1111 CS/ICS19007766/ Uqd312 Same of ASSIGNATIST (Office) Marius 5.53pm@ 2/5/19 Cystabelle Ton Jes Dillio Lamay North SGL 5415H GBF 86271 Insmed 2 kaki Bulut Ave 2 #01-02 9685 8843 at Work shopens! DMPC1900 119H /02/CT Pelicy bio. Claim Ho Sann branget Room 100A 30/04/2019 Make of Yehr O Bent's Broads CA / REV / REC. / REV 24 HRS H.O.D. Endorsonical Vehic Vehic Date/Times 900cm@ 3/5/19 Person Contacted Action/Instruction () (Stimule Date/Time 06/5/19@ 5.23pu newsed to Crystabelle Tan Na Meinen

OBJUSTICAL WEEK:	105/
ASS. REC. BY: MC/CLS ,	ASSIGNMENT
From: Estimated Cost: OD (TP) WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: G 37 SC 27 J	Veh No: GBF JG27 Tyr Regn: 1/7 Type: M.Car / M.Cycle / Bus / Van Kory / Taxi / Prime Mover / Truck / Trailer or M/ Make: Toyo G Dyna c.c 2982
at Workshop m/s of Insured: Policy No. Claims No. Sum Insured: Excess:	So Reading 10 17/8 T/Radio: Insured / Std / NI / NA
(Client's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection.	Brake: Inforder / Jammed / Leaked / Burnt or Modi: Nill' S/Rim / STD A/Rim or Tyre Size: F: / S
Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs:	Eront R/Bal. 6 mm R/Bal. 6 mm L/Bal. 6 mm D.O.A. 3 D/4/19 D.O.I. 2/5/18
Date / time Action / Instruction / STATE OF 2	250 Wh w. nfon (Red \$4590.60, 64%) EIVEB 8 7 MAY 2019
Date/Time, File Pass to? 1) 07/5 MMH : Final Report Date/Time, File Return to?	Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportation:
Report Format: WART	Add Fee: : Site Insp (\$)\$+RS,SI 350 [0] : Interview (\$) Photos [0] : Tech, Invs (\$) Others
Lump.Sum / I.B.d.: (\$ 0550)	: Weekend (\$)

Note: This document has not been finalised.

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

To:

ECICS Limited

10 Eunos Road 8

#09-04A Singapore Post Centre

Singapore 408600

From: LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25

Paya Ubi Industrial Park

Singapore 408933

Attn:

Date: 06 May 2019

Preliminary Advice

Insured Vehicle No : SGL5415H

TP Vehicle No

: GBF8627J

Accident Date

: 30/04/2019

Make

: TOYOTA DYNA

Assignment Date

: 06/05/2019

Date of Inspection : 02/05/2019

Est. Duration of Repair

: 4.00

Inspection At

: STYTECH AUTO PTE LTD (HQ)

2 KAKI BUKIT AVE 2 #02-30, KAKI BUKIT AUTOHUB

SINGAPORE 417921

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	7,140.60
Revised Amount	:S\$	3,217.18
Check Items (Estimated)	:S\$	0.00
Total	:S\$	3,217.18

:S\$ Lump Sum Repair

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

)	The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
V	The vehicle is uneconomical to be renaired, you are advised to invite tender for the wreck.

Other comments:

Nivitha (LKK Auto)

Crystabelle Tan Gek Peng (ECICS, Claims) < Crystabelle_Tan@ecics.com.sg> From:

Thursday, 2 May 2019 5:53 PM Sent:

assignments To:

Stytech Auto Pte Ltd RE: SURVEY INVITATION for accident on 30/04/19 Along Airport Road Towards Cc: Subject:

Eunos Road, involving vehicle GBF8627J & SGL5415H. - Ref :

DMPC1900119H/02/CT

AMEND 2.pdf Attachments:

Dear LKK

Refer to below email and arrange survey.

Best regards

Crystabelle Tan

Senior Associate | Claims



Tel (65) 6337 4779 DID (65) 6303 0190

Email crystabelle tan@ecics.com.sg Web www.ecics.com.sg

Address 10 Eunos Road 8, Singapore Post Centre, #09-04A, Singapore 408600.

