

ASS. REC. BY: JamesREF: CS/CTI 20008709/R113

628C

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

☒ OD / TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: GBJ 7880Dat Workshop m/s GOLDBALLof 8 M 18 TMS MCInsured: CTI

Policy No. _____

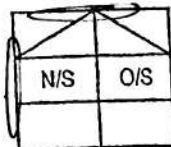
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 62K

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / ☒ REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: GBJ 7880D Yr Regn: 2019 / Aug

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

Truck / Trailer or _____

Make: TOYOTA HIACE DX 2.8A c.c. 2754Colour: Grey A/C: Insured / Std / NI / NA

Sp. Reading: _____ T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: GDH2011023962

Gen. Cond: Good / Fair / Poor / Burnt

Steering: ☒ Order / Jammed / Leaked / Burnt orBrake: ☒ Order / Jammed / Leaked / Burnt orMod: ☒ Nil / S/Rim / STD A/Rim orTyre Size: F: 195/60R15

R: _____

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

TOYO / YOKO or _____

Front

R/Bal. 6 mmL/Bal. 6 mmD.O.A. 16/08/2020Survey held at GOLDBALLDes. of Damages ☒ Fnt / ☒ Rear / O/S / ☒ N/S / U/C / Rooftop or

Rear

R/Bal. 6 mmL/Bal. 6 mmD.O.I. 20/08/2020

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

Repair limit 38K

Date/Time, File Pass to?

☐ : Prel. Report☐ : Final Report1) _____
Date/Time, File Return to?

2) _____

Report Format: _____

Lump Sum / I.B.F. (\$) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS. SI

Photos

Others

TOTAL



GOLDBELL ENGINEERING

Industrial Vehicles.
20,000 Served. And Counting.

GOLDBELL ENGINEERING PTE LTD

10 Tuas Avenue 18 Singapore 638894

Tel: +65 6861 0007 Fax: +65 6861 3676 (Sales)

Fax: +65 6863 0425 (Service) +65 6862 1347 (Parts)

Website: www.goldbell.com.sg

Co. Reg No. 198003963G

INSURER: China Taiping Insurance (Singapore) Pte. Ltd. (HQ)

PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	GBJ7880D
Policy No:	DMCVSN1933811900	Date of Loss:	16/08/2020
Vehicle Reg. No.:	GBJ7880D	Driveable?	
Driver Age/Info:	42 / MALE	Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	AJI STAR		
Driver:	KARUPPIAH SIVAMUTHU		

Make/Model:	TOYOTA HIACE, 2.8 D (A)	Vehicle Reg. Date:	27/08/2019
Vehicle Colour:	SILVER		
Engine No:	1GD8416914	Chassis No:	GDH2011023962
Odometer:	0 KM		

Paint Type:
Total Loss? **NO**
Est. Duration of Repair (day) 50

Description of Accident/Loss: REFER TO THE CIRCUMSTANCES.

Remarks: VEHICLE CURRENT AT GOLDBELL HQ 8 TUAS AVE 18 -VEHICLE CANNOT IGNITION ON

Present Location: GOLDBELL ENGINEERING PTE LTD (TUAS)

COST OF CLAIMS

	Amount
Parts	47,296.25
Miscellaneous Items	1,500.00
Labour	0.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	48,796.25
+ GST 7.00% (S\$)	3,415.74
Nett Amount (S\$)	52,211.99

This claim is handled by: BRIAN ENG KWOK LONG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

