ASS. REG. BY: CASUL REF: CS/LPC &	0006461/Rigf3 1 614H
	IGNMENT
From: Date:	Veh No: GBF 8402R Yr Regn: 2017 / MARK
Estimated Cost:	Type: M.Car / M.Cycle / Bus / War / Lorry / Taxi / Prime Mover /
OD TTP I WS I TP RES I OD RES I EVA I INV I MV	Truck / Trailer or
To Inspect Vehicle No: GBF 8462R	Make: FLAT DOBLO CAPHO MAKI 1.6 cc 1898
at Workshop m/s Goud Bell	Colour GREY A/C: Insured / Std / NI / NA
of 8, Twas are 18	Sp.Reading /09642 T/Radio: Insured / Std / NI / NA
Insured: AIG	Eng/No:
Policy No.	C/No: ZFA 263 0000 6037806
Claims No. 20/20/VC00/023414	Gen. Cond: Good / Pal / Poor / Burnt
Sum Insured: Excess: TBA	Steering: Inorder Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi : Nil' / S/Rim / STD A/Rim or
many of 19th	Tyre Size: F: 265 SSR16
(Policy Condition)	R: 703[70
Remark: The veh had commenced its N/S O/S	4
repair at the time of inspection.	TOYO/YOKO or
liol.	
Bal. or Market Value: 40K	- - - - - - - - - -
IDAC Accident Rport: Consistent?: Yes or No	1.001
GIA / PR Seen:Consistent? : Yes or No	
Est Repairs: 4 days Res.: Yes or No	
Lum Sum: % · 3 Val.: Yes or No	Survey held at GOLDHKU
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OU Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	The O/O / Chassis traine / Body Structure allected due to complete.
03/07/20@11.07am revert to Gerald Poh by	email
03/07/20@12.17pm Ong Li Li informed C/A if	
03/07/20@12.30pm informed Goldbell C/A or	
8/08/20@11.07am Rasul finalised with Brian	
· ·	
Dale/Time, File Pass to? : Preli. Report	Days Of Repair: 4
1)18/08 Typist : Final Report	Resurvey No. of Trip: 1 Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add F	
	: Interview (\$) Photos
Representate OD	: Tech. Invs (\$) Others
Lump Sum (1.8.1.4 3650)	:Weelend (\$
7	AND ADDRESS OF THE PARTY OF THE
	TOTAL



To

MOTORVIVA PTE LTD

Main Office: 8 Tuas Ave 18 Singapore 638892 Tel: 6665 2518 Finance: 8 Tuas Ave 18 Singapore 638892 Tel: 6861 0007 Fax: 6862 3500 Showroom, 21 Toh Guan Road East #01-15 Toh Guan Centre Singapore 608609 Tel: 6665 2518 Fax: 6561 7956 Iveco: 8 Tuas Ave 18 Singapore 638892 Tel: 6863 6864 Fax: 6861 3676 Website: www.motorviva.com.sg

Co Reg No. 199507614Z

Page

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-	-		-			•		_

19/06/2020 Reg No Date : GBF8402R

LONPAC INSURANCE BHD. Model 263.216.1 (695 GREY

METALLIC)

Chassis No Attn. ZFA26300006D37804

Engine No Office / Mobile 263A50007728721

Quotation No. **Email Address** : 112364

Ref. No. : GBE/SVC/SALES-5060/200619 MOTORVIVA PTE LTD D.O.A. From 17/06/2020

ENGKWOKLONG Policy No. : Z/20/VC00/106593 Attn. Office / Mobile : **Claim Type** +65 6864 0637 : OD CLAIMS - LONPAC

EngKwokLong@goldbell.com.sq Workshop 8 TUAS AVE 18 Email / Fax No. :

S/N Part No	Description	Qty	U/Price	<u>%</u>	Net Price	Ext Price
1	BONNET 🗡	1	1,067.55	0	1,067.55	1,067.55
2	BONNET, HINGE -RH 🗡	1	101.84	0	101.84	101.84
3	HEADLAMP RHS 60 /	1	1,021.15	0	1,021.15	1,021.15
4	RADIATOR GRILLE X	1	812.00	0	812.00	812.00
5	FRONT BUMPER, TOP de-	1	898.08	0	898.08	898.08
6	FRONT BUMPER, LOWER 🗡	1	766.08	0	766.08	766.08
7	BUMPER BRACKET RHS	1	35.30	0	35.30	35.30
8	BUMPER BRACKET LHS >	1	35.30	0	35.30	35.30
9	ORNAMENT, BUMPER RHS X	1	78.73	0	78.73	78.73
10	FRONT FENDER RHS bue	1	298.80	0	298.80	298.80
11	FR MUDGUARD PROTECTION - RH TGEN	1	274.61	0	274.61	274.61
12	END PLATE RHS (HEADLAMP) X	1	262.56	0	262.56	262.56
13	MOULDING, FT PILLAR -RH X	1	120.08	0	120.08	120.08
14	BOXED PANEL X	1	318.23	0	318.23	318.23
		PARTS	TOTAL:			6,090.31

LABOUR CHARGES		

SUNDRIES 1 TO CHECK FOR AND RECTIFY WIRING 2

FAULTS, TO CONDUCT DIAGNOSTICSCHECK(NETT)

3 TO REMOVE AND REFIX DAMAGED PARTS, CUT, WELD, PANEL

BEAT, STRAIGHTEN & REALIGN, ETC.

