

ASS. REQ. BY:

REF:

CS/EG123001897/Awy3

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: _____

Policy No. _____

Claims No. _____

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: #32,000

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 6 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: YJ94338 Yr Regn: 2014, JuneType: M.Car / M.Cycle / Bus / Van (Lorry) Taxi / Prime Mover /

Truck / Trailer or

Make: Mit Center C.C. 2998Colour: White A/C: Insured / Std / NI / NASp. Reading: 341621 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: FE371EA 00107Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orMod: Nil / S/Rim / STD A/Rim orTyre Size: F: 215/75 R17.5R: 215/75 R17.5

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

TOYO / YOKO or Noadshure

Front _____ Rear _____

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 28/02/23Survey held at JL PerfectDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time _____ Action / Instruction _____

TP Rego:

Finalise L/S #7,500.00 @ 06 Days (Red #37,650.00/83%)

MV: 32K

PV: 1.8K

Nett: 30.2K

Date/Time, File Pass to?

☐ : Preli. Report1) Typist☒ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 6

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Inve (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS. SI _____

Photos _____

Others _____

Report Format: TP

Lump Sum / P.P.F. (C)

LS #7500

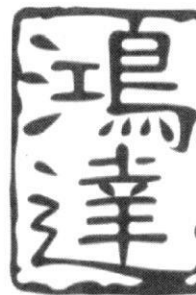
HD Perfect Autowork Pte Ltd

Company Reg No: 202136904Z

8 Kaki Bukit Ave 4, #08-09 Premier@Kaki Bukit
Singapore 415875

Tel : 6341 6789 Fax: 6341 6778

E-mail: hdperfectautowork@gmail.com



HD PERFECT
AUTOWORK PTE LTD

TO : **ERGO** MOTOR CLAIMS DEPTS
VEHICLE NO : **YJ9433B**
MODEL : **MIT-CANTER FEB71ER4SDEC**
DATE OF ACCIDENT : 16.02.2023
TIME OF ACCIDENT : 17:00 HOURS

WE APPEND HEREUNDER THE ESTIMATED COST OF REPAIRS TO BE CARRIED OUT TO THE ABOVE VEHICLE.

CLAIM DETAIL : PARTS

| S/N | DESCRIPTION | QTY | UNIT LIST PRICE | TOTAL LIST PRICE |
|-----|-----------------------------|-----|-----------------|------------------|
| 14 | TAIL LAMP <i>RH cracked</i> | 2 | \$ 360.00 | \$ 720.00 |

TOTAL PRICE \$ 720.00
LESS 25% \$ 180.00
SUB TOTAL PRICE \$ 540.00

CLAIM DETAILS: SPECIAL NETT

| S/N | DESCRIPTION | QTY | UNIT S/NETT | TOTAL S/NETT |
|-----|---|-----|-------------|--------------|
| 1 | TAILGATE WOODEN <i>cracked</i> | 1 | \$ 2,800.00 | \$ 2,800.00 |
| 2 | TAILGATE HINGE <i>new</i> | 4 | \$ 180.00 | \$ 720.00 |
| 3 | TAILGATE '60KM' STICKER <i>new</i> | 1 | \$ 50.00 | \$ 50.00 |
| 4 | SIDE GATE WOODEN RH <i>cracked</i> | 1 | \$ 2,800.00 | \$ 2,800.00 |
| 5 | SIDE GATE HINGE <i>2 pieces Best</i> | 3 | \$ 180.00 | \$ 540.00 |
| 6 | REAR WHEEL MUDGUARD RH <i>new</i> | 1 | \$ 680.00 | \$ 680.00 |
| 7 | REAR CARGO BED REAR FRAME <i>new</i> | 1 | \$ 3,800.00 | \$ 3,800.00 |
| 8 | REAR CARGO BED BOTTOM BEAMS (WOODEN) <i>4 pieces</i> | 6 | \$ 1,500.00 | \$ 9,000.00 |
| 9 | CARGO BED CHASSIS MEMBER (WOODEN) <i>new</i> | 2 | \$ 6,500.00 | \$ 13,000.00 |
| 10 | CARGO BED U CLIP <i>new</i> | 6 | \$ 250.00 | \$ 1,500.00 |
| 11 | CARGO BED SIDE GATE LOCK <i>1 piece best</i> | 2 | \$ 180.00 | \$ 360.00 |
| 12 | CANOPY RAILING <i>cracked</i> | 1 | \$ 1,200.00 | \$ 1,200.00 |
| 13 | TAIL LAMP BACK SUPPORT BRACKET RH(SPECIAL TYPE) <i>Best</i> | 1 | \$ 180.00 | \$ 180.00 |