PAIR DETAILS

Reference

Part Source: (Last Synchronised: 19 Aug 2020)
 Parts: N/A TOYOTA HIACE 2.8 D (A) (Model not available in database)
 Labour: Repairer's (Price-denominated Standard List)
 Print Code: Goldbell Engineering Pte Ltd/GBJ7880D/19/08/2020 12:25
 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 not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*WIPER PANEL <i>ad</i> ✓	0.00	0.00	*412.50 F
2	1		*FRONT PANEL <i>bt</i> ✓	0.00	0.00	*262.50 F
3	1		*TOYOTA FRONT PANEL EMBLEM <i>ne</i> ✓	0.00	0.00	*37.50 F
4	2		*FRONT PANEL HINGE <i>X</i>	0.00	0.00	*70.00 F
5	2		*CORNEL PANEL <i>bt</i> ✓	0.00	0.00	*150.00 F
6	1		*FRONT GRILLE TOP <i>MIS</i> ✓	0.00	0.00	*100.00 F
7	1		*FRONT GRILLE LOWER <i>MIS</i> ✓	0.00	0.00	*137.50 F
8	1		*FRONT GRILLE BASE ?	0.00	0.00	*187.50 F
9	1		*FRONT GRILLE SENSOR (KIV) <i>MIS</i> ✓	0.00	0.00	*-F
10	1		*FRONT BUMPER <i>turn</i> ✓	0.00	0.00	*206.25 F
11	1		*FRONT BUMPER, GRILLE (BLACK) <i>ad</i> ✓	0.00	0.00	*75.00 F
12	1		*FRONT BUMPER REINFORCEMENT LOWER <i>bt</i> ✓	0.00	0.00	*143.75 F
13	1		*FRONT BUMPER REINFORCEMENT CENTER (KIV) <i>bt</i> ✓	0.00	0.00	*-F
14	<i>21pc</i>		*FRONT BUMPER FOG LAMP COVER <i>LH - MIS</i> ✓	0.00	0.00	*87.50 F
15	1		*AIR CLEANER BOX ?	0.00	0.00	*375.00 F
16	1		*LH DOOR SIDE MIRROR ASSY <i>bro</i> ✓	0.00	0.00	*312.50 F
17	1		*LH UNDERVIEW MIRROR <i>bro</i> ✓	0.00	0.00	*87.50 F
18	1		*LH DOOR <i>bt</i> ✓	0.00	0.00	*687.50 F
19	2		*LH DOOR HINGE <i>bt</i> ✓	0.00	0.00	*87.50 F
20	1		*LH A PILLAR <i>bt</i> ✓	0.00	0.00	*225.00 F
21	1		*LH DOOR STEP GARNISH <i>de</i> ✓	0.00	0.00	*68.75 F
22	1		*FRONT STEP PANEL (KIV) <i>bt</i> ✓	0.00	0.00	*-F
23	1		*FRONT PILLAR STEP PANEL PILLAR (KIV) <i>bt</i> ✓	0.00	0.00	*-F
24	1		*LH SLIDING DOOR <i>bt</i> ✓	0.00	0.00	*750.00 F
25	1		*FUEL FILLER CAP (KIV) <i>sur</i> ✓	0.00	0.00	*-F
26	1		*AIRBAG (DRIVER) (KIV) <i>MG</i> ✓	0.00	0.00	*-F
27	1		*STEERING WHEEL (KIV) <i>turn</i> ✓	0.00	0.00	*-F
28	1		*GEAR BOX TRANSMISSION ASSY <i>ca / photo?</i>	0.00	0.00	*35,625.00 F
29	1		*FUEL TANK (KIV) <i>bt</i> ✓	0.00	0.00	*-F
30	2		*FUEL TANK BAND (KIV) <i>ne</i> ✓	0.00	0.00	*-F
31	1		*UNDERNEATH COVER <i>ca</i> ✓	0.00	0.00	*225.00 F
32	1		*DASHBOARD (LH) COVER <i>ca</i> ✓	0.00	0.00	*150.00 F
33	<i>21pc</i>		*REAR SUSPENSION ABSORBER <i>bt</i> ✓	0.00	0.00	*125.00 F
34	1		*REAR SUSPENSION SEAT SUB ASSY U BOLT, LH (KIV) <i>bt</i> ✓	0.00	0.00	*-F
35	1		*POWER STEERING RACK (KIV) ?	0.00	0.00	*-F
36	1		*LH FRONT DOOR ENTRANCE COVER (KIV) <i>MG</i> ✓	0.00	0.00	*125.00 F
37	2		*HEADLAMP HOLDER <i>X</i>	0.00	0.00	*37.50 F
38	1		*LH WIRING HARNESS (KIV) <i>ad</i> ✓	0.00	0.00	*-F
39	1		*ADBLUE TANK (KIV) <i>turn</i> ✓	0.00	0.00	*-F

Goldbell Engineering Pte Ltd/GBJ7880D/19/08/2020 12:25. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRclaim&fuseaction=gen_docview&caseid=951986&doctype=REPEST&corole=1&C... 2/5

