

(08/11/13) wef

ASS. REQ. BY *Marius*

REF:

CS/CT120005238/USF3

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

(Client's Record)

Make of Veh:

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Rpt:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Date / Time Action / Instruction

20/4/20 1/5 27720 4000 conf. and with air way

Veh No:

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

Truck / Trailer or

Make:

Colour

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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?

1)

Date/Time, File Return to?

2)

Report Format:

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

☐

: Preli. Report

☐

: Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

) \$ + RS. SI

) Photos

) Others

TOTAL

FOCUS AUTO PTE LTD
 NO. 1 KAKI BUKIT AVENUE 6 #02-48/50
 AUTOBAY @ KAKI BUKIT SINGAPORE 417883
 TEL: 6886 9097 FAX: 6844 4625 Email: claims@focusauto.com.sg
 GST:201004495R RCB NO:201004495R

Not Approved
1/s @ 4000
16/4/20 4 days
The phl. Affair repair

M/S : CHINA TAIPING INSURANCE

Estimate No: M00148
Date: 15-Apr-20
Veh Reg No : GBG2023K

ATTN: Motor Claim Department
Your Ref No: GBG2023K
Claim Type: THIRD PARTY CLAIM
Accident Date: : 14/04/20

Make/Model: TOYOTA LITEACE
Chassis No: S402M0065152
Engine No: 3SZDGC3038
Reg. Date :28/06/2017

Estimate Repair Cost to Vehicle No : GBG2023K

PAGE:1/2

S/N	Description	Quantity	Unit	Price	Amount
	<u>LIST PRICE</u>			<u>SS</u>	<u>SS</u>
1	Rear <i>70lgate</i> <i>1125.20</i>	1 <i>DD</i>	PCS	1546.20	1546.20 ✓
2	Rear Boot Rubber	1 <i>8u</i>	PCS	276.20	276.20 X
3	Rear Boot Lock	1 <i>11</i>	PCS	302.40	302.40 X
4	Rear Boot Emblem (DX)	1 <i>neu</i>	PCS	22.40	22.40 ✓
5	Rear Windscreen	<i>shattered</i>	PCS	1246.40	1246.40 ✓
6	Rear Windscreen Inner Strip <i>199.50</i>	1 <i>neu</i>	PCS	290.20	290.20 ✓
7	Rear End Panel	1 <i>DD</i>	PCS	467.60	467.60 ✓
8	Rear Bumper	1 <i>DD</i>	PCS	587.20	587.20 ✓
9	Rear Bumper Towing Cover <i>30.00</i>	1 <i>neu</i>	PCS	60.20	60.20 ✓
10	Rear TailLamp - RH <i>295.50</i>	1 <i>neu</i>	PCS	398.40	398.40 ✓
TOTAL				5197.20	5197.20
Less 25%				3897.90	3897.90

SPECIAL NETT PRICE

1	Rear Boot Sticker (70km/hr)	1 <i>neu</i>	PCS	15.00	15.00 10
2	Rear Boot Sticker (6pax)	1 <i>neu</i>	PCS	15.00	15.00 10
3	Rear Windscreen Gum	1 <i>neu</i>	PCS	80.00	80.00 40
4	Rear Windscreen V-Cool Frame	1 <i>neu</i>	PCS	250.00	250.00 200
5	Rear Camera video cam	1 <i>neu</i>	PCS	450.00	450.00 420
TOTAL				810.00	810.00

FOCUS AUTO PTE LTD
NO. 1 KAKI BUKIT AVENUE 6 #02-48/50
AUTOBAY @ KAKI BUKIT SINGAPORE 417883
TEL: 6886 9097 FAX: 6844 4625 Email: claims@focusauto.com.sg
GST:201004495R RCB NO:201004495R

M/S : CHINA TAIPING INSURANCE

ATTN: Motor Claim Department
Your Ref No: **GBG2023K**
Claim Type: **THIRD PARTY CLAIM**
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PAGE:2/2

S/N	Description	Quantity	Unit	Price	Amount
	<u>LABOUR CHARGES</u>			<u>SS</u>	<u>SS</u>
6	Panel Beating				850.00 680
7	Check Wiring				60.00 20
8	Rust Proofing				60.00 50
9	To Remove & Replace Rear Windscreen				160.00 100
10	To Spray Paint				800.00 500
				TOTAL	1930.00
				OVERALL TOTAL	6637.90

FOR FOCUS AUTO PTE LTD

AUTHORISE SIGNATURE

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:

P- 3973.80
252
P- 2980.35
S.N- 680.00
L- 1350.00
5010.35
227
4028.

