vehicle & Bus |
| COE Period (Years):  | 10                      |
| QP Paid:             | \$37,000.00             |
| COE Rebate Amount:   | \$32,335.00             |
| Total Rebate Amount: | \$32,335.00             |

The information contained herein is correct as at 02 Dec 2022

OK