Modi: Nil / 8/Rim / STD A/Rim

Qty	Part No.	Particulars	%Disc	%Depr	Amount
1		*RR LH FENDER (KIV) <i>bue /</i>	0.00	0.00	*- F
1		*RR BUMPER <i>Torn /</i>	0.00	0.00	*187.50 F
2		*RR BUMPER RETAINER <i>2 GAX ?</i>	0.00	0.00	*37.50 F
1		*RR BUMPER STEP REINFORCEMENT ?	0.00	0.00	*125.00 F
4		*WHEEL CAP <i>MCS /</i>	0.00	0.00	*300.00 F
4		*WHEEL RIM (KIV) <i>bt /</i>	0.00	0.00	*- F
2		*FRONT UPPER ARM ?	0.00	0.00	*125.00 F
2		*FRONT LOWER ARM (KIV) ?	0.00	0.00	*- F
1		*TAILGATE <i>bt /</i>	0.00	0.00	*812.50 F
2		*TAILGATE ABSORBER (KIV) <i>X</i>	0.00	0.00	*- F
2		*RR TAIL LAMP <i>ca /</i>	0.00	0.00	*237.50 F
2		*RR TAIL LAMP LOWER GARNISH (KIV) <i>ca /</i>	0.00	0.00	*- F
2		*RR TAIL LAMP LOWER GARNISH BRACKET <i>ca /</i>	0.00	0.00	*45.00 F
1		*FRONT SUPPORT WITH REINFORCEMENT <i>bt /</i>	0.00	0.00	*237.50 F
1		*FRONT SUPPORT WITH REINFORCEMENT LOWER ?	0.00	0.00	*187.50 F
1		*RADIATOR <i>bt /</i>	0.00	0.00	*737.50 F
1		*TURBO INTERCOOLER <i>bt ?</i>	0.00	0.00	*575.00 F
1		*A/C CONDENSER (KIV) <i>bt /</i>	0.00	0.00	*- F
1		*BRAKE BOOSTER ?	0.00	0.00	*612.50 F
1		*BRAKE MASTER CYLINDER <i>ca /</i>	0.00	0.00	*375.00 F
1		*RADIATOR SUPPORT (LOWER) <i>bt /</i>	0.00	0.00	*75.00 F
1		*ROOF PANEL (KIV) <i>bt repair</i>	0.00	0.00	*- F
2		*ROOF TOP MOULDING COVER (KIV) <i>MY /</i>	0.00	0.00	*- F
1		*REAR TAILGATE TOYOTA EMBLEM (KIV) <i>re /</i>	0.00	0.00	*- F
2		*FRONT HEADLAMP <i>bro /</i>	0.00	0.00	*1,875.00 F

F=Franchise part.

Total Parts (\$\$)

47,296.25

IDAC Accident No. :

TOYO / YOKO or .

...SILIZATMIK/OHTSU/PIR/SUMI/

Description

TO REMOVE AND REFIX DAMAGED PARTS, CUT, WELD, PANEL BEAT, STRAIGHTEN & REALIGN, ETC.

TO REMOVE/INSTALL RADIATOR/INTERCOOLER TO ASSIST REPAIR

TO REMOVE/INSTALL/TRANSFER INTERIOR ALUMINIUM SHEET TO ASSIST REPAIR

TO REMOVE AND INSTALL GEARBOX ASSY / FUEL TANK

TO REALIGN/REMOVE/INSTALL REAR LEAF SPRING/ ABSORBER

TO REMOVE/INSTALL FRONT UPPER ARM AND LOWER ARM ASSY (LEFT/RIGHT)