TOTAL \$ 36,630.00

CLAIM DETAILS: LABOUR AND SPRAY PAINTING (REAR)

| S/N | JOB DESCRIPTION | PRICE | ADJUSTED COST |
|-----|-----------------|-------|---------------|
|-----|-----------------|-------|---------------|

TO : **ERGO** MOTOR CLAIMS DEPTS
 VEHICLE NO : **YJ9433B**
 MODEL : **MIT-CANTER FEB71ER4SDEC**
 DATE OF ACCIDENT : 16.02.2023
 TIME OF ACCIDENT : 17:00 HOURS

| | | | |
|---|---|-------------|-----|
| 1 | TO PANEL BEAT, KNOCK, WELD, CUT, ADJUST, STRAIGHTEN, GRAZE, ALIGN | \$ 2,000.00 | 600 |
| 2 | TO PUTTY, SPRAY PAINT, POLISH, WAX | \$ 2,000.00 | 600 |
| 3 | BULB CHECKING, WIRING | \$ 180.00 | 30 |
| 4 | REAR CHASSIS ALIGNMENT | \$ 200.00 | x |
| 5 | REMOVE AND REFIX CARGO BED | \$ 2,800.00 | 800 |
| 6 | REMOVE AND REFIX CANOPY | \$ 800.00 | 100 |

2130

TOTAL 7,980.00

TOTAL PARTS COST : \$ 37,170.00
 TOTAL LABOUR COST : \$ 7,980.00
 TOTAL REPAIR COST : \$ 45,150.00

Adrian Lj
 h/s 28/02/23.
 06 Days.

NB: THIS IS ONLY AN ESTIMATE AND SHOULD ADDITIONAL WORK BE FOUND NECESSARY TO BE CARRIED OUT IN THE COURSE OF REPAIRS, EXTRA MATERIALS AND LABOUR COST WILL BE CHARGED ACCORDINGLY WHICH HOWEVER, YOU WILL BE INFORMED PRIOR TO ACTION TAKEN.

PARTS PRICES ARE SUBJECT TO CHANGES.

YOURS FAITHFULLY,

IRENE

SERVICE ADVISOR
 IRENE
 HP : 8297 9787

total: 9385.

h/s: 7.5K ✓

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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner Particulars | |
|-------------------------------|-------------------------|
| Owner ID Type: | Company |
| Owner ID: | 860H |
| Vehicle Details | |
| Vehicle No.: | YJ9433B |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 28 Feb 2023 |
| Vehicle Make: | MITSUBISHI |
| Vehicle Model: | CANTER FEB71ER4SDEC |
| Primary Colour: | White |
| Manufacturing Year: | 2014 |
| Engine No.: | 4P10B20442 |
| Chassis No.: | FEB71EA00107 |
| Maximum Power Output: | - |
| Open Market Value: | \$32,563.00 |
| Original Registration Date: | 06 Jun 2014 |
| First Registration Date: | 06 Jun 2014 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$1,629.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 05 Jun 2024 |
| COE Category: | C - Goods Vehicle & Bus |
| COE Period(Years): | 10 |
| PQP Paid: | \$13,525.00 |
| COE Rebate Amount: | \$1,709.00 |
| Total Rebate Amount: | \$1,709.00 |

The information contained herein is correct as at 28 Feb 2023

OK

A SHOW OF SMARTS
AT WATERWAY POINT

27 Feb - 5 Mar



ŠKODA

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Fuso Canter FEB71

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Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

Search Selection Fuso Canter FEB71 Any Any Any Any Any Any Available



☐ **Mitsubishi Fuso Canter FEB71** \$29,800 \$33,780 /yr 17-Jan-2014 2,998 cc - Truck Available

Fuel Type: Diesel

14 feet truck, wooden platform, 3 metal dropsides, full canopy.

Skylink Auto Pte Ltd

★ Posted: 27-Dec-2022

PREMIUM AD



☐ **Mitsubishi Fuso Canter FEB71** \$32,800 \$28,440 /yr 25-Apr-2014 2,998 cc - Truck Available

Fuel Type: Diesel

14ft high box truck, power tailgate.