From: Stytech Auto Pte Ltd [mailto:stytechent@singnet.com.sg]

Sent: Thursday, 2 May, 2019 5:48 PM

To: Crystabelle Tan Gek Peng (ECICS, Claims) Subject: RE: SURVEY INVITATION for accident on 30/04/19 Along Airport Road Towards Euros Road, involving

vehicle GBF8627J & SGL5415H. - Ref : DMPC1900119H/02/CT

Dear Crystabelle,

Please assign: LKK.

Please find the attach for the GIA report.

Thank you

Best Regards

Winston Teo

Stytech Auto Pte Ltd

Email: stytechent@singnet.com.sg | Mobile: +65 9685 8843 | Fax: +65 6445 3310 Address: 2 Kaki Bukit Ave 2 #01-02/03, Kaki Bukit Autohub, Singapore 417921



From: Stytech Auto Pte Ltd [mailto:stytechent@singnet.com.sg]

Sent: Thursday, 2 May 2019 2:45 PM

To: ECICS Claims

Subject: SURVEY INVITATION for accident on 30/04/19 Along Airport Road Towards Eunos Road, involving vehicle

GBF8627J & SGL5415H.

Dear Claims Officer

We would like to invite your surveyor to our workshop to survey our vehicle GBF8627J whom involved an accident with your insured vehicle SGL5415H.

Note: Vehicle at workshop

Location : 2 Kaki Bukit Ave 2 #01-03

Kaki Bukit Autohub S(417921)

(enter via Kaki Bukit Road 2) Heavy Vehicle Workshops

Contact Person : Mr. Winston Teo

Hp. No. 9685 8843

Kindly reply to this email or contact me at 96858843 to confirm.

Thank You

Best Regards

Winston Teo Hp 96858843

Stytech Auto Pte Ltd

2 Kaki Bukit Ave 2 #01-03

Kaki Bukit Autohub Singapore 417921

TEL: 64448125 Fax: 64453310

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This message may contain privileged and confidential information and is only intended for use by the addressee. No representation, warranty, guarantee or undertaking expressed or implied is made by ECICS Limited; as to the fairness, accuracy or completeness of any information, projections or opinions contained in this message. Any unauthorized disclosure, use or dissemination either in whole or in part is prohibited. If you are not the addressee indicated in his message (or responsible for delivery of the message to such person), you may not copy or deliver this message to anyone. In such case, you should destroy this message and kindly notify the sender by reply email. Opinions contained herein are the personal opinions of the sender and do not necessarily represent the views of ECICS Limited.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Company	
Owner ID: Vehicle Details	3585C	
Vehicle No.:	GBF8627J	
Vehicle to be Exported:	No	
Intended Deregistration Date:	02 May 2019	
Vehicle Make:	TOYOTA	
Vehicle Model:	DYNA 3.0 DIESEL TURBO M/T 2WD LO	ORRY
Primary Colour:	White	
Manufacturing Year:	2016	
Engine No.:	1KD2658076	
Chassis No.:	KDY2318027112	
Maximum Power Output:	*	
Open Market Value:	\$34,801.00	
Original Registration Date:	23 Jan 2017	
First Registration Date:	23 Jan 2017	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$1,741.00	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	5	
PARF Rebate Amount:	\$0.00	
Intended COE Rebate Details		
COE Expiry Date:	22 Jan 2027	
COE Category:	C - Goods Vehicle & Bus	
COE Period(Years):	10	
PQP Paid:	\$46,234.00	
COE Rebate Amount:	\$35,694.00	
Total Rebate Amount:	\$35,694.00	

The information contained herein is correct as at 02 May 2019

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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.

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.

ACC	DEN	TOTA	 III NIT
ACC	DEN	T STA	

Date Of Report

02/05/2019 14:09

Date Of Accident

30/04/2019 17:00

Exact Location Of Accident

AIRPORT ROAD EXIT TO EUNOS ROAD

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBF8627J

Insured/Policyholder

Country/State of Loss

Name Of Registered Owner

MH ENGINEERING PTE LTD

Co Reg No

201613585C

Email Address

MHENGRG.MHENGRG@GMAIL.COM

Mobile Phone No

(LOCAL) +65-90266709

Alternative Phone No

OFFICE-65665359

Vehicle Particulars

Manufacturer

TOYOTA

Model

DYNA

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company

ETIQA INSURANCE PTE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

CN002716

Cover Note Number

Driver

RAJENDRAN PRAKASH

Name of Driver Passport No/FIN

G6567358X

Date Of Birth

02/06/1987

Occupation

OUTDOOR

Date Of Driving Pass

03/02/2014

Driving Experience

5 YEARS AND 2 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-83430944

Fax Number

Contact Number

NOEMAIL

EMail Address

Address

C/O 1 SOON LEE STREET POINER CENTER BUILDING #06-26 S627605

Postcode

627605

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

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?

