

ACC. REC. BY:

REF:

CS/E6121000229/Rtd3

0986

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: GBG 30942at Workshop m/s MOVAof BULET MERAHInsured: E61

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.

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S

Bal. or Market Value: 44K

IDAC Accident Rpt: _____ 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 / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: GBG 30942 Yr Regn: 2017 / July

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

Truck / Trailer or

Make: NISSAN NV200 DX-2.16A c.c. 1597Colour: BLACK A/C: Insured / Std / NI / NASp. Reading: 82367 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VM20105410

Gen. Cond: Good / Fair / Poor / Burnt

Steering: ☒ Order / Jammed / Leaked / Burnt orBrake: ☒ Order / Jammed / Leaked / Burnt orModi: ☒ NII / S/Rim / STD A/Rim orTyre Size: F: 185/70R14

R: _____

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

TOYO / YOKO or GREENWAY

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 04/01/2021 D.O.I. 06/01/2021Survey held at MOVA (CBM)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

N/S FR

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

Date / Time Action / Instruction

Repair / m/s - MK\$ 1,500 / 4 days lump sum repair is confirmed
(red: 567.53; 27%)

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: 41) _____
Date/Time, File Return to?☐ : Final Report

Resurvey No. of Trip: _____

2) _____

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

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Report Format: _____

Lump Sum / L.S. (\$) 1500

MOVA Automotive Pte Ltd
Blk 1008, Bukit Merah Lane 3,
#01-04/06/08. Singapore 159722

Insurer Reference:
Repairer Reference: CK139962
Date calculated: 05/01/2021 4:22 PM

Full Report
Registration: GBG3094Z
Printed: 05/01/2021 4:22 PM

Summary Information

Claim

Location:	Singapore (SG)	Work Provider:	ERGO Insurance Pte Ltd
Printed by:	Jacelyn Ooi	Currency:	SGD
Claim Reference:		Date of Incident:	04/01/21
Estimated Repair Time:		Hire Car Start:	
Actual Repair Days:		Hire Car End:	

Vehicle Details

Vehicle

Manufacturer:	NISSAN
Model:	NV200 (M20)
Sub Model:	BASE MODEL
Model Sheet Number:	71 89 01
Registration:	GBG3094Z
VIN number:	VM20105410
Odometer:	

Model Specs

WHEELS 5.5J X 14	TRANSPORTER
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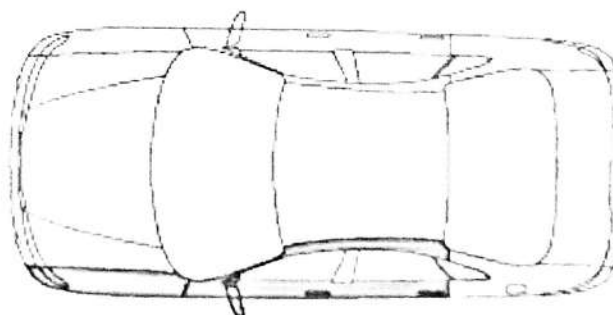
Vehicle Condition

Vehicle Status

Pre-Accident Damage:
Date of Inspection:

Damage Areas

All ☐
Underbody ☐



Labour

Time Base 10 WU/h

Price = 45.00 SGD/h

Code	Description	WU	Price SGD
NO NUMBER	JOB ALLOWANCE	5.0	22.50
2991A1	FRONT TOE ALIGNMENT	7.0	31.50
NO NUMBER	ALIGN VEHICLE FRONT	4.0	18.00
NO NUMBER	ALIGN VEHICLE REAR	3.0	13.50
1000A3	RENEW L/F WING	14.0	63.00
	INCLUDES: R + R FRONT BUMPER, RADIATOR GRILLE, BUMPER MOULDINGS, WHEELHOUSE LINER, HEADLAMP AND NECESSARY ATTACHED PARTS		
1090A3	RENEW FRONT BUMPER (BUMPER REMOVED)	1.0	4.50
	INCLUDES: R + R NECESSARY ATTACHED PARTS, RENEW IF NECESSARY		
2990A3	ADJUST HEADLAMPS	2.0	9.00
UH40A1)	R + R L/F DOOR TRIM	2.0	9.00
UJ10A1)	R + R LEFT MIRROR	1.0	4.50
UH68A1)	RENEW L/F DOOR STRIPE	2.0	9.00
PW10A1)	R + R LEFT FRONT WHEEL	1.0	4.50
PW10A1)	R + R L/F TYRE (WHEEL REMOVED)	2.0	9.00
PW10A1)	R + R TYRE/S AND/OR WHEEL/S	2.0	9.00
1481	LEFT FRONT DOOR REPAIR	15	20.0* 90.00 67.5
0357	L/F BUMP CORNER MLDG CHECK		
0841	L/F WHEELHOUSE COVER CHECK		
7201	L/F WHEEL CHECK	7	10.0* 45.00 31.50
Labour Cost		Hrs	WU
Panel / Mechanical Labour		6.20	62.0
Alignment			
Measuring Work		1.40	14.0
Total of Labour			342.00