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 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 Report	15/04/2020 14:54
Date Of Accident	14/04/2020 15:40
Exact Location Of Accident	ENTERING CTE/SLE TOWARDS ANG MO KIO
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG2023K
Insured/Policyholder	
Name Of Registered Owner	TIAN TIAN HOLDINGS PTE LTD
Co Reg No	2XXXXX074W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-69081979

Vehicle Particulars

Manufacturer	TOYOTA
Model	LITE ACE
Exact Purpose for which vehicle was being used at time of accident	WORK
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3037371900
Cover Note Number	

Driver

Name of Driver	TEO EE LING, VIVIAN
NRIC No	SXXXX440B
Date Of Birth	14/02/1987
Occupation	INDOOR
Date Of Driving Pass	10/07/2007
Driving Experience	12 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96690105
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 470A UPPER SERANGOON CRESCENT #17-318
Postcode	531470
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?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	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)	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

ON 14/04/2020 AT ABOUT 1540HRS, I WAS DRIVING MY VEHICLE (GBG2023K) ALONG AT ENTERING CTE/SLE TOWARDS ANG MO KIO. I WAS AT FILTER LANE WAITING FOR THE ROAD TO CLEAR AND SUDDENLY I HAD AN IMPACT FROM THE BACK. I WENT OUT FROM MY VEHICLE AND REALISED VEHICLE B (GBD3766J) HAD HIT MY VEHICLE FROM THE BACK. MY VEHICLE IS BADLY DAMAGED AT THE BACK DUE TO THIS ACCIDENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD3766J
Vehicle Make/Model/Colour	TOYOTA DYNA
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YEO BOON CHAI
NRIC/Passport Number	SXXXX881B
Contact Number	96798518
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

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 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.
5. 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 interested parties.
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:

- (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
- (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 (c) 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.


Policyholder's Signature
Date & Time: 19/4/2020

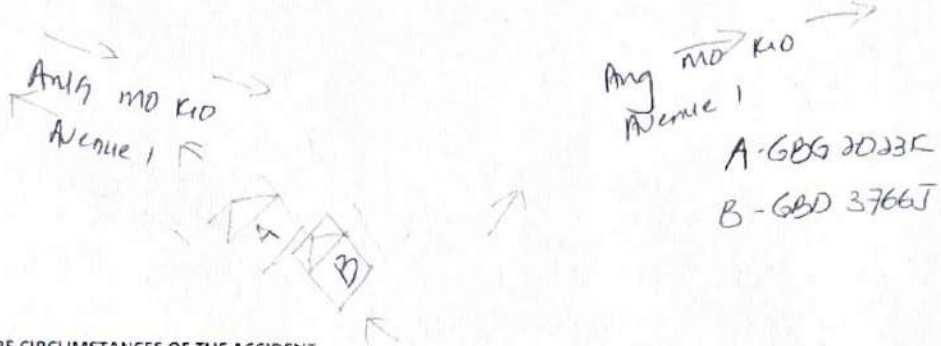



Driver's Signature
(If driver is not the policyholder)
Date & Time: 19/4/2020


Reporting Centre Person's Signature
Name: _____

Sketch Plan #2

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On 14/04/20 at abt 1540hrs I was driving my vehicle (GBG 2023K) along at entering CTE/SEE towards Ang mo Kio I was at filter lane waiting for the road to clear and suddenly I had an impact from the back I went out from my vehicle and realised Vehicle B (GBD 3766J) had hit my vehicle from the back. My vehicle is badly damage at the back due to this accident.

DECLARATION

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


Policyholder's Signature




Driver's Signature


Reporting Centre Personnel's Signature

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Excellent
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Rotor



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Toyota Liteace

[Advanced Search](#)

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Toyota Liteace		Any	Any	2018	Any	Any	Any	Available
	Toyota Liteace	1.5A GL	\$42,800	\$5,420 /yr	06-Mar-2018	1,495 cc	24,832 km	Van	Available
Fuel Type: Petrol									
03/2018 Toyota Liteace 1.5 GL Auto, Well Kept By Previous Owner, Fast Loan Approval, View To Believe!									
Think One Automobile & Trading									
Posted: 10-Mar-2020 Tags: Toyota Townace, 2018 Toyota Liteace, Toyota Liteace, Toyota, Liteace									

[Save this search criteria, to get email alerts whenever a match is found.](#)

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
For old advertisements, view Expired ads									
20 results/page									

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

074W

Vehicle Details

Vehicle No.:

GBG2023K

Vehicle to be Exported:

No

Intended Deregistration Date:

15 Apr 2020

Vehicle Make:

TOYOTA

Vehicle Model:

LITEACE DX 1.5 AUTO

Primary Colour:

Silver

Manufacturing Year:

2017

Engine No.:

3SZDGC3038

Chassis No.:

S402M0065152

Maximum Power Output:

-

Open Market Value:

\$20,950.00

Original Registration Date:

28 Jun 2017

First Registration Date:

28 Jun 2017

Transfer Count:

0

Actual ARF Paid:

\$1,048.00

Intended PARF Rebate Details

PARF Eligibility:

No

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Expiry Date:

27 Jun 2027

COE Category:

C - Goods Vehicle & Bus

COE Period(Years):

10

QP Paid:

\$38,501.00

COE Rebate Amount:

\$27,720.00

Total Rebate Amount:

\$27,720.00

The information contained herein is correct as at 15 Apr 2020

OK