

sil

CTI

ASSIGNMENT

Date: _____
 Estimated Cost: _____
 TP / WS / TP RES / OD RES / EVA / INV / MV
 Inspect Vehicle No: _____
 Workshop n/s: **Forza Autohaus**
 Insured: _____
 Policy No: _____
 Claims No: _____
 Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____
 (Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.
 Val. or Market Value: _____
 JAC Accident Report: _____ Consistent?: Yes or No
 IA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: **2** days Res.: Yes or No
 Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT



Veh No: **GRI 4131C** Regn: **10 Apr 2019**
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: **Toyota** Hacc **2.8c 2754**
 Colour: **Silver** A/C: Insured / Std / NI / NA
 Sp Reading: **33631** T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: **BDH 2012004779**
 Gen. Cond: **Good** / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modi: **Mil** / S/Rim / STD A/Rim or
 Tyre Size: F: **195/80R15**
 R: **11**
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front R/Bal: **6** mm Rear R/Bal: **6** mm
 L/Bal: **6** mm L/Bal: **6** mm
 D.O.A. _____ D.O.I. **17-12-20**
 Survey held at: **W/S** **4:15 pm**
 Des. of Damages: **Front** / Rear / O/S / N/S / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
17/12	Finalized \$ 470 with Mike
	RED: 2044.99;81%

Date/Time. File Pass to? Preli. Report Final Report

Date/Time. File Return to? _____

Days Of Repair: **2**

Resurvey No. of Trip: _____

Ad'd Fee: Site Insp. (\$) Interview (\$) Test Drive (\$) Road Test

Survey Fee: _____
 Transportation: _____
 S-PS (\$) _____
 Flares _____
 Safety _____



FORZA AUTOHAUS PTE LTD COMPANY REG NO.: 201833292C
 GST NO.: 201833292C
 39 Woodlands Close, #01-34/35, Mega @ Woodlands,
 Singapore 737856
 +65 6278 1889 enquiry@forzaauto.sg

QUAN XING CONSTRUCTION PTE LTD
 11 UPPER BOON KENG ROAD #06-913, BOON KENG
 VILLE Singapore 380011

Contact : 8511 3295

ESTIMATE

Code : C100055
 Date in : 17/12/2020
 Vehicle Num. : GBJ4131C
 Model : TOYOTA HIACE DX 2.8 AUTO
 Chassis/Eng# : GDH2012004779/1GB8376977

Parts and Labour Assesment

Description of part	Qty	Unit Price	Amount
REAR TAILGATE <i>Repair x</i>	1	1712.45	1,712.45
REAR TAILGATE RUBBER WEATHER STRIP <i>x nn</i>	1	134.20	134.20
Subtotal before discount			1,846.65
Percentage discount 25%			461.66
Sub-total 1			1,384.99
REAR TAILGATE "8PAX" STICKER <i>= 1 me</i>	1	25.00	25.00
REAR TAILGATE 70KM/H STICKER <i>= 1 me</i>	1	25.00	25.00
REAR TAILGATE WINDSCREEN SEALANT <i>x nn</i>	1	80.00	80.00
Subtotal before discount			130.00
Percentage discount 0%			0.00
Sub-total 2			130.00
Parts-total			1,514.99

LABOUR

Description	Price
TO RE-SPRAY PAINTING ON THE CHANGE BODYPARTS, REPAIR PORTION, AND WHERE CONSISTENT TO THE ACCIDENT	<i>250</i> 500.00
TO PROVIDE LABOUR, WORKMANSHIP TO CHANGE THE ABOVE DAMAGED BODYPARTS, REPAIR, RE-ALIGN BODY STRUCTURE, BODY ALIGNMENTS AND DAMAGED CONSISTENT TO THE ACCIDENT.	<i>200</i> 500.00
Labour Total	<i>450</i> 1,000.00
Parts & Labour Total	2,514.99

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:

One Qip. 22/8/2022
Total: 470.
2 Days.
After repair photos

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 Submission	14/12/2020 13:49 (SGT)
Date of Accident	13/12/2020 06:45 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PAN ISLAND EXPRESSWAY(NEAR STEVEN ROAD)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ4131C
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	QUAN XING CONSTRUCTION PTE LTD
Company Reg No	2XXXXX073E
Email Address	s913626@gmail.com
Mobile Phone No	(Phone) +65-85113295
Alternative Phone No	+65-85113295

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	ERGO
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCG20003768
Cover Note Number	04/04/2020-03/04/2021

DRIVER

Name of Driver	LI BING XING
NRIC No	SXXXX295Z
Date Of Birth	01/10/1966
Occupation	Outdoor

Vehicle Registration Number	GBH9776U
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Commercial vehicle
Name of Driver	NG THIAM SENG
NRIC No	SXXXX531A
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