NO

Number of vehicles (including own vehicle)

involved in the accident

2 NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

NO

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)

1

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

REFER TO THE ATTACHED.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SGL5415H

Vehicle Make/Model/Colour

NIL

Details Of Properties

NIL

Vehicle Category

PRIVATE CAR

SOH CHONG ZEH

Name of Driver

Contact Number

S8361455B

NRIC/Passport Number

98524938

Address

NIL

NII

Postcode

NIL

Insurance Company Name

Nature Of Damage

NIL

No. Of Passenger (Including Driver)

1

Accident Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 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.
- 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.
- The 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.
- By the lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, 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.

Policyholdenssemeture

Driver's Signature (If driver is not the policyholder)

02/05/19

Date & Time:

Reporting Centre Personnel's Signature

Name

NRIC/FIN No.:

Accident Sketch Plan Pg. 1

TCH PLAN	25 FA ERDA DADE CHOW OF U	The state of the	
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SCRIBE CIRCUMSTANCES O	F THE ACCIDENT		
	THE SUIS STATIONARY AT THE SUIS BOAD O	E AIRPORT BOAD AND WAITING FO	R
ON THE MENTIONED DATE & TRAFFIC CLEARANCE ALONG F	TIME, I WAS STATIONARY AT THE SLIP ROAD C UNOS ROAD. WHILE I WAS WAITING, SUDDEN	ILY I FELT AN IMPACT FROM BEHING	AND
REALISED THAT MY VEHICLE V	VAS BEING HIT BY A VEHICLE (SGL5415H).		-
	tel a visió la visió de Sanci-Assentir de destre america. Esta el micro de seccionista de destre de los		
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		YOU Date of Accident	
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		12 Other Workshop	
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ECLARATION		35H02 4V	
We declare the foregoing partic	ulars are true in every respect.		
WE declared to be going partit		(8(N/)E)	
(*/200	Q wir obloshing gas pm	(6)	
(C) (C) (E)	P. my 00/05/11/9.25 pm	ams	1011/2012/09/09/09
olicyholder e Sinnature	Driver's Signature	Reporting Centre Personnel's Si	ignature
ate & Time:	(If driver is not the policyholder)	Name:	
5. 30 VT- 1 S S S S S S S S S S S S S S S S S S	Date & Time:	NRIC/FIN No.:	



MOTOR COVER NOTE

MOTOR VEHICLES (THRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 185) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1969 ROAD TRANSPORT ACT, 1967 (MALAYSIA) MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Date:11/12/2018

No:CN002716

The Insured having proposed for insurance in respect of the vehicle described below, it is hereby Held Covered according to the Company's usual policy form applicable and other terms which may be specifically agreed. This cover may be terminated by the Company in writing in which case the Company shall be entitled to charge a sum in proportion to the annual premium for the time on risk.

SCHEDULE

Insured Make & Model : MH ENGINEERING PTE LTD

: TOYOTA DYNA 3.0 DIESEL TURBO

GBF8627J

Engine No.

:1KD2658076

Rean No. Capacity

2982

Chassis No.

:KDY2318027112

Year

Cover

: Comprehensive

2017

Period of Insurance

: From 23/01/2019 to 22/01/2020

Finance / Hire Purchase: ETHOZ CAPITAL LIMITED

Remarks

I/WE HEREBY CERTIFY that this Cover Note 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).

Etiga Insurance Pte. Ltd.

Note: This Cover Note is only valid for 30 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.

Authorised Signature

IMPORTANT NOTICE

PREMIUM PAYMENT FRAMEWORK

i. For Individual Policyholders In accordance with the GIA's Code of Practice For Premium Payment, which comes into effect 1st May 2005, this Motor Cover Note issued to Individual Policyholders shall not be in force unless premium is paid in full to the Company or intermediary on or before the date of inception of this insurance, be it new or renewal.

ii. For Corporate Policyholders

This Motor Cover Note carries a Premium Payment Warranty for Corporate Policyholders, which requires the premium to be paid in full within 60 days from the date of inception of this insurance, be it new or renewal.