TO REMOVE AND INSTALL POWER STEERING RACK

SUNDRIES

TO TRANSFER FRONT DOOR COMPARTMENT/WINDOW GLASS/REGULATOR/LOCK MECHANISM, ETC

TO TRANSFER SLIDING DOOR COMPARTMENT/WINDOW GLASS/REGULATOR/LOCK MECHANISM, ETC

TO TRANSFER REAR DOOR COMPARTMENT/WINDOW GLASS/REGULATOR/LOCK MECHANISM, ETC

TO REMOVE AND INSTALL 4 TYRE AND WHEEL BALANCING. TO CHECK CONDITION

TO CARRY OUT WHEEL ALIGNMENT

TO REMOVE & REFIX BRAKE BOOSTER/MASTER CYLINDER AND PIPE ASSY AND TO CHECK FUNCTION

TO REMOVE AND REFIT LH DOOR/SLIDING DOOR/TAILGATE

TO CHECK FOR AND RECTIFY WIRING FAULTS, TO CONDUCT DIAGNOSTIC SCHECK

TO REMOVE AND REFIX FRONT DASHBOARD

TO REMOVE AND REFIX AIRCON SYSTEM AND TOP UP GAS. TO CHECK FUNCTION

TO APPLY TUFF COAT

TO APPLY UNDERCARRIAGE ANTI RUST PROOFING

TO REMOVE AND REFIX FRONT WINDSCREEN

TO REMOVE AND REFIX FRONT DASHBOARD

TO PUTTY, CLEAN, SPRAY PAINT AND POLISH, ETC

Amount

~~2300~~ 2300

~~2600~~ 2200

~~500~~ 200

~~1000~~ 500

~~1000~~ 400

~~800~~ 150

~~600~~ 200 7.1pc

~~200~~ 200

~~80~~ 30

~~300~~ 100

~~300~~ 100

~~300~~ 100

~~200~~ 150

75

~~300~~ 150

400 X

~~125~~ 100

~~220~~ 150

~~180~~ 150

~~180~~ 100

150 X

300 X

~~1250~~ 1700

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:

Paul

HP 90010068

20 days

L/S or p/p?

20/08/2020 @ 1530

EXCESS: TBA

RECENT

Reay Ltd or after repair

C

Su

(C

Make



24 Hours Towing Services

Efficient Towing Services

403 Sin Ming Avenue #13-207, Sin Ming Garden, Singapore 570403

Ah Di Mobile: 8588 8877

Email: efficienttowing.sg@gmail.com

Business Reg. No: 53349344K

bizSAFE₃

NO. 54885

CASH SALE / JOB ORDER

Date: 16/8/2020

Messrs: C464
 车牌 Vehicle No: 4153 788105 车型 Model No: Toyota Hiace
 时间 (日/夜) Time (day/night): 3-20pm 联络号码 Contact No:
 由 Location: Tuas South Boulevard
 到 To: 8 Tuas Ave 18
 银额 Cash S: 270 其他 Others:
 经手人 Authorised By: DL Tow Truck Driver Name: Hock
 \$150
 winching \$120

- ☐ Jump Start Changing of battery
- ☐ Tyre Replacement
- ☒ Accident Breakdown
- ☐ Multi Basement
- ☐ With Load Cargo Box
- ☒ King Dolly
- ☐ Transport Charge
- ☐ Low Body Kit
- ☐ Door Opening Service
- ☒ Crane Up/Winch Out
- ☐ Collect Doc Key
- ☐ Repo
- ☐ Woodlands and Tuas Checkpoint

注意 本公司所拖之车辆, 在進行中如有任何损失或破坏, 一概由车主自行负责

Note Vehicle is towed at owner's risk. The company accepts no responsibility for damages or other misdemeanour to your vehicle whilst being towed

F. & O. E.

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	17/08/2020 11:00
Date Of Accident	16/08/2020 08:05
Exact Location Of Accident	MPA TUAS PORT DEVELOPMENT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ7880D
Insured/Policyholder	
Name Of Registered Owner	AJI STAR
Co Reg No	5XXXX628C
Email Address	KARAIMUTHU2006@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-83118478

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-2.8 D (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSE

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

Vehicle Category	GOODS VEHICLE
------------------	---------------

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1933811900
Cover Note Number	

Driver

Name of Driver	KARUPPIAH SIVAMUTHU
NRIC No	SXXXX274A
Date Of Birth	05/04/1978
Occupation	OUTDOOR
Date Of Driving Pass	09/11/2015
Driving Experience	4 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90617815
Fax Number	
Contact Number	
E Mail Address	KARAIMUTHU2006@GMAIL.COM

Address	BLK 922 JURONG WEST ST 92
	#08-45
Postcode	640922
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PROPERTY
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
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) 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 CIRCUMSTANCES.

Attachment(s)

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

Sketch Plan Pg. 1

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:

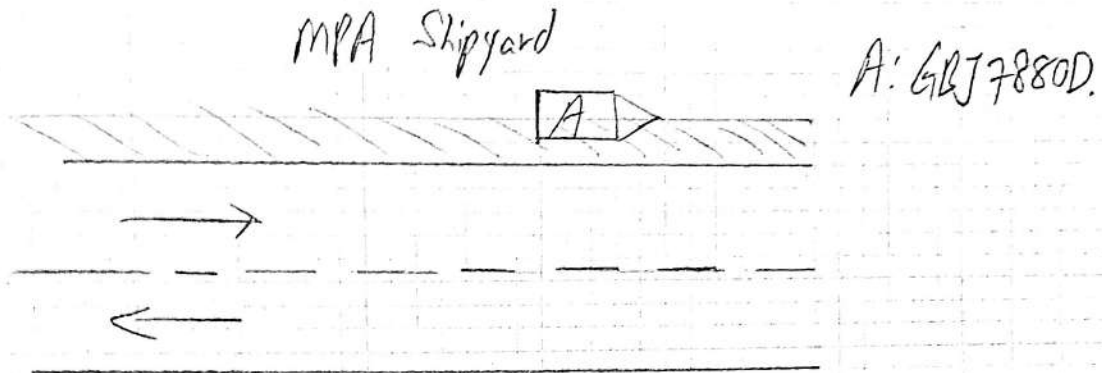
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 (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.


