REF: CS/ Ex119019852/TIV d3 WE 2023 OUE. 48B24695 Yr Regn: 2008, 8cl Veh No: From: Estimated Cost: Truck / Trailer or OD / P /WS / TP RES / OD RES / EVA / INV / MV 2982 To Inspect Vehicle No: Make: Insured / Std / NI / NA at Workshop m/s Colour T/Radio: Insured / Std / NI / NA Sp.Reading Insured: Eng/No: Policy No. C/No: Claims No. Steering: Inorder / Jammed / Leaked / Burnt or Excess: Sum Insured: Brake: Inorder Jammed / Leaked / Burnt or (Client's Record) Modl: NII ISTRIM I STD A/Rim or Make of Veh: Tyre Size: (Policy Condition) Remark: The veh had commenced its OIS BS DUN / EXNOVA / GY / FS / L repair at the time of inspection. TOYO / YOKO or Bal. or Market Value: Front Rear Consistent?: Yes or No R/Bal. IDAC Accident Roort: UBal. Consistent?: Yes or No rnm GIA / PR Seen: D.O.I. D.O.A. 14/10/2019 Res.: Yes or No Est Repairs: days 3 Val.: Yes or No Survey held at Lum Sum: Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or CA I REV I REP. I 24 HRS Vehicle: IN / OUT Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date / Time Action / Instruction Date/Time, File Pass to? : Prell. Report Days Of Repair: 6 : Final Report Resurvey No. of Trip: Survey Fee: Date/Time, File Return to? Transportation: 2) 14/1/21-Typist Add Fee: : Site Insp _S + RS.___SI : Interview (\$ Photos Repeat ormer: Merimen :Tech. Invs 🤃 Others Lung Sun / LE.L. 1 \$1950 Weetend (6 TOTAL

Sng Ah Tee Motor & Panel Service Pte Ltd (Co.Reg.No:200810440N)

Blk 3 Pioneer Road North, #01-18

Singapore 628457

Singapore 628457
Tel: 6268 6183 Fax: 6268 1429 Email: sngahtee@singnet.com.sg;darren@sngahtee.com;janice@sngahtee.com;shirleensng@gmail.com

TP INSURER:

EQ Insurance Company Ltd (HQ)

UNKNOWN

Singapore

Claimant Insurer:

ERGO Insurance Pte. Ltd.

PARTICULARS OF CLAIM

Claim Type: Policy No:

THIRD PARTY

Ref. No:

Date of Loss: Driveable?

14/10/2019

Vehicle Reg. No.:

GBB2469J

UNKNOWN

Party At Fault: Driver (TP):

KARUNAKARA PANDIAN RAMKUMAR

Vehicle Reg. Date:

15/10/2008

Make/Model: Vehicle Colour: TOYOTA DYNA 150, 3.0 D (M) WHITE

1KD1868625

Chassis No:

JTFAT35Y20K200093

Engine No: Odometer:

10 KM

Paint Type:

Total Loss?

NO

Est. Duration of Repair (day)

Description of Accident/Loss

REFER TO SKETCH PLAN

Remarks:

VEHICLE NOT IN

Present Location:

SNG AH TEE MOTOR & PANEL SERVICE PTE LTD (PIONEER)

COST OF CLAIMS		Amount
Parts		1,446.30
Miscellaneous Items		0.00
Labour		2,080.00
Paintwork Labour		0.00
Towing		0.00
	Gross Total (S\$)	3,526.30
	+ GST 7.00% (S\$)	246.84
	Nett Amount (S\$)	3,773.14

This claim is handled by: JOYCE TAN LAI CHIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source:

(Last Synchronised: 20 Oct 2020)

Parts:

N/A

TOYOTA DYNA 150 3.0 D (M) (Model not available in database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: Sng Ah Tee Motor & Panel Service Pte Ltd/GBB2469J/20/10/2020 12:08

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 optimate page.

ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars		%Disc	%Depr	Amount
1	1		*FRT BUMPER		0.00	0.00	ργ _{*155.00} F
2	1		*FRT BUMPER H/LAMP RH		0.00	0.00	mt -*220.00 F
3	1		*FRT GRILLE		0.00	0.00	₹160.00 F
4	1		*FRT GRILLE TOP SEAL		0.00	0.00	7 *15.00 F
5	10		*FRT GRILLE CLIP		0.00	0.00	? *20.00 F
6	1		*FRT GRILLE EMBLEM		0.00	0.00	, *28.00 F
7	1		*FRT PANEL		0.00	0.00	h-€ +350.00 F
8	1		*FRT PANEL TOP CTR GARNISH		0.00	0.00	★ *120.00 F
9	1		*FRT PANEL TOP RH GARNISH		0.00	0.00	cut 1.45.00 F
10	1		*FRT CORNER PANEL RH		0.00	0.00	65.00 F
11 12	1		*FRT WINDSCREEN RUBBER		0.00	0.00	95.00 F
13	1		*ERP STICKER		0	0.00	× •26.00 FS
	nchise p	part. S=SpcNett.	*FRT DOOR ROC STICKER RH		0	0.00	20.00FS
				Sub Total (S\$)			1,319.00
				+ Margin on L,N Items 10.00% (S\$)			127.30
				Total Parts (S\$)			1,446.30