TO PUTTY, CLEAN, SPRAY PAINT AND

POLISH, ETC

LABOUR TOTAL:	4,460.00		

SUB-TOTAL: 10,550.31

GST @ 7% for \$ 10,550.31 738.52

GRAND TOTAL (S\$): 11,288.83









30 80.00 /20 180.00 /200 2600.00 700 1600.00



MOTORVIVA PTE LTD

Main Office 8 Tuas Ave 18 Singapore 638892 Tel: 6665 2518 Finance 8 Tuas Ave 18 Singapore 638892 Tel: 6861 0007 Fax 6862 3500 Showroom: 21 Toh Guan Road East #01-15 Toh Guan Centre Singapore 608609 Tel: 6665 2518 Fax: 6561 7956 Iveco 8 Tuas Ave 18 Singapore 638892 Tel. 6863 6864 Fax: 6861 3676 Website: www.motorviva.com.sq Co Reg No 1995076142

Page

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ESTIMATE

19/06/2020

LONPAC INSURANCE BHD.

: MOTORVIVA PTE LTD

: ENGKWOKLONG

Reg No

: GBF8402R

Model

263.216.1 (695 GREY

METALLIC)

Chassis No

ZFA26300006D37804

Engine No

: 263A50007728721

Quotation No.

: 112364

Ref. No.

GBE/SVC/SALES-5060/200619

D.O.A.

: 17/06/2020

Policy No.

: Z/20/VC00/106593 OD CLAIMS - LONPAC

Claim Type Workshop

: 8 TUAS AVE 18

Office / Mobile

Email Address

From

Attn.

Email / Fax No. : EngKwokLong@goldbell.com.sg

PREPARED BY : ENGKWOKLONG

Office / Mobile : +65 6864 0637

DATE / TIME : 02/07/2020 P 1050

SURVEYOR : RAW

MOBILE NO : 900(0068

OFFICE FAX NO : _

EMAIL ADDRESS : MSW @ IKK mb. um

EXCESS AMOUNT : __

REPAIR TYPE :

PART-BY-PART (LUMPSUM

AUTHORISATION:

AUTHORISED / NOT AUTHORISED REVENT

RE-SURVEY:

BEFORE PAINT / AFTER PAIN

NO. OF DAYS : _____

REMARKS :

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:



IVECO







MCHM20052392 / Cheng Hoe Motor Pie Ltd - Yishun ENTRY SATE & TIME: 18/06/2020 14:03 SUBMATTED BY: SHARON CHIONG BENG CHOON

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 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

ACCIDENT: STATEMENT

Date Of Report

18/06/2020 14:03

Date Of Accident

17/06/2020 20:00

Exact Location Of Accident

CHOA CHU KANG RD & CHOA CHU KANG WAY JUNCTION

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBF8402R

Insured/Policyholder

Name Of Registered Owner

CHANG CHENG MEE WAH PTE LTD

Co Reg No

Email Address

NOEMAIL

Mobile Phone No

Alternative Phone No

OFFICE-65015285

Vehicle Particulars

Manufacturer

FIAT

Model

DOBLO CARGO MAXI-1.6 D MTJ AMT GLAZE (M)

Exact Purpose for which vehicle was being used at

time of accident

COMMERCIAL USE

Are you claiming under your own insurance policy

for repair to your vehicle?

YES

If No, Please state action to be taken

Vehicle Category

COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company

LONPAC INSURANCE BHD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

Z/20/VC00/106593

Cover Note Number

23/03/20 - 22/03/21

Driver

Name of Driver

SEAH XIAO WEI JIMMY

NRIC No

SXXXX700H

Date Of Birth

18/09/1984

Occupation

OUTDOOR

Date Of Driving Pass

26/02/2009

Driving Experience

11 YEARS AND 3 MONTHS

Gender

Mobile Number

(LOCAL) +65-81631477

Fax Number

Contact Number

EMail Address

SEAHXIAOWEI@GMAIL.COM

BLK 214 MARSILING LANE #12-806

730214

fiver an employee of the Insured's Company YES

Relationship of the Driver with the Insured

icle Registration Number of Driver's Own

hicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident? N

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

REFER TO ATTACH. * OD CLAIM BY AGENT WORKSHOP *

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

MARKET SHOW MARKET TO SERVE

SGS9613P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NG CHIEW HOON

NRIC/Passport Number

SXXXX706I

Contact Number

91540187

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

VEHICLE NO .: GBF 8402 R
INSURER : Longas
DATE & TIME: 1716 29 8pm

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.
- 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.
- 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)

Lenderstand, 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 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.