Policyholder's Signature
Date & Time:


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


Reporting Centre Personnel's Signature
Name: ENG Kwook Long
NRIC/FIN No.: G2381879K

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

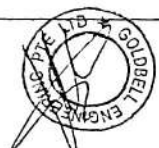
When I drive van for food delivery to MPA Mega Shipyard. Suddenly animal cross the road so I apply break due to heavy rain it was slippery and hit the lamp post & van was struck inside the drainage area.

DECLARATION

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


Policyholder's Signature
Date & Time: 09/06/2015


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


Reporting Centre Personnel's Signature
Name: Ema Kwok Lora
NRIC/FIN No.: G2381879K

ACCIDENT REPORT FORM (PENTA OCEAN)



On 10/10/80, a small motorboat was seen
 moving due to strong wind when a heavy
 rain was falling. A boat was seen to be
 in the water and to have been damaged. The
 boat was seen to be moving in the
 direction of the shore.

Witness: [Signature]

[Signature]

(Name of witness)

10/10/80

8:00 AM

Address: [Address]
 City: [City]
 State: [State]

Signature: [Signature]

Police and Marine Officer on duty

1. Name of the patient: Mr. J. H. Smith
 2. Age: 45 years
 3. Sex: Male
 4. Date of admission: 10/10/22
 5. Referring physician: Dr. J. H. Smith
 6. Address: 123 Main St., New York City
 7. Occupation: Businessman
 8. History of present illness: Onset of pain in the lower back, radiating down the right leg, 3 weeks ago. Pain is worse on standing and walking. No trauma or injury noted.
 9. Past medical history: None.
 10. Family history: None.
 11. Social history: Smokes 10 cigarettes daily. Drinks 2 glasses of wine daily.
 12. Physical examination: Normal.
 13. Laboratory and diagnostic studies: None.
 14. Diagnosis: Lumbar spondylosis with sciatica.
 15. Treatment: Physical therapy, analgesics, and bed rest.
 16. Prognosis: Good.
 17. Signature of physician: J. H. Smith
 18. Signature of nurse: M. J. Smith
 19. Date of discharge: 11/10/22
 20. Discharge instructions: Continue with physical therapy and analgesics. Return to work in 2 weeks.

Accident Photo



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type: Business

Owner ID: 628C

Vehicle No.: GBJ7880D

Vehicle to be Exported: No

Intended Deregistration Date: 20 Aug 2020

Vehicle Make: TOYOTA

Vehicle Model: HIACE DX 2.8 AUTO

Primary Colour: White

Manufacturing Year: 2019

Engine No.: 1GD8416914

Chassis No.: GDH2011023962

Maximum Power Output: -

Open Market Value: \$31,595.00

Original Registration Date: 27 Aug 2019

First Registration Date: 27 Aug 2019

Transfer Count: 0

Actual ARF Paid: \$1,580.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 26 Aug 2029

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 10

QP Paid: \$26,501.00

COE Rebate Amount: \$23,893.00

Total Rebate Amount: \$23,893.00

The information contained herein is correct as at 20 Aug 2020

OK

► Toyota Hiace 2.8A DX

[Overview](#)
[Financial](#)
[Accessories](#)
[Similar](#)
[Research](#)
[Photos](#)
[Map](#)



Price	\$61,333	Lifespan	24-Jul-2039
Depreciation ⓘ	\$6,870 /yr View models with similar depre	Reg Date	25-Jul-2019 (8yrs 11mths 4days COE left)
Mileage	N.A.	Manufactured ⓘ	2019
Road Tax ⓘ	N.A.	Transmission	Auto
Dereg Value ⓘ	\$22,777 as of today (change)	OMV ⓘ	\$33,521
COE ⓘ	\$25,502	ARF ⓘ	\$1,677
Engine Cap	2,754 cc	No. of Owners ⓘ	1
Curb Weight ⓘ	1,800 kg		
Type of Vehicle	Van		

Features

5 Door Auto Unit Hiace 100% Made In And Shipped In From Japan! View specs of the Toyota Hiace

Ac