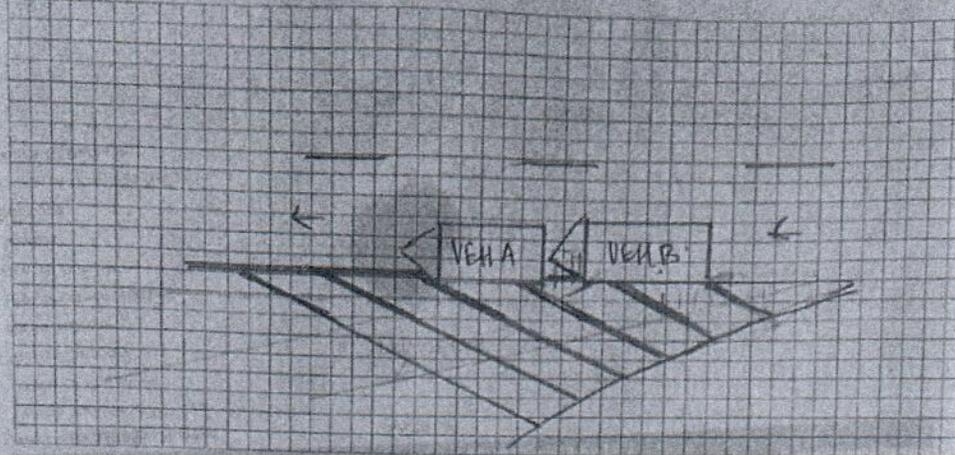
INJURED 1

Name of injured person	CHEN DE QUAN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	HEAD INJURY
Injured person in which vehicle?	GBJ4131C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	SUN YAN RAN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	HEAD INJURY
Injured person in which vehicle?	GBJ4131C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report.

T/20201213/2022.

DECLARATION

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



Policyholder's Signature
Date & Time:

[Handwritten signature]

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



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



**SINGAPORE
POLICE FORCE**



T/20201213/2028

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

1 of 4

Report No. T/20201213/2028

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/12/2020 11:46		Vide Report No.:		Station Diary No.: 27	
Informant's Particulars					
Name of Informant: LI BINGXING			Address: 2 SIMS DRIVE #12-02 SINGAPORE 387386		
ID Type / ID No.: NRIC NO / S2729295Z			Contact No.: Home/Office: Mobile: 85113295		
Nationality: CHINESE			Email:		
Sex: Male	Age: 54	Date of Birth: 01/10/1966	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Company director			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/12/2020 06:45	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBH9776U	Lorry	TOYOTA	DYNA 150 5MT	Silver	Slightly Damaged	1
GBJ4131C	Van	TOYOTA	HIACE DX 2.8 AUTO	Silver	Slightly Damaged	11
SGE7916C	Car	HONDA	JAZZ 1.4M	Silver	Slightly Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20201213/2028

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 4

Report No. T/20201213/2028

CONTINUATION OF REPORT

Brief Details.

On 13/12/2020 at around 0648hrs, I was driving my vehicle bearing GBJ4131C on lane 3 at PIE towards Jurong when I noticed a vehicle (SGE7916C) was spinning at lane 2, I immediately applied emergency brake. A few seconds later, another vehicle bearing GBH9776U collided with the rear of my vehicle. After the collision, 2 of my workers namely, SUN YANRAN and CHEN DEQUAN who were on-board my vehicle felt pain at the head area. Paramedics attended to them and conveyed them to National University Hospital. Traffic police also attended and seized the SD Card of my in-car camera.

I was then instructed by the traffic police to lodge a police report.



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No: E/2001213/079

I, Li Beng Xing / S27292952
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of 2 Sims Drive #12-02 S(577386)
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 1x SD Card S2 AB Sandisk
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____

from S/O Tan
(Name, NRIC or Passport No. / Rank and No.)

of TPHQ
(Address / Police Station / NPC / NPP)

on 13/12/2000 at 1411
(Date) (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)
[Signature]
(Signature)
[Name, NRIC or Passport No. / Rank and No.]

Received by:
[Signature]
Signature
S27292952
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: _____



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

30 km
6547 6423

Ref: Report No: E/20751213/0-79

NP 168

I, Sgt Mend
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)
of T P 12
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 One 32 GB Microsd card (Sandisk)
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____

from S27292952 Lt Sng X3
(Name, NRIC or Passport No. / Rank and No.)
of 2 Sng Dr #17-02 5 (387) 863
(Address / Police Station / NPC / NPP)
on 13/12/22 at 0116
(Date) (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

Received by:

[Signature]

[Signature]

(Signature)

Signature

S27292952
(Name, NRIC or Passport No. / Rank and No.)

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: _____

