ASS. REC. BY: Kenneth

REF: CTL / 2300 4713 / KV

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s LHMK

of _____

Insured: _____

Policy No. DMCVSNA00020052303

Claims No. SNM23D203249/C01/LEEPG

Sum Insured: _____ Excess: 3600 600

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: $52K

IDAC Accident Rport: _____ 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: _____ Vehicle: IN / OUT

Veh No: YP 2049S Yr Regn: 04/16

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Hino XZU710R c.c 4009

Colour White A/C: Insured / Std / NI / NA

Sp.Reading 235793 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JHHUCS3HX0K016844

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modi: Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 07ani _____

R: Pir 7.00R16 (D)

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	8 mm	R/Bal.	22 mm
L/Bal.	8 mm	L/Bal.	22 mm
D.O.A.	5/5/23	D.O.I.	10/5/2023

Survey held at _____

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or N/S body

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

Date / Time	Action / Instruction
/	Chassis Bent, no estimate T/Loss
12/5/23	Submit CTL-mv:$52,000 lta:$5650 nv:$46,350

Date/Time, File Pass to? _____ : Preli. Report

_____ : Final Report

Date/Time, File Return to?

2) 12/5/23-typist

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____ S + RS _____ SI

Parking _____

Others _____

Add Fee: _____ : Site Insp ($ _____)

_____ : Interview ($ _____)

_____ Tech Invs ($ _____)

_____ Weekend ($ _____)

TOTAL _____

Report Format :

Lump Sum / I.B.I: ($ _____)

SL0M23560002 / Lai Huat (Meng Kee) Motor Pte Ltd
ENTRY DATE & TIME: 06/05/2023 13:12 (SGT)
SUBMITTED BY: Deborah Lai
VERSION: 1 (06/05/2023 13:12 (SGT))

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.
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	06/05/2023 13:12 (SGT)
Reported by	Actual Driver
Date of Accident	05/05/2023 08:45 (SGT)
Exact Location of Accident	Tampines Ave 6, Singapore
Additional Location Information	Junction of Tampines Ave 6 & Tampines Street 61
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP2049S

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Avenue Engineering Pte Ltd
Work Permit No	0XXXX2975
Email Address	recconiam@jcoeng.com.sg
Mobile Phone No	(Phone) +65-96613312
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hino
Model	XZU710R-HKFMS3
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	Goods vehicle
Transmission	Manual
CC	4009

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNA00020052303

DRIVER

Name of Driver	Chinnapillai Thamizharasan
Passport No/FIN	GXXXX978R
Date Of Birth	14/06/1992
Occupation	Outdoor

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.

AVENUE ENGINEERING PTE LTD

Policyholder's Signature / Date & Time

06 MAY 2023

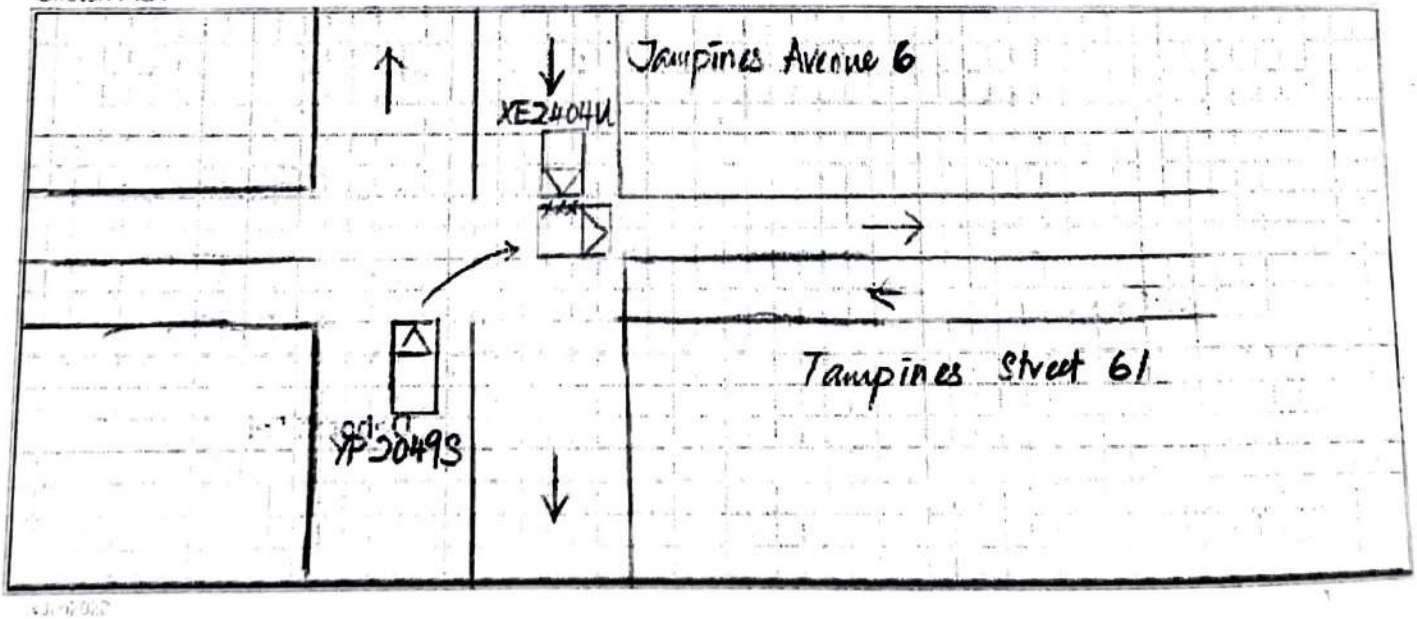
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

06 MAY 2023

Deborah Lai

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

Sketch Plan



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	196N

Vehicle Details

Vehicle No.:	YP2049S
Vehicle to be Exported:	No
Intended Deregistration Date:	06 May 2023
Vehicle Make:	HINO
Vehicle Model:	HINO XZU710R-HKFMS3
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	N04CUS27097
Chassis No.:	JHHUCS3HX0K016844
Maximum Power Output:	-
Open Market Value:	$27,086.00
Original Registration Date:	15 Apr 2016
First Registration Date:	15 Apr 2016
Transfer Count:	0
Actual ARF Paid:	$1,355.00

Intended PARF Rebate Details

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

Intended COE Rebate Details

COE Expiry Date:	14 Apr 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	$19,225.00
COE Rebate Amount:	$5,650.00
Total Rebate Amount:	**$5,650.00**

The information contained herein is correct as at 06 May 2023

OK