If this condition is not complied with then this insurance is automatically terminated immediately after the expiry of the said 60-days period and the Company shall be entitled to a pro-rata time on risk premium subject to a minimum of S\$25.00 + GST.

Policy Owners' Protection Scheme

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact us or visit the General Insurance Association (GIA) or SDIC websites (www.gia.org.sg or www.sdic.org.sg).

Any information collected or held by us whether contained in your application or otherwise obtained may be used and / or disclosed to our associated individuals / companies or any independent third parties (within or outside Singapore) for any matters relating to your application, any policy issued and to provide advice or information concerning products and services which we believe may be of interest to you and to communicate with you for any purpose. Your data may also be used for audit, business analysis and reinsurance purposes.

Etiga Insurance Pte. Ltd. (Company Reg. No. 201331905K) One Raffles Quay #22-01 North Tower Singapore 048583 T: +65 6336 0477 F: +65 6339 2109 www.etiqa.com.sg



INTERVIEW FORM

Name (Driver)	•	RAJENDRAN PRAKASH
Policy No	1,	CN002716
Vehicle No	1	GBF8627J
Place of Accident	:	AIRPORT ROAD EXIT TO EUNOS ROAD
Insured Driver's relationship	with Insured:	EMPLOYEE
Drink Driving of Insured an	d/or Insured Driver:	· NO
No of passenger(s) in Insure	ed vehicle :	1 (INCL. DRIVER)
Injury to Insured and/or Insu	red driver, please indicat	e which hospital:
		NO
Third Party Vehicle No (if a	uny) :	SGL5415H
No of passenger(s) in I'hird	Party Vehicle :	1 (INCL. DRIVER)
Injury to Third Party driver		ΝO
Type of collision and the e		ages to all vehicles/Third Party property involved:
Any witness to the accident	t (if yes, please Indicate N	Name, Contact No and a copy of the statement):
		NO
Traffic Police report (enclo	osed) :	
Please obtain a copy of worker is involved) Drive (Name, Signature I, affirmed lie above in my best knowledge	2. vit 02/05/19	Attended by (Name & Signature) / Date Workshop Name: Kan Fork Sing

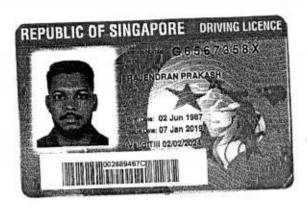
Etiga Insurance Pte Lle One Raffles Quay #22-01 Horth Tower Singapore 048583

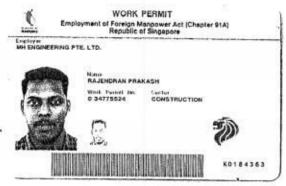
T +65 63360477 F +65 63392109

www.etilqa.com.sg

Amenburat @ Maybank

NRIC & DL Pg. 1







Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: S66SS00206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No : MKFS19056572 __Vehicle Registration No: __GBF8627J G6567358X RAJENDRAN PRAKASH NRIC/FIN/Passport No : Name(as shownin NRIC) : ___ (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate _Singapore(Address 83430944 ___Mobile No.:_ Contact (Tel) Email Address ____Time of Accident : ____1700 30/04/2019 Date of Accident :_ AIRPORT ROAD EXIT TO EUNOS ROAD Place of Accident :_ Etiga Insurance Pte Ltd Insurance Company: ____ (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: TYPO ERROR: REPORTING ONLY NOT TP CLAIM Reporting Centre Personnel's Signature Policyholder / Driver's Signature Name: Date: NRIC/FINNo .:

Date:

Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580
Tel (55) 6224 0010 Fex (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: \$665500206 / GST Reg. No.: M400917735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: ___Vehicle Registration No: ___ GBF8627J Original Report No : MKFS19056572 G6567358X RAJENDRAN PRAKASH NRIC/FIN/Passport No : Name(as shown in NRIC) :_ (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate Singapore(Address Mobile No.: 90266709 Contact (Tel) **Email Address** 30/04/2019 __Time of Accident : ______ 1700 Date of Accident AIRPORT ROAD EXIT TO EUNOS ROAD Place of Accident : Etiqa Insurance Pte Ltd Insurance Company: (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: TYPO ERROR: SHOULD BE TP CLAIM Reporting Centre Personnel's Signature Policyholder / Driver's Signature Name: Date: NRIC/FINNo .:

Date:

GIARMC addendumform , V3

Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

01 May 2019 / 13:02:54

Receipt Date/Time: 01 May 2019 / 13:02:54

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190501-000748

Previous Receipt No. :

Previo	ous Receipt No. :			92423	720
S/N	TO THE STATE OF THE PROPERTY OF THE STATE OF		Amount Before	GST Amount	Amount After GST
	Business Transaction Reference No.		GST (S\$)	(S\$)	(S\$)
Resu	It of Insurance Enquiry - SGL5415H				
As at	30 Apr 2019/17:00:00				
Insur	ance Co: ECICS LIMITED				
1	Insurance Enquiry - SGL5415H Enquiry Fee 20190501130134519834		7.00	0.49	7.49
		Sub-Total	7.00	0.49	7.49
		Total Before Rounding	7.00	0.49	7.49
		Rounding Difference			0.04
		Total Amount Payable			7.45
		Paid By			
		xxxxxxxxxxxxx6242	Credit Card: Visa/MasterCard		7.45
		Total			7.45
		Cash Change			0.00
		Tendered Amount			7.45
		Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

1/1

Make & Model:
Hoy, Chassis No:

Vehicle:

GBF8627J

Toyota Dyna

		10			
S/N	Parts/Labour	QTY	Unit Price	Price	Recommend
1	Rear Tailgate			\$ 1,317.00	1X
2	Rear Tailgate Locking Device (Left & Right)	2	\$ 172.50	\$ 345.00	1X
3	"70 KM/H" Sticker			\$ 15 SN	M 105.
4	"13 Pax" Pax Sticker			\$ 15 SN	mu 105.2
5	Dyna" Sticker			\$ 40.00 SN	ru - s.
6	Company Sticker & Biz Safe Sticker			\$ 200.00 SN	ner S.
7	Rear Tail lamp (Left & Right)	2	\$ 281.90	\$ 563.80	Asing lec
8	Rear Tail Lamp Panel (Left & Right)	2	\$ 284.50	\$ 569.00	MS4 1/c
9	Rear Tail Lamp Reflector (Left & Right)	2	\$ 89.50	\$ 179.00	Mira irc
10	Rear Deck Reflector (Left & Right)	2	\$ 181.90	\$ 363.80	Asong Ipe
11	Rear End Deck Step Panel			\$ 300.00 SN	Bel -
12	Rear Number Plate With Casing			\$ 45.00 SN	SA 405.
13	Rear End Deck Panel 665.10		657	\$ 1,218.00	m -
14	Rear Toolbox Assy	5	5	\$ 350.00 SN	Bed 320
				70	P-402-9
					252
			2	19	11777
				5.1	- 920.03 - 1170.00
				[ah	
					3217.17
					2573.73

	Labour	
1	Remove & Refix Rear Tailgate checker plate	\$ 100.00 11 X
2	Check Wiring	\$ 100.00
3	Anti Rust Proofing	\$ 120.00 50
4	Panel Beating	\$ 700.00 600 \$ 600.00 500
5	Paintwork	\$ 600.00 500
		//76

7140.60

LECC A JOST Construit als denote notify this Promise of the Ellip wing:

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• This party covers is to a thirting Projection basis

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• Me along rowers is to a thirting

• Supplementary (1970) imput to resource yell and is subject to finite Suprementary from Insurance Company

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LKK Auto Consultants Pte Ltd (Co.Reg.No.199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/ICS19007766/UQD3N2

Date:

08/05/2019

REFERENCE

Handling Insurer:

ECICS Limited

Policy No:

Claimant

GBF8627J

Insured Vehicle No :

SGL5415H

Vehicle No : Date of Loss:

30/04/2019

Nature of Claim:

TP

Claim No:

DMPC1900119H/CT

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

GBF8627J

Make & Model:

TOYOTA DYNA, 3.0 D (M) 23/01/2017 (Man. Year: 2016)

Engine No: Chassis No: 1KD2658076 KDY2318027112

Reg. Date: Colour:

White 2982 cc Odometer:

101719 km

Engine Capacity: Market Value/New Car

Price:

N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

No Pre-accident Condition:

165

CONDITION OF TYRES

Front Tyre Size:

195 R15

Rear Tyre Size:

155 R13 (D)

Front Left Side: Front Right Side:

Yokohama 6 mm

Rear Left Side: Rear Right Side:

Yokohama 6/6 mm

Front Right Side: Yokohama 6 mm
The above values represent the remaining tyre treads depth

Yokohama 6/6 mm

COST OF CLAIMS Parts Miscellaneous Items		Repairer's 5,520.60 0.00	Adjuster's 2,047.17 0.00	Difference 3,473.43 0.00	Diff % 62.92
Labour		1,620.00	1,170.00	450.00	27.78
Paintwork Labour		0.00	0.00	0.00	520:35:52
Towing		0.00	0.00	0.00	
	Calculated Gross Total (S\$)	7,140.60	3,217.17	3,923.43	54.95
	Approved Total (Overridden) (S\$)		2,550.00		
	Nett Amount (S\$)	7,140.60	2,550.00	4,590.60	64.29

INSPECTION

Date of Assignment:

02/05/2019

Date Inspected:

02/05/2019 Inspected At:

Stytech Auto Pte Ltd (HQ)

2 Kaki Bukit Ave 2 #02-30, Kaki Bukit

Autohub

Singapore 417921

Estimated Period of Repair:

4.0 days

Adjuster: MARCUS CHUA

Manager: SHIAU CHAN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Referen	ce				
Part Source:		(Last Synchronised: 08 May 2019)			
Parts:	N/A	TOYOTA DYNA 3.0 D (M) (Model not available in database)			
Labour:	Repairer's	(Price-denominated Standard List)			
Print Code:	(Unsubmitted, no print-code for GBF8627J)				
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page				
Further Info	: Items/values n	ot in reference catalogue are prefixed with an asterisk *.			

Recommend	led	Parts
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No.	Qty	Part No.	. Particulars	Condition	Repairer's	Amount
1	1		*REAR TAILGATE	Repair	1,317.00 F	*-FL
2	1		*REAR END DECK PANEL	Bent	1,218.00 F	*665.10 FL
3	1		*70 KM/H STICKER	Necessary	15.00 FS	*10.00 FS
4	1		*13 PAX PAX STICKER	Necessary	15.00 FS	*10.00 FS
5	1		*DYNA STICKER	Necessary	40.00 FS	*40.00 FS
6	1		*COMPANY STICKER & BIZ SAFE STICKER	Necessary	200.00 FS	*200.00 FS
7	1		*REAR END DECK STEP PANEL	Bent	300.00 FS	*300.00 FS
8	1		*REAR NUMBER PLATE WITH CASING	Bent	45.00 FS	*40.00 FS
9	1		*REAR TOOLBOX ASSY	Bent	350.00 FS	*320.00 FS
10	2		*REAR TAILGATE LOCKING DEVICE (LEFT & RIGHT)	Repair	345.00 F	*- FL
11	1		*REAR TAIL LAMP PANEL (LEFT & RIGHT)	N/s Bent	569.00 F	*284.50 FL
12	1		*REAR TAIL LAMP (LEFT & RIGHT)	N/s Cracked	563.80 F	*281.90 FL
13	1		*REAR TAIL LAMP REFLECTOR (LEFT & RIGHT)	N/s Cracked	179.00 F	*89.50 FL
14	1		*REAR DECK REFLECTOR (LEFT & RIGHT)	N/s Cracked	363.80 F	*181.90 FL
F=Fra	anchise	part. S=Spc	Nett. L=ListItemDisc.			
				Sub Total (S\$)	5,520.60	2,422.90
			- List Item Discount on L Items 0.	00/25.00% (S\$)	0.00	375.73
			т	otal Parts (S\$)	5,520.60	2,047.17
						and the second second

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	REMOVE & REFIX REAR TAILGATE CHECKER PLATE.	New	100.00	0.00
2	CHECK WIRING.	New	100.00	20.00
3	ANTI RUST PROOFING.	New	120.00	50.00
4	PANEL BEATING.	New	700.00	600.00
5	PAINTWORK.	New	600.00	500.00
	Gross Labor	ur Cost (S\$)	1,620.00	1,170.00
	Report was unsubmitted duri	ing this print-out		

< END OF ESTIMATES >