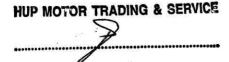
哈汽車貿易服務

HUP MOTOR TRADING & SERVICE

Blk 9004 Tampines Street 93 #01-120 Singapore 528838 Tel: 6784 0039 Fax: 6784 0076 Email: hupmotor@gmail.com Reg. No. 378091/00W

TP 2923/09/18 Date: 18th September 2018 Your Ref: HARMONY FURNISHING PTE. LTD. 15. SENANG CRESCENT. SINGAPORE 416588 Estimate cost of repair to TOYOTA HIACE VAN TURBO - GBH 4889 K 1 pc rear bumper 539.30 6 pcs rear bumper top clips @ \$ 3.80 22.80 6 pcs rear bumper top clips stopper @ \$ 4.20 25.20 2 pcs rear bumper o/s & n/s side bracket @ \$ 40.70 81.40 4 pcs rear bumper o/s & n/s side bracket clips @ \$ 3.80 15.20 4 pcs rear bumper o/s & n/s low bracket @ \$ 29.40 117.60 4 pcs rear bumper o/s & n/s low bracket clips @ \$ 3.80 15.20 1 pc rear bumper beam 197.00 1 set rear bumper reverse sensor 285.00 1 pc rear end panel 328.00 1 pc tail gate door 'TOYOTA' emblem sticker 45.90 1 pc tail gate door 'HIACE' emblem sticker 46.60 19.50 1 pc tail gate door '70km/h' sticker 1,738.70 Less 25% 434.68 \$ 1,304.02 To wiring check up 30.00 To remove & refix carpet, floor mat, garnish, floor board cover, spare tyre, carrier & necessary parts, to enable repair rear end panel, tail gate door & necessary parts. 120.00 To respray Tuff-Kote on all affected accident parts. 60.00 Labour charge to remove & cut out damaged parts, to jack, straighten & knocking out rear end panel, tail gate door & necessary parts, to weld. renew & align above parts. 600.00 To putty & respray painting on all affected accident parts. 850.00 \$ 2,964.02

Dollars: Two Thousand Nine Hundred Sixty Four And Cents Two Only.





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No:

GR-18-143840

Date of Request:

18/09/2018

Your Ref No:

Online Purchase

Hup Motor Trading & Service Blk 9004 Tampines Street 93

#01-120

Singapore 528838

Dear Sir/Madam,

Enquiry Date

18/09/2018

Enquiry By

David Ang Beng Yeow

TP Vunicle No.

SKX6936D

Accident Date

17/09/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKX6936D	China Taiping Insurance (Singapore) Pte. Ltd.	09/01/2018-08/01/2019	6389 6111

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-18-143840

Date of Request:

18/09/2018

Your Ref No:

Online Purchase

Hup Motor Trading & Service Blk 9004 Tampines Street 93

#01-120

Singapore 528838

Dear Sir/Madam,

Enquiry Date

18/09/2018

Enquiry By

David Ang Beng Yeow

TP Vehicle No.

SKX6936D

Accident Date

17/09/2018

DESCRIPTION	AMOUNT (S\$)	
TP Insurer Enquiry	1.87	
GST Amount	0.13	
Total Amount Due (GST Inclusive)	2.00	

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Gender

Mobile Number
Fax Number
Contact Number

EMail Address

Date Of Driving Pass Driving Experience

- 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 Authorised 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 ability.
- 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.

aforesaid.	
,	ACCIDENT STATEMENT
Date Of Report	18/09/2018 13:30
Date Of Accident	17/09/2018 11:45
Exact Location Of Accident	CHAI CHEE LANE TWDS CHAI CHEE ST
Country/State of Loss	SINGAPORE
0	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBH4889K
Insured/Policyholder	en i financia de la comeza de composito de la composito de la composito de la composito de la composito de la Carego de la composito de la c
Name Of Registered Owner	HARMONY FURNISHING PTE LTD
Co Reg No	
Email Address	NOEMAIL
Mobile Phone No	2
Alternative Phone No	OFFICE-62436137
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE L'TD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO .
Policy Number	D18MCV0000356
Cover Note Number	
Driver	
Name of Driver	TEO HOCK LAI
NRIC No	S6846851E
Date Of Birth	09/12/1968
A STATE OF THE STA	

OUTDOOR

24/05/1991

MALE

NOEMAIL

27 YEARS AND 3 MONTHS

(LOCAL) +65-90258168

Page 1 of 16

Address

BLK 82 STRATHMORE AVE #10-144

Postcode

141082

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

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 this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKX6936D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

MS OH

NRIC/Passport Number

Contact Number

83990122

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the data is of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be at truthful and accurate as possible. Any shifty misracresontation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and arceptance 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.
- The report will be forwarded by the insures of the GA Resords Management Centre established by the General insurance Association of Singapore (SIA) for archiving and that opplies of this opport will for a fee be made available upon application by interested parties.
- By the loggment of this report to the courses, you hereby consent to the archising of this report at the course of the report being made available aforesaid.
- 8 Convent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that