Paint

Paint Work

SYSTEM AZT

Time Basis 10 WU/h

Code	Description	WU	Price SGD
	L/F WING NEW PART PAINTING	10.0	
	LEFT FRONT DOOR REPAIR PAINTING <50%	17.0	

Paint Material Per Part

Code	Description	Price SGD
0741	L/F WING NEW PART PAINTING	16.93
1481	LEFT FRONT DOOR REPAIR PAINTING <50%	25.50

Labour Cost - Paint

Factor	45.00 SGD/h	Hrs	WU	Price SGD
Time Paint			27.0	
Preparation Main Work Metal		1.70	17.0	76.50
Total	10 WU/h	4.40	44.0	198.00

Material Cost - Paint
New Part Painting
Repair Painting
Material-constant Metal
Total

Price SGD
16.93
25.50
18.10
60.53

Spare Parts

Code	Description	Part Number	Part Source	prices as at 2015-06-01/01	
				Price SGD	
0281	cut / FRONT BUMPER	F2022 3LGAH	Original	330.00	
1737	cm / L/DOOR MIRROR ASSY	96302 JX50D	Original	300.00	
0287	? L/F BUMPER BRACKET	62225 BJ00A	Original	25.00	
1749	? L/F DOOR FRONT STRIP	80817 BJ00A	Original	100.00	
0741	bt / L/F WING	63101 JX00A	Original	300.00	
1527	de / L/LWR QTR PANEL MLDG	63871 JX00A	Original	65.00	
f: OEM Parts				Savings	0.00
n: Non-OEM Parts				Subtotal	1,120.00
u: Used parts				Addition(+10.00%)	112.00
				Total	1,232.00

Extras

Code	Description	Price SGD
1000	AUDATEX FEE SN	
1001	STICKER-COM. ADDRESS SN	40.00*
1002	TYRE SN 7.0% cut /	15.00*
	Total Extras	126 100.00* 235.00

Final Calculation

	SGD	SGD
Parts		
Addition(+10.00%)	1,120.00	
Total Parts	112.00	1,232.00
Labour Time Base 10 WU/h		
Total 62.0 WU X 45.00 SGD/h		
Alignment	279.00	
Measuring Work	63.00	
Total of Labour		342.00
Total Of Extras		235.00
Paint Work Time Base 10 WU/h		
Labour Cost 44.0 WU X 45.00 SGD/h		
Material Cost	198.00	
Total Paint Including Material	60.53	258.53
Repair Cost Excludes GST		2,067.53
GST (+7.0%)		144.73
Repair Cost Included GST		2,212.26

Comments

- * - USER SUPPLIED DATA
- NN - NO MANUFACTURERS CODE EXISTS
-) - WU PARTIAL INCL IN OTHER POSITIONS

Assessment Note

No assessment notes entered.

<p><u>LKK Auto Consultants</u> hence notify the Repairer of the following:</p> <ul style="list-style-type: none">• 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 <p>Acknowledged by Repairer Signature: Date:</p>

Pass
Hp 90010068

4 days
L/S

01/06/2021 P15W

Renewing after repair



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	04/01/2021 17:50 (SGT)
Date of Accident	04/01/2021 14:00 (SGT)
Exact Location of Accident	Tampines Central 1, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG3094Z
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	RYCA PTE. LTD.
Company Reg No	2XXXXX098E
Email Address	JUMAIDI@MILITARY.SG
Mobile Phone No	(Phone) +65-96787745
Alternative Phone No	+65-96787745

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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	Great Eastern
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2020-V0112863-VCV
Cover Note Number	-

DRIVER

Name of Driver	JUMAIDI BIN JAAFAR
NRIC No	SXXXX171F
Date Of Birth	14/11/1979
Occupation	Indoor

Driving Pass
 Driving experience
 Driver
 Mobile Number
 Alt. Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

01/07/2004
 16 YEARS AND 6 MONTHS
 Male
 (Phone) +65-97984974
 -
 JUMAIDI@MILITARY.SG
 APT BLK 519C TAMPINES CENTRAL 8
 #01-77
 523519
 No
 Employee
 No
 -
 -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Collision - Change/cross lane
 Clear
 Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
 Number of vehicles involved in the accident
 Was anybody injured in the Accident?
 Was any injured conveyed to hospital by ambulance?
 Was any other material or property damaged?
 Number of Passengers (Including Driver)
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No
 2
 No
 -
 Yes
 2
 No

PASSENGER 1

Name
 Gender

MOHAMED NOOR BIN MOHAMED ZAIN
 Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?
 Was notice of intended Prosecution given?
 If yes, against whom?

No
 No
 -

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?
 Was there any video captured by Car Camera?
 Was there any audio recorded?

No
 Yes
 No

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category
 Name of Driver
 NRIC No

YP2098A
 -
 -
 -
 -
 Commercial vehicle
 WANG HE
 -1

Number
Pass complement
Code
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

(Phone) +65-97169746

-
-
-
-
-
-

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 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.

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.



Policyholder's Signature / Date & Time

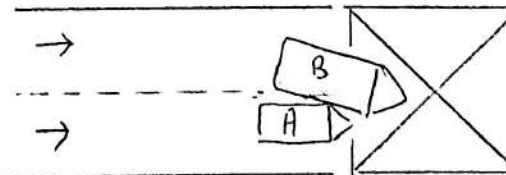
Sketch Plan

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

Witnessed by Reporting Centre Personnel

A - G8G3094Z
(MY VEHICLE)

B - YP2098A
(THE OTHER
VEHICLE)



Describe Circumstances of the Accident

LICENSE PLATE: **GBG30942**

CONTACT NUMBER: **97984974**

ACCIDENT DATE & TIME: **4/1/2021 @ 1400 hrs.**

LOCATION: **TAMPINES CENTRAL 1**

E-MAIL ADDRESS: **jumaidi@military.sg**

On 4/1/2021 at about 1400 hrs as I was driving along Tampines Central 1, a lorry (YP2098A) cut into my lane causing us to collide.

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.

Please state:

☐ Claim Own Policy

☒ Claim Third Party

☐ Claim OD/TP at other workshop

☐ Reporting Only

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



/COE Rebate Enquiry

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 098E

Vehicle Details

Vehicle No.: GBG3094Z

Vehicle to be Exported: Yes

Intended Deregistration Date: 04 Jan 2021

Vehicle Make: NISSAN

Vehicle Model: NV200 DX-2 1.6 AUTO

Primary Colour: Black

Manufacturing Year: 2016

Engine No.: HR16088382D

Chassis No.: VM20105410

Maximum Power Output: -

Open Market Value: \$18,041.00

Original Registration Date: 18 Jul 2017

First Registration Date: 18 Jul 2017

Transfer Count: 0

Actual ARF Paid: \$903.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 17 Jul 2027

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 10

QP Paid: \$40,212.00

COE Rebate Amount: \$26,278.00

Total Rebate Amount: \$26,278.00

The information contained herein is correct as at 04 Jan 2021

OK

► Nissan NV200 1.6A DX

Overview

Financial

Accessories

Similar

Research

Photos

Map



Price	\$44,800	Lifespan	09-Aug-2037
Depreciation ?	\$6,800 /yr View models with similar depre	Reg Date	10-Aug-2017 (6yrs 7mths 3days COE left)
Mileage	52,000 km (15.2k /yr)	Manufactured ?	2016
Road Tax ?	N.A.	Transmission	Auto
Dereg Value ?	\$26,507 as of today (change)	OMV ?	\$18,028
COE ?	\$40,212	ARF ?	\$902
Engine Cap	1,597 cc	No. of Owners ?	1
Curb Weight ?	1,220 kg		
Type of Vehicle	Van		

Features

View specs of the Nissan NV200 (2011)

D

