

(08/11/13) WEL

ASS. REC. BY:

REF:

CS/ICS24100260/XXP3

877H

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: XD 4671G

at Workshop m/s 9020 BKL

of 8, Turn 18

Insured:

ICS

Policy No.

Claims No.

Sum Insured:

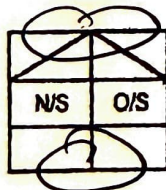
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

20k

IDAC Accident Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

10

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Date / Time

Action / Instruction

REPAIR LIMIT - 17K

Taufikh finalise lump sum \$17,000, 10 days.

(red, \$8232.02; 32%)

Veh No:

XD 4671G

Yr Regn:

2010 / DGE

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

Truck / Trailer or

Make:

MAN TGM 18.280 4x2 BS c.c 6871

Colour:

GREEN

AC: Insured / Std / NI / NA

Sp. Reading:

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WMAN08227AY244448

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:

295/80R22-5

R:

D/D

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

TOYO (YOKE) or

Front

Rear

R/Bal.

8

mm

R/Bal.

8/8

mm

L/Bal.

8

mm

L/Bal.

8/8

mm

D.O.A.

04/10/24

D.O.I.

05/11/24

Survey held at

TAMSAVE 18

Des. 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, File Pass to?



: Prel. Report

1)

Date/Time, File Return to?



: Final Report

2)

Days Of Repair: 10

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:



Site Insp (\$

) \$ + RS \$



Interview (\$

) Photos



Tech. Invs (\$

) Others



Weekend (\$

)

TOTAL

Report Format:

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



GOLDBELL ENGINEERING

Industrial Vehicles, Financial Services.
41,000 Served, And Counting.

GOLDBELL ENGINEERING PTE LTD
Main Office: 8 Tuas Avenue 18 Singapore 638892 Tel: 6861 0007 Fax: 6861 3676
Finance: 8 Tuas Avenue 18 Singapore 638892 Tel: 6861 0007 Fax: 6862 3500
Website: www.goldbell.com.sg
Co Reg No 198903663G

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ESTIMATE

Date	: 04/11/2024	Reg No	: XD4671G
To	: ECICS LIMITED	Model	: MAN / TGM 18.280 4X2 BB
Attn.	:	Chassis No	: WMAN08ZZ7AY244448
Office / Mobile	:	Engine No	:
Email Address	:	Quotation No.	: 221152
		Ref. No.	: GBE/SVC/SALES-HQ/ 194-04/10
From	: GOLDBELL ENGINEERING PTE LTD	D.O.A.	: 04/10/2024
Attn.	: AMENCIA	Policy No.	: BVFCSB0006702419
Office / Mobile	:	Claim Type	: TP CLAIM - ECICS INSURANCE
Email / Fax No.	: Amencia@goldbell.com.sg	Workshop	: 8 TUAS AVE 18

S/N	Part No	Description	Qty	U/Price	%	Net Price	Ext Price
1		SYNTHETIC BUMPER <i>cm</i> ✓	1	3,600.00	-10	3,240.00	3,240.00
2		BUMPER END PANEL RH <i>cm</i> ✓	1	130.00	-10	117.00	117.00
3		BUMPER END PANEL LH <i>mis</i>	1	130.00	-10	117.00	117.00
4		TRIM ?	2	130.00	-10	117.00	234.00
5		BUMPER GARNISH LOWER RH ?	1	338.00	-10	304.20	304.20
6		BUMPER GARNISH LOWER LH ?	1	338.00	-10	304.20	304.20
7		HEADLAMP RH ?	1	1,690.00	-10	1,521.00	1,521.00
8		HEADLAMP LH ?	1	1,690.00	-10	1,521.00	1,521.00
9		AUXILIARY HEADLAMP FLASHER <i>cm</i> ✓	1	455.00	-10	409.50	409.50
10		ENTRY MUDGUARD RH ?	1	2,860.00	-10	2,574.00	2,574.00
11		ENTRY MUDGUARD LH <i>X</i>	1	2,860.00	-10	2,574.00	2,574.00
12		STEP, LH <i>cm</i> ✓	1	455.00	-10	409.50	409.50
13		FLASHER ?	1	156.00	-10	140.40	140.40
14		WHEEL NUT COVER RING AXLE <i>bt</i> ✓	1	234.00	-10	210.60	210.60
15		WIND DEFLECTOR ?	1	494.00	-10	444.60	444.60
16		PILLAR LINING ?	1	585.00	-10	526.50	526.50
17		REAR LAMP RH <i>bn</i> ✓	1	491.40	-10	442.26	442.26
18		REAR LAMP LH <i>bn</i> ✓	1	491.40	-10	442.26	442.26

PARTS TOTAL : 15,532.02

SPECIAL NETT ITEMS

1	STICKER <i>n</i> ✓	1	0.00
2	NUMBER PLATE <i>mis</i> ✓	2	35 50.00
3	60KM/H <i>n</i> ✓	1	30.00

PARTS TOTAL: 80.00



AIRMAN.