- (a) My mourer, my workship like it the General Insurance Association of Singaporer ("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 Suppose Singapore and day relevant government agency/authority (such as the police), for the purpose(s) of an accident source of a suppose and any relevant government agency/authority (such as the police), for the purpose(s) of an accident source of a suppose of a suppose
 - processing handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (III) 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 disclusure of certain personal data about me to bridg atout delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - .(v) complying with applicable law in administrating, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(2) who have intaged particle(a) insolved in this accident and the fraueur's lawvers/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 registance disclosed by any of the insurers and/or Gié to their third party service providers or agenta/including their lawyers/law firms), which may be sited outside of Singapore, for our ozonore of the above Purposes.
- (d) my Personal Information will also be collected and used to pempile rising history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information to collected under (d) above may be shared / disclosed.
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing freud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Timo:

Onwich Signature

(If drawer is not the policyheider)

Outr & Time: Policyheider)

H

Reporting Centre Paragravel's Signature Aprile Aprile April 1900 No. 1

Accident Sketch Plan

KETCH PLAN		
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A: 684 4819 F	C144 0422 /MA 840J 369)	
B: 5xx 63360	47 NO 70 My WAY BENNES	and the second of the second o
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DECLARATION	I De Maria Caracter de Maria	11
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Date & Time	Of driver's not the policytestates (Man Date & Time: 18/19/18	ers Çirin No.:



ACCIDENT REPORTING CENTRE & AUTHORISED WORKSHOP **HUP MOTOR TRADING & SERVICE**

BLK 9004 TAMPINES STREET 93 #01-120 SINGAPORE 528838

TEL: 67840039 (24 hrs) HP: 98154655 Email: hupmotor@gmail.com

INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Office (65) 63476100 Fax (65) 62244174

Email insure@iii.com.sg Website www.iii.com.sg

CERTIFICATE OF INSURANCE

Road Tax Expiry Date: 13/06/2019

COVER: Comprehensive

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D18MCV0000356

GBH4889K

1. Index Mark and Registration Number of Vehicle Chassis No

JTFHT02P900242961

Name of Policyholder

HARMONY FURNISHING PTE LTD

Effective date of Insurance

19 Jun 2018

4. Expiry date of Insurance

18 Jun 2019

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle-

- Limitations as to use*
 - Use in connection with the Policyholder's business.
 - Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 - Use for social, domestic and pleasure purposes.

The Policy does not cover

- Use for hire or reward or for racing, pace-making, reliability trail, or speed-testing.
- b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Excess Section 1 : SGD 600.00 Windscreen Excess: SGD 100.00

Hire Purchase Company :

Maybank

FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.

I/We HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Agent/Broker Date of Issue

: M Plus Consultancy

: 20/06/2018 14:09:47 MZ300C (GOODS CARRYING)

COMPANY

For India International Insurance Pte Ltd

R. Ravindra Kumar MD & CEO

Iris lee (MTR UW)/20/06/2018

Page 1 of 1

20/06/2018 14:10:20

Transfer Of Vehicle Ownership (Acknowledgement) Vehicle Details

Vehicle No.:

GBH4889K

Vehicle Type:

A50 - Goods (Closed) Van/Van Panel

(Delivery)

Vehicle Scheme:

Normal

Vehicle Make:

TOYOTA

Vehicle Model:

HIACE VAN TURBO 5DR MT

Chassis No.;

JTFHT02P900242961

Engine No.;

1KD2805064

Motor No.:

Trailer Chassis No.:

Propellant:

Diesel

Passenger Capacity:

Engine Capacity:

2982 cc

Power Rating:

2

Unladen Weight:

1700 kg

Maximum Laden Weight:

Secondary Colour:

Primary Colour: IU Label No.:

Silver 1043024750

Maximum Power Output:

First Registration Date:

14 Jun 2018

Original Registration Date: 14 Jun 2018

Manufacturing Year:

2018 -

Open Market Value:

\$28,138.00

2800 kg

PARF Eligibility:

No

Minimum PARF Benefit:

\$0.00

No. of Transfer:

1

Actual ARF Paid:

\$1,407.00

Owner Particulars

Owner Name:

HARMONY FURNISHING PTE LTD

Owner ID Type:

Company

Owner ID:

200507314K

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 15

Registered Street Name:

SENANG CRESCENT

Registered Unit No.:

Registered Building Name:

Registered Postal Code:

416588

COE No./Expiry Date:

2018060105000317C / 13 Jun 2028

COE Bid Category: .

C - Goods Vehicle & Bus

QP Paid:

\$29,901.00

Transaction Details

Business Transaction Ref.

20180619154058696222

Business Transaction Date: 19 Jun 2018

Business Transaction Time: 15:40:58

Message

Vehicle has been successfully transferred to HARMONY FURNISHING PTE LTD (200507314K).

Please note that \$25.00 will be deducted from your GIRO account.

OK

Save as PDF