Policyholder's Signature Date & Time:

e filed that have a se

Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personne's Signature

Name:

ARIC/FIN No.:

KETCH PLAN	1 1 1	
ALBERENOZR DO		CHOR CHU LANG W
8 5659613P 91540187 19 Chien Hoon 169287061 11100000 (8100k)		>
91540187	3700	
My chiew Hoon 3	_	
69287061		
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ESCRIBE CIRCUMSTANCES O	F THE ACCIDENT	. +1
5-45 Ann-1990 (1995 AN Fine Original Columbia)		
Ins: Lunpac	Veh No. EBF8402R	20A-17 6 20 Spm
Refer statement a	ttached.	
	3	
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Note: Please note that you		you to submit an Own Damage C
	ur insurer may have 14days Time Frame for	
under your own com		
under your own com	ur insurer may have 14days Time Frame for aprehensive policy. Please check with your p	
under your own com	ur insurer may have 14days Time Frame for aprehensive policy. Please check with your p	
under your own com	ur insurer may have 14days Time Frame for aprehensive policy. Please check with your p	
Under your own com DECLARATION I/We declare the foregoing partie	ar insurer may have 14days Time Frame for aprehensive policy. Please chack with your poulars are true in every respect.	colicy for more information.
under your own com	ur insurer may have 14days Time Frame for aprehensive policy. Please check with your p	policy for more information.

Sketch Plan #3

Accident happened on 17/6/20 at around 8pm. I was driving along Choa Chu Kang Road towards Bukit Batok Road at juction of Choa Chu Kang Way making a right turn. The traffic light was green. Traffic condition is normal, weather was wet.

I was about to make a right turn, I proceeded to check oneoming traffic and check blind spot and proceeded with the turn.

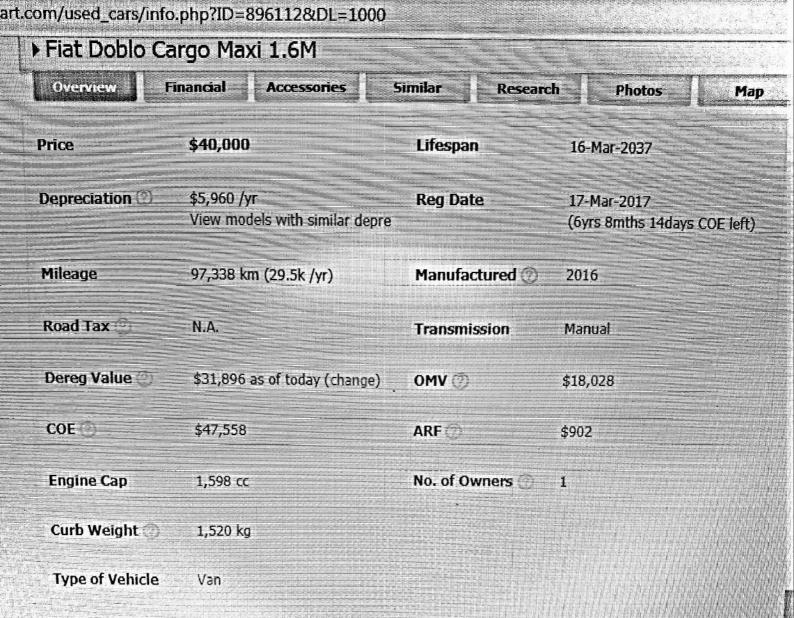
Halfway through the turn, the car (SGS9613P) in front of me jammed brake and came to a sudden complete stop. I have no choice but to steer to my left to avoid collision. However, as the reaction distant was too short, my right front collided with the car's left back.

While these are happening, I had noticed a bicycle had dashed across the zebra crossing and across the blinking green man therefore causing SGS9613P to jam brake.

I have an in-car video recorder.

18/08/5050

😝 Used 2017 Fiat Doblo Cargo Max 🗴



Features

The Rear Space Is Huge And Can Carry An Enormous Load Especially Boxy Objects. The Engine Is Very Torquey And Has Great Pulling Power. View specs of the Fiat Professional Doblo Cargo (2014)

Description

Can Negotiation.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	6141
Vehicle No.	GBF8402R
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Jul 2020
Vehicle Make:	FIAT
Vehicle Model:	DOBLO CARGO MAXI 1.6 MTJ AMT GLAZE
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No:	263A50007728721
Chassis No.:	ZFA26300006D37804
Maximum Power Output:	
Open Market Value:	\$18,800.00
Original Registration Date:	23 Mar 2017
First Registration Date:	23 Mar 2017
Transfer Count:	O
Actual ARF Paid:	\$940.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	The state of the s
PARF Rebate Amount:	\$0.00
·····································	
COE Expiry Date:	22 Mar 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$49,810.00
COE Rebate Amount:	\$33,474.00
Total Rebate Amount:	\$33,474.00
he information contained herein is correct as at 02 Jul 2020	