Skylink Auto Pte Ltd

★ Posted: 28-Feb-2023

PREMIUM AD



☐ **Mitsubishi Fuso Canter FEB71** \$33,800 \$21,870 /yr 15-Sep-2014 2,998 cc - Truck Available

Fuel Type: Diesel

14 feet truck, wooden platform, 3 wooden dropsides, full canopy.

Skylink Auto Pte Ltd

★ Posted: 07-Feb-2023

PREMIUM AD



☐ **Mitsubishi Fuso Canter FEB71** \$65,800 \$18,490 /yr 20-Sep-2016 2,998 cc 90,000 km Truck Available

Fuel Type: Diesel

Exclusive warranty and servicing for vehicle and tailgate provided! Flexible loan repayment plan! One owner with low usage! Brand new paintwork with refurbished upholstery! View to believe! Contact our friendly sales representative today

Car (S) Pte Ltd

★ Posted: 23-Feb-2023

PREMIUM AD



☐ **Mitsubishi Fuso Canter FEB71** \$89,800 \$13,650 /yr 27-Sep-2019 2,998 cc - Truck Available

Fuel Type: Diesel

Class 3 drivable with payload of 4.2 ton! 1 ownership + fully maintained by agent since day one! Latest reliable Mitsubishi workhorse with strong chassis. Flexible financing packages available, high loan welcome. Attractive trade in quotation provided. Speedy loan approvals, i...

Car (S) Pte Ltd

★ Posted: 25-Feb-2023

PREMIUM AD

Save this search criteria, to get email alerts whenever a match is found.

Save Search

Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

For old advertisements, view Expired ads

20 results/page

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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 | 18/02/2023 12:17 (SGT) |
| Reported by | Driver |
| Date of Accident | 16/02/2023 17:00 (SGT) |
| Exact Location of Accident | Tampines Ave 10, Singapore |
| Additional Location Information | TAMPINES AVE 10 TOWARDS BARTLEY ROAD EAST |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-------------------------------|
| Vehicle Registration Number | YJ9433B |
| INSURED/POLICYHOLDER | |
| Is company? | Yes |
| Name Of Registered Owner | GUAN LEE VEG & FRUITS PTE LTD |
| Company Reg No | 2XXXXX860H |
| Email Address | guanleevegfruits@gmail.com |
| Mobile Phone No | (Phone) +65-67791009 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Mitsubishi |
| Model | Canter |
| 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? | No - Claiming third party |
| Vehicle Category | Commercial vehicle |
| Transmission | Manual |
| CC | 2998 |

INSURANCE COMPANY

| | |
|-----------------------------------|--------------------------|
| Name of Insurance Company | Income Insurance Limited |
| Policy Number / Cover Note Number | 5118696222-02 |

DRIVER

| | |
|-----------------|------------|
| Name of Driver | AN HAIBAO |
| Passport No/FIN | GXXXX219M |
| Date Of Birth | 20/02/1982 |
| Occupation | Outdoor |

| | |
|--|--|
| Date Of Driving Pass | 20/12/2022 |
| Driving experience | 2 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-85749565 |
| Alt. Phone Number | - |
| Email Address | guanleevegfruits@gmail.com |
| Address | 11, WHOLESALE CENTRE PASIR PANJANG |
| Address complement | #01-581 PASIR PANJANG WHOLESALE CENTRE |
| Postcode | 110011 |
| 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 SKETCH PLAN ATTACHED

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 | XE5686C |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Commercial vehicle |
| 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 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

Vehicle (A) = YJ 9433B
Vehicle (B) = XE 5686C
Tampines Avenue 10
Towards Bartley Road East
(Before Bodok North Rd Exit)

Describe Circumstance of the Accident

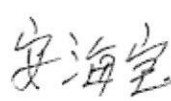
Refer to attached

Declaration



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

Policyholder's Signature / Date & Time

 安海宝

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

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

On 16.02.2023 at about 17:00 hours along Tampines Avenue 10 towards Bartley Road East (before Bedok North Rd Exit), I was travelling straight on my lane.

Suddenly, I heard a loud bang and felt a great impact from behind. When I alighted, I realised it was vehicle (B) that collided onto the rear right hand side portion of my vehicle (A).

Vehicle (A): YJ 9433B

Vehicle (B): XE 5686C



安海宝