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Website: www.goldbell.com.sg
Co. Reg No: 198603663G

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ESTIMATE

Date :	04/11/2024	Reg No :	XD4671G
To :	ECICS LIMITED	Model :	MAN / TGM 18.280 4X2 BB
Attn. :		Chassis No :	WMAN08ZZ7AY244448
Office / Mobile :		Engine No :	
Email Address :		Quotation No. :	221152
		Ref. No. :	GBE/SVC/SALES-HQ/ 194-04/10
From :	GOLDBELL ENGINEERING PTE LTD	D.O.A. :	04/10/2024
Attn. :	AMENCIA	Policy No. :	BVFCB0006702419
Office / Mobile :		Claim Type :	TP CLAIM - ECICS INSURANCE
Email / Fax No. :	Amencia@goldbell.com.sg	Workshop :	8 TUAS AVE 18

LABOUR CHARGES

1	TO REMOVE AND REFIX DAMAGED PARTS, CUT, WELD, PANEL BEAT, STRAIGHTEN & REALIGN, ETC	2100	2500.00
2	TO PUTTY, CLEAN, SPRAY PAINT AND POLISH, ETC	1400	1800.00
3	TO CHECK FOR AND RECTIFY WIRING FAULTS	180	280.00
4	TO DISMANTLE AND CHANGE NEW 1 PC REAR UNDERRUN BUMPER		0.00
5	TO DISMANTLE AND CHANGE NEW 2 PCS REAR ALUMINIUM SHEET		0.00
6	REAR LEFT HAND SIDE POLE DENTED, TO PROVIDE LABOUR TO PULL IT BACK WITH REPAIR WORK.		0.00
7	TOTAL LABOUR FOR REAR DECK	3600	5040.00

LABOUR TOTAL :	9,620.00
SUB-TOTAL :	25,232.02
GST @ 9% for \$ 25,232.02	2,270.88
GRAND TOTAL (S\$) :	27,502.90



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Attn.	: AMENCIA	Policy No.	: BVFCSB0006702419
Office / Mobile	:	Claim Type	: TP CLAIM - ECICS INSURANCE
Email / Fax No.	: Amencia@goldbell.com.sg	Workshop	: 8 TUAS AVE 18

PREPARED BY : AMENCIA

DATE / TIME : 05/11/24

SURVEYOR : PASUL

MOBILE NO : 96010068

OFFICE FAX NO :

EMAIL ADDRESS :

EXCESS AMOUNT :

REPAIR TYPE : PART-BY-PART / LUMP SUM

AUTHORISATION : AUTHORISED / NOT AUTHORISED

RE-SURVEY : BEFORE PAINT / AFTER PAINT

NO. OF DAYS :

REMARKS :

Res after repair

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:



AIRMAN



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 First Submission	08/10/2024 10:25 (SGT)
Reported by	Actual Driver
Date of Accident	04/10/2024 16:25 (SGT)
Exact Location of Accident	Balestier Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XD4671G

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COCA-COLA SINGAPORE BEVERAGES PTE. LTD.
Company Reg No	1XXXXX877H
Email Address	sudesh.krishnannair@coca-cola.com.sg
Mobile Phone No	(Phone) +65-91851443
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Man
Model	Tgm
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	Auto
CC	6871
Vehicle Fuel	-
First Registration Date	01/12/2010
Chassis no	WMAN08ZZ7AY244448
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Allied World Assurance Company, Ltd
Policy Number / Cover Note Number	BVFCBS0006702419

DRIVER

Name of Driver	VIJAYAN A/L SUPRAMANIAM
Passport No/FIN	GXXXX090L
Date Of Birth	08/10/1980
Occupation	Outdoor
Driving Pass Date	07/03/2022
Driving License Pass Class	4
Driving License Validity	Valid
Driving experience	2 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82145211
Alt. Phone Number	-
Email Address	vijayan1440@gmail.com
Address	457 JLN AHMAD IBRAHIM
Address complement	-
Postcode	639933
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
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	-

PASSENGER 1

Name	LEE
Gender	Male

PASSENGER 2

Name	TAN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Toa Payoh Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002519999
Alt. Police Station Phone No	(Fax) +65-63548749
Police Station Address	93 Toa Payoh Central Toa Payoh Community Building #01-02 Singapore 319194
Was notice of intended Prosecution given?	No
If yes against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE POLICE REPORT.

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?

Yes
Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKB1018C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLM9867X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKB1018C
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

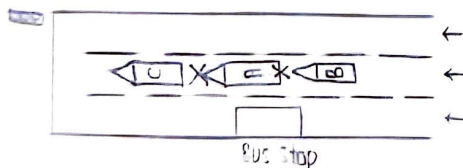
IMPORTANT NOTICE

- ### 8. Consent under the Personal Data Protection Act (PDPA)

(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.

[illegible]

C-GLM9867X



Describe Circumstances of the Accident

Refer to the police report.

I _____ (Owner/Driver), Identification No. _____, Vehicle No. _____
will be sending the above stated damaged vehicle to _____ (Company Name) for my
vehicle repair works and insurance claims. Goldbell Engineering Pte Ltd "GBE" had clearly informed me on new GIA rules and
I accept all liabilities and discharged GBE.

Declaration

(We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel



[Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Owner ID:

Company

877H

Vehicle Details

Vehicle No.:

XD4671G

Vehicle to be Exported:

No

Intended Deregistration Date:

08 Oct 2024

Vehicle Make:

MAN

Vehicle Model:

TGM 18.280 4X2 BB

Primary Colour:

Red

Manufacturing Year:

2010

Engine No.:

21825185452520

Chassis No.:

WMAN08ZZ7AY244448

Maximum Power Output:

-

Open Market Value:

\$106,880.00

Original Registration Date:

01 Dec 2010

First Registration Date:

01 Dec 2010

Transfer Count:

0

Actual ARF Paid:

\$5,344.00

Intended PARF Rebate Details

PARF Eligibility:

No

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Expiry Date:

31 Oct 2025

COE Category:

C - Goods Vehicle & Bus

COE Period(Years):

5

PQP Paid:

\$12,728.00

COE Rebate Amount:

\$2,702.00

Total Rebate Amount:

\$2,702.00

Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 08 Oct 2024

OK