



萬 春 摩 哆 BAN CHOON MOTOR WORKS

Blk 3, Pioneer Road North #01-14/15 Singapore 628457

Tel: 6264 1191 Fax: 6261 1324

E-mail: banchoon@singnet.com.sg

Business Reg /GST Reg. No. 351915/00A

GST Regn No. 35191500A

08/04/2021

Steve (LKK)

9/4/21, 12.00pm

WL PL

L/S

By AL sy
6 days

China Taiping Ins (S) Pte Ltd
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

Attn: Motor Claims Dept.

Dear Sir/Madam

QUOTATION FOR REPAIRS OF VEHICLE NO. GBF 9342 Z
MODEL: NISSAN CABSTAR
DATE OF ACCIDENT: 06/04/2021
YOUR INSURED VEHICLE NO. YP 8308 E

1 pc	Tailgate / <i>OD</i>	\$ 1,499.70 N
2 pcs /	Taillamps @ \$265.30 N each / <i>OR</i>	530.60 N
1 pc	Front windscreen / <i>CRA</i>	991.00 N
2 pcs	Front windscreen side mouldings @ \$95.30 N each / <i>PL</i>	190.60 N
1 pc	Wiper panel X <i>R</i>	494.60 N
1 pc	CABSTAR logo	65.10 N
1 pc	Front grille / <i>OR</i>	578.60 N
1 pc	Front grille logo / <i>CRA</i>	65.70 N
2 pcs /	Headlamps @ \$473.40 N each / <i>OR</i>	946.80 N
		<u>\$ 5,362.70</u>
Less: 10% discount		536.27
		<u>\$ 4,826.43</u>
1 pc	Rear bumper / <i>OD</i>	400.00 SN
1 pc	Front windscreen inner seal / <i>PL</i>	30.00 SN
1 roll	Front windscreen gum / <i>PL</i>	40.00 SN
1 pc	ERP bracket / <i>PL</i>	26.00 SN
1 pc	70 km/hr sticker / <i>PL</i>	20.00 SN
1 pc	13 PAX sticker / <i>PL</i>	20.00 SN

LABOUR CHARGES:

To writing of company logo (front & rear)
To dismantle and reassemble of front windscreen
To knocking of straightening of all necessary damaged parts.
To changing of the above parts.
To putty and spray painting on accident damaged parts.

450.00	<i>400</i>
120.00	/
1,200.00	<i>600</i>
1,000.00	<i>600</i>
<u>\$ 8,132.43</u>	

Yours faithfully,

Peelindas

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

Choon Motor Works
ME: 07/04/2021 15:44 (SGT)
Ng Tian Chuan
07/04/2021 15:44 (SGT)

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
Date of Accident
Exact Location of Accident
Additional Location Information
Country/State of Loss

07/04/2021 15:44 (SGT)
06/04/2021 18:55 (SGT)
Seletar, Singapore
SLE
Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBF9342Z

INSURED/POLICYHOLDER

Is company?
Name Of Registered Owner
Company Reg No
Email Address
Mobile Phone No
Alternative Phone No

Yes
FAST FLOW SINGAPORE PTE LTD
1XXXXX818C
evangeline.chia@fastflowgroup.com
(Phone) +65-97604730
+65-97604730

VEHICLE PARTICULARS

Manufacturer
Model
Variant
Exact purpose for which vehicle was being used at time of accident
Are you claiming under your own insurance policy for repair to your vehicle?
Vehicle Category
Transmission
CC

Nissan
Cabstar
-

Employment

No - Claiming third party
Commercial vehicle
Manual
2953

INSURANCE COMPANY

Name of Insurance Company
Type of Coverage
Fleet Policy
Policy Number
Cover Note Number

Tokio Marine Insurance Singapore Ltd
Comprehensive
No
MR002190
-

DRIVER

Name of Driver
Passport No/FIN

RAHMAN LOTFOR
GXXXX939T

Pass
ance

Number
ne Number
Address

ress
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

28/04/1984

Outdoor

22/09/2015

5 YEARS AND 7 MONTHS

Male

(Phone) +65-85767004

lotfor.rahman@fastflowgroup.com

28 TOH GUAN ROAD #13-04

No

Employee

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident

Weather Conditions

Road Surface

Chain Collision

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

3

No

-

Yes

2

No

PASSENGER 1

Name

Gender

COLLEAGUE

Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

Yes

Bukit Batok Neighbourhood Police Centre

(Phone) +65-18006659999

(Fax) +65-64252661

21 Bukit Batok East Ave 4 Singapore 659840

No

-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO. T/20210406/2161 ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

GBF2451M

Toyota

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

Commercial vehicle
LIM LEONG HUAT
SXXXX807D
(Phone) +65-94896683

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category
Name of Driver
Passport No/FIN
Contact Number
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

YP8308E
Mitsubishi
-
-
-
Commercial vehicle
SAMUTHIRAPANDI NADAR SUYAMBULINGAM
GXXXX079K
(Phone) +65-90845925

-
-
-
China Taiping Insurance (Singapore) Pte. Ltd.
-
-
3

PASSENGER 1

Name
Gender

COLLEAGUE
Male

PASSENGER 2

Name
Gender

COLLEAGUE
Male

SEE COVER

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

No 7/2020406/2161

attached.

DECLARATION

If We declare the following particulars are true in every respect.



Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/ID No

Scanned with CamScanner



SINGAPORE POLICE FORCE



T/20210406/2161

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

1 of 3

Report No: T/20210406/2161

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/04/2021 22:21		Vide Report No.:		Station Diary No.: 102	
Informant's Particulars					
Name of Informant: RAHMAN LOTFOR			Address: 28 Toh Guan Road #13-04 SINGAPORE		
ID Type / ID No.: FIN NO / G7653939T			Contact No.: Home/Office: Mobile: 85767004		
Nationality: BANGLADESHI			Email:		
Sex: Male	Age: 36	Date of Birth: 28/04/1984	Type of Informant: Driver		
Race: Others			Language: English		Institution / School Name:
Occupation: DRIVER*			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/04/2021 18:55	Type of Location: Straight Road
Location: SELETAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
GBF2451M	Lorry	TOYOTA		Silver	Slightly Damaged	0
GBF9342Z	Lorry	NISSAN		White	Slightly Damaged	1
YP8308E	Lorry	MITSUBISHI		White	Slightly Damaged	2

Details of Person Involved:

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



**SINGAPORE
POLICE FORCE**



1/23210400/2161

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

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Report No. T/20210400/2161

CONTINUATION OF REPORT

Driver:			
Name	RAHMAN LOTFOR	ID No.	G7653939T
Related Vehicle	GBF9342Z (Lorry)	Contact No.	85767004
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 06/04/2021 at about 1855hrs, I was driving my lorry (GBF9342Z) along SLE on the extreme left lane and just passed after Mandai Exit. The vehicle ahead of me (GBF2451M) slowed down, thus I had also slowed down. Suddenly, the vehicle behind me, YP8308E collided onto the rear of my vehicle. The collision caused my vehicle to move forward and collide onto the vehicle ahead of me (GBF2451M). No one was injured. There were no damage on vehicle, GBF2451M (driver: S7680807D). The damages on my vehicle are, GBF9342Z, a crack front glass, and dented rear. The damages on vehicle, YP8308E (Driver: G7304079K) are dented front. The traffic police was at scene but I don't have the case number.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999



T/20210405/2151

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Report No. T/20210405/2151

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /

Sgt 2 MUHAMMAD HANIS BIN IDRIS

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI YEE CHUN JIAN

Contact No: 65476213

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

06/04/2021 22:21

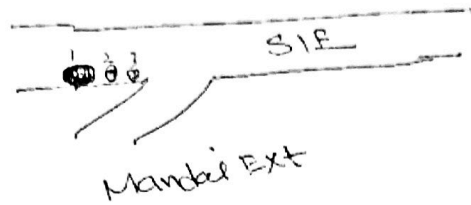
Classification Of Case:

SIGNATURE

Date - 06-04-2021

Time - 6:55 PM

Wooland



TPE

