

AUTO BULLOX PTE LTD

53 Ubi Avenue 1 #01-25 Paya Ubi Industrial Park S(408934)
Tel: 6844 4290 Mobile: 9769 9299 E-Mail: autobullox@gmail.com
Business Reg No: 201919765N

To: Motor Claims Department

Date: 4/11/2024

Vehicle No: GBG9158J

Model: Toyota Hiace

Estimated Repair Cost For GBG9158E

QTY		Amount
1	Rear bumper / BR	\$ 986.70 645 /
1	Rear bumper side retainer n/s / BR	\$ 42.00 /
1	Rear bumper brackets n/s X nn	\$ 38.00
1set	Rear bumper clips set / MC	\$ 48.00 30 /
1	Taillamp n/s / nn	\$ 496.70 385 /
1	Rear side panel n/s X / DD	\$ 1,708.50 /
1	Rear side panel mud flap n/s X nn	\$ 186.50
1	Rear rim n/s X nn	\$ 480.60
1	Rear suspension n/s X nn	\$ 320.50
1	Rear wheel bearing n/s X nn	\$ 296.80
1	Rear axle X nn	\$ 1,796.80
1	Sliding door n/s / DD	\$ 1,468.70 /
1set	Sliding door rubber n/s X nn	\$ 284.60
1	Sliding door bottom latch n/s X nn	\$ 296.70
1	Sliding door top latch n/s X nn	\$ 198.70
1set	Sliding door center latch n/s X nn	\$ 175.60
1	Sliding door inner lock n/s ?	\$ 495.60
1	Sliding door rail n/s X nn	\$ 255.60
1	Rocker panel n/s X nn	\$ 1,068.50
Tailbp lower cover LH / BR \$49		
Parts Sum:		\$ 10,645.10
Parts Less 25%:		\$ (2,661.28)
Parts Total:		\$ 7,983.82

Special Nett Items

1	Rear side panel sealant / MC	\$ 55.00 30
1	Rear side panel advertisement sticker / MC	\$ 200.00 /
1	Rocker panel sealant X	\$ 55.00 30
1	Sliding door panel sealant / MC	\$ 55.00
1	Sliding door panel advertisement sticker / MC	\$ 500.00 400 /
1set	Wheel cap set (Rear LH) / nn	\$ 480.00
1	Rear tyre n/s X	\$ 450.00
Special Nett Items Total:		\$ 1,795.00

Labour & Misc Charges

Description	Amount
Labour to remove, renew & align affected accident damaged area @ \$300.00 per day.	\$ 1,500.00 800
Labour to spray painting on affected damage area @ \$300.00 per panel.	\$ 1,500.00 800
To conduct rust proofing on affected panels	\$ 100.00 30
To remove, renew & install sliding door components to facilitate repairs	\$ 150.00 50
To conduct all wheel alignment	\$ 150.00 80
To remove, renew & install rear undercarriage components to facilitate repairs	\$ 300.00 X
To remove & Install reverse sensor and to align the same to specification	\$ 150.00 30
To remove & installed all electrical wiring to facilitate repairs	\$ 80.00 30
To conduct water seepage test	\$ 250.00 X
Labour Charges Total:	\$ 4,180.00

Steve CLKK)

11/11/24, 3:30pm

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8 days

Parts Total: \$ 7,983.82
 Special Nett Items Total: \$ 1,795.00
 Labour Charges Total: \$ 4,180.00
Total Cost Of Repair: \$ 13,958.82
 (Non-Inclusive of GST)

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:

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	22/10/2024 16:19 (SGT)
Reported by	Actual Driver
Date of Accident	21/10/2024 14:50 (SGT)
Exact Location of Accident	333 Orchard Rd, Singapore 238867
Additional Location Information	HILTON HOTEL COMPOUND
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG9158J
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LIAN NAM HENG MARKETING PTE LTD
Company Reg No	199905651Z
Email Address	contact@lnhenterprise.com
Mobile Phone No	(Phone) +65-64449745
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	2982
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00025202406

DRIVER

Name of Driver	YAP LENG CHOON
NRIC No	S0265648E
Date Of Birth	05/09/1947
Occupation	Outdoor
Driving Pass Date	17/03/1971
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	53 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-64449745
Alt. Phone Number	-
Email Address	autobullox@gmail.com
Address	BLK 13 UPPER BOON KENG ROAD #03-947
Address complement	-
Postcode	380013
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 - Major/Minor Rd
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

PLEASE REFER TO SKETCH PLAN (TYPE OF COLLISION IS HEAD TO SIDE)

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	SLG5833B
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN POH HENG
NRIC No	S1360002C
Contact Number	(Phone) +65-98774918
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.



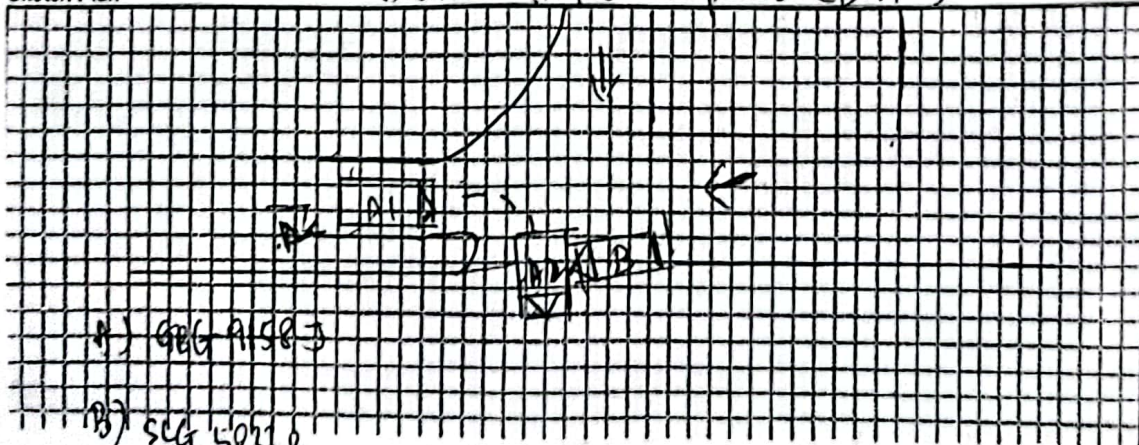
Policyholder's Signature / Date & Time

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

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

Sketch Plan

HILTON Hotel Compound (EXIT)



Describe Circumstance of the Accident

在21/10/2024下午1450HRS 我公司的Van G869158T
在送貨之後在Hillman Hotel出口處 (Loading & unloading)
Exit 4 的地方要在轉去Orchard Link 的方向 忽然
間我感覺到我的Van被撞到車的左側這車在
側和旁邊有受損 對方的車牌是SLG5833B Honda

Declaration

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

Policyholder's Signature / Date & Time

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

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