Kenneth	
_	ASSIGNMENT
From: Date:	0
Estimated Cost:	Veh No: JUR 70417 Yr Regn: 08, 17
OD TP WS / TP RES / OD RES / EVA / IN	Type: McCar? M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Y/MY Truck / Trailer or
* To Inspect Vehicle No:	
*	1 11
of	
Insured:	Sp.Reading 137130 T/Radio: Insured / Std / NI / NA
Policy No.	
Claims No.	CNO: KM140841CM.JU 53340
	Gen. Cond; Good / Fair / Poor / Burnt
Est.	Sleering: Inorder / Jammed / Leaked / Burnt or
(Cfient's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
make of Yell.	Modi: Nil / SHRIM / STD A/Rim or
	Tyre Size: F:
(Policy Condition)	R: 205/557RIC
Remark: The veh had commenced its repair at the time of inspection.	N/S O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
	TOYO/YOKO or Altento
Bal. or Market Value:	Crost
DAC Accident Rport: Consistent? : Y	res or No R/Bal. R/Bal. 7
GIA / PR Seen: Consistent?: Y	es or No
Est. Repairs: Oddays Res.: Ye	es or No
10 Lum Sum: 20 % 3 Val.: Ye	101 6/2/202
	Survey heid at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date:Person Contacted:	Vehicle: IN / OUT
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
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Date/Drog Ess Dance	
Onte/Time, File Pass to? Prell. Report	Days Of Repair:
Onte/Time, File Pass to? : Prell. Report : Final Report	Regulated
Onte/Time, File Pass to? : Prell. Report : Final Report	Resurvey No. of Trip: Survey Fee:
Onte/Time, File Pass to? : Prell. Report : Final Report	Resurvey No. of Trip: Survey Fee:
Onte/Time, File Pass to? : Prell. Report : Final Report	Resurvey No. of Trip: Survey Fee: Transportation Transportation See St.
Onte/Time, File Pass to? : Prell. Report : Final Report	Resurvey No. of Trip: Survey Fee: Transportation Transporta
Onte/Time, File Pass to? : Prell. Report : Final Report port Format:	Add Fee: Site Insp (\$) _ S - RSSI Interview (\$) First Tech Inve (\$
Onte/Time, File Pass to? : Preli. Report : Final Report port Forfinat :	Resurvey No. of Trip: Survey Fee: Transportation: Survey Fee: Transportation: Transpor
Onte/Time, File Pass to? : Prell. Report	Add Fee: Site Insp (\$) _ S - RSSI Interview (\$) First Tech Inve (\$

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:201001158E

M/S: SINGAPORE POLICE FORCE -Automotive Engrg

POLICE LOGISTIC DEP

1 MOUNT PLEASANT RD, BLK 8 OLD POLICE

SINGAPORE 298333

TEL: 64784840

WS Ref:

Claim Type:

Accident Date:

TP Veh Reg No:

ATTN: Motor Claim Department

TP/SPF

Third Party

10/02/2023

GZ3296Z

Not Whain

FAX: 64784848

Marry After Painy Reg. Date:

Felay,

No: SLR7

16 Feb 2023 Date:

5119752587-02 **SLR7041Z**

HYUNDAI HYUNDAI Make/Model:

ES2300159/YISHUN

ELANTRA AD 1.6 GLS

AT

Chassis No:

KMHD841CMJU533402

Estimate No:

Policy No:

Veh Reg No:

G4FGHU621410

25/08/2017

Estimate Repair Cost to Vehicle No: SLR7041Z

	Description	U/Price	Quantity	List Price	Amount
	List Price			<u>S\$</u>	<u>S\$</u>
					_
	REAR BUMPER	500.10	1 PC	500.10	
2		295.00	1 PC	Bu 295.00 L	
3	REAR BUMPER RH REFLECTOR	40.80	1 PC	40.80	7
4	REAR BUMPER LOWER SKIRT	262.60	1 PC	R 262.60 \	
5	REAR BUMPER CLIPS	3.80	6 PCS	Ma 22.80 .	
6	REAR BOOT EMBLEM	28.80	1 PC	New 28.80	
	· ·			1,150.10	
			Less 20%	230.02	920.08
	Special Net				
7	REVERSE SENSOR	200.00	1 SET	200.00	?
				200.00	200.00
	Labour				
	REMOVE & REFIX REAR BUMPER ASSY,TAILLAMPS,TO KNOCK & REPAIR REAR PANEL,BOOT & REALIGN THE SAME	600.00	1 LA	600.00	450l 604
	PUTTY & RESPRAY ON REAR PANEL,REAR BOOT,REAR BUMPER	700.00	1 LA	700.00	604
				1,300.00	1,300.0
je-1			in the	Total	S\$ 2,420.0

Add GST @ 8% 193.61 **Total Amount Payable** S\$ 2,613.69

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:

For Cheng Hoe Motor Pte Ltd

AUTHORISÉD SIGNATURE

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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- 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.

 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	11/02/2023 17:26 (SGT) Both Policyholder and Actual Driver
Reported by Date of Accident	10/02/2023 14:55 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CHAI CHEE ST.
Country/State of Loss	Singapore

Additional Location Information Country/State of Loss	
DETAILS	OF OWN VEHICLE
Vehicle Registration Number	SLR7041Z
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	RIDWAN BIN ISMAIL
NRIC No,	
Email Address	
Mobile Phone No	
Alternative Phone No	
VEHICLE PARTICULARS	
Manufacturer	Hyundai
Model	
Variant	- 18 - 18 18 18 18 18 18 18
Exact purpose for which vehicle was being used at time of	Private use
accident	Filvate use
our vehicle?	No - Claiming third party
/ehicle Category	Private car
ransmission	그 사람은 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
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INSURANCE COMPANY	
ame of Insurance Company	
olicy Number / Cover Note Number	5119752587-02
RIVER	
me of Driver	RIDWAN BIN ISMAIL
IIC No	SXXXX763E

14/09/1976 Outdoor

Occupation

Claim under your Own Comprehensive policy. Pls check your policy for more information. () Claim Own Policy (Claim Third party () Reporting Only Sketch Plan A = SLR 70417 B = GZ 3.296 2 Tep Tran Lan S8739 635 KMP - 9817 33 (Wirth 3 pass Chai Chee St.	
B-GZ32967 Tep Tran Lan S8739625 HIP+981732 (with 3 pas Chai Chee St.	
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Declaration

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

olicyholder's Signature / Date & Time

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

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



Police Station Of Origin: Bedok South NPP

20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999

2 of 3 Report No. T/20230210/2079

CONTINUATION OF REPORT

SLR7041Z	Insurance Company NTUC Income Insurance Co-Operative	5119752587-02	Effective 25/08/2022	24/08/2023
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No. of Pedestria	ins Injured: NIL	· A A	Use of Pe	destrian	Cross	ing: NA
Name	TEO TIAN LONG,	MELVIN		ID No.		S8739625H
Related Vehicle	GZ3296Z (Car)		Contact No.		NIL	
Hospital/Clinic	NIL			Class Driving Licency Expiry	g æ &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	Liberth Sterner, Alberth Act.	NIL	No. of the second second
THE RESIDENCE OF THE PARTY OF T	ted Medical Leave	NIL	Degree of		NIL	
Driver		Mark to the	电影 医乳腺素			
Name RIDWAN BIN ISMAIL			ID No. Contact No.		S7628763E	
Related Vehicle SLR7041Z (Car)						92314145
Hospital/Clinic NIL		Class of Driving Licence & Expiry Date		g ce &	Class: 3 Date of Expiry: NIL	
ate Treatment	NIL		Date Disc	harge	NIL	
o. of Davs grante	ed Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 10/02/2023 at about 1427hrs, I was driving along Chai Chee St towards the T-junction near Blk 45. Upon reaching the traffic light, the traffic light was red and I make a stop at the stop line on the lane 2. Not long after making the stop, a vehicle hit the rear of my car. I make a check and discovered that it was a police vehicle. I was attended by the paramedic but does not require to be convey by the ambulance.