Sng Ah Tee Motor & Panel Service Pte Ltd/GBB2469J/20/10/2020 12:08. Not valid without Reference section. Generated using Merimen e-Claims IEAS

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Estimates on Labour Amount Lab.Type No Particulars Labour Items 800.00 TO KNOCK FRT DOOR RH, WELD, REMOVE & REPLACE ABOVE PARTS New 800.00 2 TO PUTTY & RESPRAY PAINTING ON FRT BUMPER, FRT PANEL, WIPER ARM COVER RH, FRT DOOR New RH & AFFECTEDS AREA. 30.00 3 TO CHECK WIRING New 180.00 4 TO REMOVE & REFIC FRT DASHBOARD New × 150.00 TO REMOVE & REFIX FRT WINDSCREEN New TO APPLY ANTI RUST COAT 30- 120.00 New 2,080.00 Gross Labour Cost (S\$)

> Sng Ah Tee Motor & Panel Service Pte Ltd/GBB2469J/20/10/2020 12:08. Not valid without Reference section. Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Tauphin 97495749 WP's Lumpsin wp' Resum after repor-

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:

> back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	310M
Vehicle Details	
Vehicle No.:	GBB2469J
Vehicle to be Exported:	No
Intended Deregistration Date:	09 Nov 2019
Vehicle Make:	TOYOTA
Vehicle Model:	DYNA 150 MANUAL 3SEATER
Primary Colour:	White
Manufacturing Year:	2008
Engine No.:	1KD1868625
Chassis No.:	JTFAT35Y20K200093
Maximum Power Output:	
Open Market Value:	\$24,243.00
Original Registration Date:	15 Oct 2008
First Registration Date:	15 Oct 2008
Transfer Count:	3
Actual ARF Paid:	\$1,213.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	14 Oct 2023
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$14,699.00
COE Rebate Amount:	\$11,553.00
Total Rebate Amount: Message	\$11,553.00

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 21 Oct 2019

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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> 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 Report
 15/10/2019 11:00

 Date Of Accident
 14/10/2019 02:00

Exact Location Of Accident INSIDE 2D JLN PAPAN AVERY LODGE

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE:

Vehicle Registration Number GBB2469J

Insured/Policyholder

Name Of Registered Owner MAXPOINT ENGINEERING PTE, LTD.

Co Reg No 201223310M

Email Address JETPOWERGANI@SINGNET.COM.SG

 Mobile Phone No
 (LOCAL) +65-82861136

 Alternative Phone No
 OFFICE-68624547

Vehicle Particulars

Manufacturer TOYOTA

Model DYNA 150-3.0 D (M)

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?

NO

If No, Please state action to be taken

ken THIRD PARTY

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company ERGO INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMCG19003602

Cover Note Number

Driver

Name of Driver KARUNAKARA PANDIAN RAMKUMAR

 NRIC No
 G2221892T

 Date Of Birth
 23/06/1994

 Occupation
 OUTDOOR

 Date Of Driving Pass
 08/10/2019

Driving Experience 0 YEAR AND 0 MONTH

Gender MALE

Mobile Number (LOCAL) +65-93790623

Fax Number

Contact Number

EMail Address NOEMAIL

Address

7, SOON LEE STREET, #02-46, ISPACE

Postcode

627608

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

CHAIN COLLISION

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

3

Was any body injured in the Accident?

NO

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)

NO

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

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 SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

Vehicle Registration Number

YN5354B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

DETAILS OF OTHER VEHICLE PROPERTY:1

Name of Driver

ZHANG HUA

NRIC/Passport Number

G6573751K

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GBD770R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

COMMERCIAL VEHICLE

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.
- 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.
- Any false reporting may be referred to the Police for investigation.
- 6. 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
- 7. 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:

- 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)
 - (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.
- (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:
 - (i) 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.

TEL: 6352 454

Policyholder's Signature Date & Time:

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

Date & Time:

Reporting Centre Personnel's Signature NRIC/FIN No .:

I AM AWARED THAT MY IN SURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY, I WILL CHECK MY POLICY FOR MORE DETAILS.

Refer to attachment

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT	
On 14/10/219	at 0200 hrs. My lehicle	stationary of 20 Jln Papan,
Avery Lodge At a	accident time. I'm not a	t the scene. Around 5 am,
when I collect	my whide - I notice that	my whicle had damage.
Driver of Mehica	le c infrom me that is Ve	hicle B come out from the
place and hit o	nto my vehicle and also	he vehicle.
		Claim own policy Claim third party Claim OD / TP at other works hop For record purpose
ECLARATION We declare the foregoing partic	culars are true in every respect.	Policy No DM C G19003602 Insurer Ego Ven No GBB FGJ
hicyholderis Sygnature ste & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name:

