Add Fee:

Site Insp (\$

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Photos

Offices

TOTAL

Date/Time, Filo Return to?

Reperfement:

Lump Jum 110

TP

3200



Chua Jian Construction Pte Ltd 10 Jalan Besar #10-04 Singapore 208787

9

File No:

SH/2021/100/12/003/TP

Date :

08-December-2021

Description H rear fender H rear fender wheel cowling H rear fender wheel cowling clips (1 section of the se	t)		QX1673Z Quantity 1 1 1		Cost \$ 845.7	Price
H rear fender wheel cowling H rear fender wheel cowling clips (1 se Rear windscreen moulding H rear bumper retainer H rear door H rear door window regulator	t)		1 1 1		The second secon	
H rear fender wheel cowling H rear fender wheel cowling clips (1 se Rear windscreen moulding H rear bumper retainer H rear door H rear door window regulator	t)		1 1 1		The second secon	0 963.90 DD
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Rear windscreen moulding H rear bumper retainer H rear door H rear door window regulator	t)		1			349.20 7 N
CH rear bumper retainer CH rear door CH rear door window regulator					\$	35.00 7 N
LH rear door LH rear door window regulator			1		\$	V 120.70 NEC
H rear door window regulator			1		\$ 109.30	162.80 N€
			1		\$ 1,248.5	1,503.00 DD
H rear door window regulator motor			1		\$	255.00 7 N.
The door window regulator motor			1		\$	-1,160.90-ND
H running board garnish			1		\$ 498.61	595.40 DD
H running board garnish chrome mould	ing		1			/ 144.60 Cu
				25%	\$2966.86	5,290.50
					\$ 741.72	
					\$2225-15	Note that are a second of the second
Rear windscreen sealant						
Rear windscreen inner rubber seal			1		\$ 30.00	60.00 NEC
windsereen milet tubbet seat			1	S. nett	\$	✓ 28.00 NE
o remove and reinstall rear windscreen	and conduct w	rator los	ak toet		58.00	120.00
The state of the s	and conduct w	ater rea	ik test		\$	120.00
o remove damaged parts, to jack out LF	I rear fender in	nner na	nel I H centre	door		9
illar, LH running board panel, and cut o	ut damaged na	nels to	reweld resh	ane and		
epair LH rear fender and inner panel, LF	I centre door n	oillar to	remove and	refit door		
im, lock, window, to replace damaged p	arts and adjus	t body	panel alionme	ent door	S Can	800.00
					\$ 600,00	000.00
o spray paint affected LH side and inner	damaged por	tion in	clusive of prep	paratory		
orks and material					\$ 1000.00	1.050.00
					(000000)	-320.00
o disconnect wire harness to facilitate re	pairs and chec	ck for d	amage and re	connect		
iring system and check for full function	ality				\$	25.00
1						TNL
o apply anti-corrosion Tuff-Kote	1 amp San	4.6	MAIN		\$	100.00
ivvey & Resembly	Lump San	u M	gavi	_	1720.	00
	Repair da	456)	_	\$	6,415.40
10/2621	LKK Auto Consu	iltants he	ence notify		Parts	222511
Min lin	 To resurvey before 	the follow	ring:			58.0
20 LIS	 To display damage 				SN	
52 9	 Parts prices are su 	ubject to co	nfirmation		Labour	1720.0
361577 TGLIM	 Third party survey No illegal modifica 		ithout Prejudice" basi	S	@	4003.1
LS \$ 3200/2 llue	 Supplementary ite 	em(s) must			(a)	3205.5

> Back to OneMotoring

21 1 1 W

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	468D
Vehicle No.:	SKK7823H
Vehicle to be Exported:	Yes
Intended Deregistration Date:	26 Nov 2021
Vehicle Make:	ТОУОТА
Vehicle Model:	CAMRY 2.5 AT
Primary Colour:	Silver
Manufacturing Year:	2013
Engine No.:	2ARU064300
Chassis No.:	MR053AK5004006157
Maximum Power Output:	133.0 kW (178 bhp)
Open Market Value:	\$27,547.00
Original Registration Date:	30 Aug 2013
First Registration Date:	30 Aug 2013
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$30,566.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Aug 2023
PARF Rebate Amount: Intended COE Rebate Details	\$16,811.00
COE Expiry Date:	29 Aug 2023
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$76,607.00
COE Rebate Amount:	\$13,468.00
Total Rebate Amount:	\$30,279.00

The information contained herein is correct as at 26 Nov 2021

OK

MV 36,000/2 PV 30,279/2 NV 5,721/2

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Posted: 28-Nov-2021 Tags: 2013 Toyota Camry, Toyota Camry, Toyota, Camry

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SS0221BQ0003 / S & H Motor Pte Ltd ENTRY DATE & TIME: 26/11/2021 15:57 (SGT) SUBMITTED BY: Wong Kee Nyuk VERSION: 1 (26/11/2021 15:57 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process.
 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.

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	26/11/2021 15:57 (SGT)
Date of Accident	24/11/2021 10:30 (SGT)
Exact Location of Accident	Toa Payoh E, Singapore
Additional Location Information	Junction of Toa Payoh East & Lorong 7 Toa Payoh
Country/State of Loss	Singapore

Additional Location Information Country/State of Loss	Junction of Toa Payoh East & Lorong 7 Toa Payoh
DETAIL	LS OF OWN VEHICLE
Vehicle Registration Number	SKK7823H
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner Company Reg No	Chua Jian Construction Pte Ltd
Email Address Mobile Phone No Alternative Phone No	(Phone) +65-96662657
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 your vehicle? Vehicle Category Transmission CC INSURANCE COMPANY	Camry Employment to No - Claiming third party Commercial vehicle Auto
Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number	Comprehensive No
DRIVER	

Cai Xingxing SXXXX965Z

Name of Driver

Date Of Birth	08/05/1984
Occupation	Outdoor
Date Of Driving Pass	10/03/2008
Driving experience Gender	13 YEARS AND 8 MONTHS
Mobile Number	Male (Phone) +65-96662657
Alt. Phone Number	(Filolie) +03-90002037
Email Address	mistylincai@gmail.com
Address	10 Jalan Besar #10-04 Sim Lim Tower
Address complement	-
Postcode	208787
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	owner
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	
The state of the s	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Side Swipe
Weather Conditions	Raining
Road Surface	Wet
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	- V
Was any other vehicle or property damaged? Number of Passengers (Including Driver)	Yes 1
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance?	No
DETAILS OF POLICE ACTION	
DETAILS OF FOLICE ACTION	
Was the accident reported to the police?	Yes
Police Station Name	Rochor Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002949999
Alt. Police Station Phone No	(Fax) +65-63918583
Police Station Address	11 Kampong Kapor Road Singapore 208678
Was notice of intended Prosecution given?	No
If yes, against whom?	
CIRCUMSTANCES OF ACCIDENT	
refer attached police report.	
ATTACHMENT(Q)	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number	QX1673Z
Vehicle Manufacturer	Mercedes
Vehicle Model	Sprinter
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Government

Name of Driver NRIC No	Muhammad Shafiq Bin Isam SXXXX854J
Contact Number	(Phone) +65-87972754
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

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SKETCH PLAN

IMPORTANT NOTICE

- 1. Rease report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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
- 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 ladgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the
- 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 passessed 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 (at insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' law yers/faw 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
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by mo.
- (iv) administering my claims (including the maling 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
- (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' law yers/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 Parsonal information may/can be disclosed by any of the insurers and/or GIA to their third party service proviners or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Palicyhaider's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
Sketch Plan	1111	
	বৈত্তী ১	A-SKLT
		- 8-0X/67
	N IN	





Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE Tel No: 1800-2949999

Report No. 7/20211-126/2035

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 con'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 A / Sgt 2 HIANG WEI SIANG	Signature Of Informatic
Signature Of Interpreter: Not applicable	Date/Time: 26/11/2021 13:07
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No.: 65476151	Classification Of Case)
Authentication Stamp	





Police Station Of Origin: Rochor N.P.C

11 Kampong Kapor Road SINGAPORE

208678

Tel No: 1800-2949999

Type of Collision:

Between Moving Vehicles - Head To Side

Report No. 7 20211126 2035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Vide Report No.: Station Diany No. 26/11/2021 13:07 Informant's Particulars Name of Informant: Address: CAI XINGXING APT BLK 10C BENDEMEER ROAD #32-125 SINGAPORE 333010 ID Type / ID No.: Contact No.: NRIC NO / S8471965Z Home/Office: Mobile: 96662657 Email: Nationality: SINGAPORE CITIZEN Type of Informant: Sex: Age: Date of Birth: 08/05/1984 Male 37 Driver Race: Language: Institution / School Name: Chinese English Driving Licence Information: Occupation: Date of Explry CONSTRUCTION CONTRACTOR Class: 3

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 24/11/2021 10:30	Type of Location T-Junction
Location: TOA PAYOH	EAST			
		Road Surface:		Road Speed Limit
Weather: Drizzling		Wet		

Vehicle No.	Type	Make	Model	Color	Condition N	oci Passanger
QX1673Z	SCDF Ambulance	MERCEDES	SPRINTER 316CDI/3665		Shanty C Damaged	
SKK7823H	Car	TOYOTA	CAMRY 2.5	Silver	Slightly C Damaged	

Anvone conveyed by

amoulance:



Police Station Of Origin:

R CHOP N.P.C

Fampong Kapor Road SINGAPORE

X 3178

* lo: 1800-2949999



Report No. T/20211126/2035

CONTINUATION OF REPORT

Ere Details.

Gr the 24/11/2021 at about 1030hrs, I was driving my car(SKK7823H) along 23 Toa Payoh East at the salic id lane and stopped at the junction of Toa Payoh East and Toa Payoh Lorong 7 Junction. SCDF And Jance(QX1673Z) was at the third lane, which was the left most lane. The third lane was the left turn on ane. As for my lane, I could either turn left or proceed to go straight. My intention was to make a left turn ince the traffic light turned green.

With traffic light turned green, I proceeded to make a left turn into Toa Payoh Lorong 7. When I was mising the left turn, SCDF Ambulance (QX1673Z) went straight. As such, the SCDF ambulance collided into my vehicle. The left side of my car has a dent and a few scratches. There was no passenger in my car left that point of time. I was also not injured. As for the SCDF ambulance, there were some scratches a the front bumper only. I could see only one passenger and there were no visible injuries seen on the passenger and the driver. I also managed to exchange particulars with the driver of the SCDF and plance.

I've advised to make a police report by paramedics. As such, I am making this report to put it on record.