

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: **6BK 7962X**  
 at Workshop m/s: **precise**  
 of \_\_\_\_\_  
 Insured: **SYN 77797**  
 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.**

N/S	O/S

Bal. or Market Value: **480**  
 IDAC Accident Rport: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: **5** days Res.: Yes or No  
 Lum Sum: **20** % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS **C542C**  
 Date: \_\_\_\_\_ Person Contacted: **27A@20437** Vehicle: IN / OUT

Veh No: **6BK 7962X** Yr Regn: **27/11/20**  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: **Toyota Dyno** c.c. **2982**  
 Colour: **white** A/C: **Insured / Std / NI / NA**  
 Sp. Reading: **87344** T/Radio: **Insured / Std / NI / NA**  
 Eng/No: \_\_\_\_\_  
 C/No: **JTFAT35460K215809**  
 Gen. Cond: **Good / Fair / Poor / Burnt**  
 Steering: **Inorder / Jammed / Leaked / Burnt** or  
 Brake: **Inorder / Jammed / Leaked / Burnt** or  
 Modi: **Nil / S/Rim / STD A/Rim** or  
 Tyre Size: F: **195R15 35**  
 R: **155R12**  
**BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /**  
**TOYO / YOKO** or  
 Front: **6** Rear: \_\_\_\_\_  
 R/Bal. \_\_\_\_\_ mm R/Bal. **6/6** mm  
 L/Bal. **6** mm L/Bal. **6/6** mm  
 D.O.A. **07/05/22** D.O.I. **10/05/22**  
 Survey held at \_\_\_\_\_  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
**Rear N/S-**  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction **29/6/22 1/5@3800 informed you hang**

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

Days Of Repair: \_\_\_\_\_

1) Date/Time, File Return to?  
 2) \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_  
 Transportation: \_\_\_\_\_  
 ) \_\_\_ S + RS \_\_\_ SI  
 ) Photos  
 ) Others  
 )  
 TOTAL

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

Report Format : \_\_\_\_\_  
 Lump Sum / I.B.I: (\$) \_\_\_\_\_ )

> **Back to OneMotoring**

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	542C
<b>Vehicle Details</b>	
Vehicle No.:	GBK7962X
Vehicle to be Exported:	No
Intended Deregistration Date:	10 May 2022
Vehicle Make:	TOYOTA
Vehicle Model:	DYNA 150 5MT
Primary Colour:	White
Manufacturing Year:	2020
Engine No.:	1KDB062001
Chassis No.:	JTFAT35Y60K215809
Maximum Power Output:	-
Open Market Value:	\$29,446.00
Original Registration Date:	27 Nov 2020
First Registration Date:	27 Nov 2020
Transfer Count:	0
Actual ARF Paid:	\$1,473.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	26 Nov 2030
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$23,919.00
COE Rebate Amount:	\$20,437.00
<b>Total Rebate Amount:</b>	<b>\$20,437.00</b>

The information contained herein is correct as at 10 May 2022

OK



**Post an Advertisement**  
 Sell it yourself! Advertise it at just  
**\$68 until it's SOLD!**

06/2009 Cerato Forte \$52000, \$748 Monthly At 2.88%



\$748 Monthly Only! 2.88% By  
 Gv Cars Financing, \$0  
 Downpayment. Phv/z10  
 Welcome  
 GV Automobile Centre StarAd

• Free VICOM evaluation  
 • Free grooming and 6 months maintenance  
 • In-house workshop ensures quality service  
 • Member of SVTA and hire purchase association  
 • 100% deposit refund for unapproved loan

**YONG LEE SENG MOTOR PTE LTD**

Post an Ad Advertiser Login Ways of Selling

Sort by Date Posted 20 results/page

3 vehicles



toyota dyna

Any Category

Advanced Search



Search

Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

Search Selection

toyota dyna Any Any 2020 Any Any Any Available



**Toyota Dyna 150 3.0M** **\$84,800** \$10,200 /yr 01-Sep-2020 2,982 cc - Truck **Available**  
**Fuel Type:** Diesel  
 Nice 4 digit number plate, one owner drive before. Tip top condition. 3 months warranty and free servicing. 100% loan can submit. ban...  
 ABS Bus Pte Ltd  
 Posted: 08-May-2022



**Toyota Dyna 150 3.0A** **\$84,888** \$10,500 /yr 08-Jun-2020 2,982 cc 52,000 km Truck **Available**  
**Fuel Type:** Diesel  
 Toyota Dyna 10 Feet Lorry With 6 Ft Box Attachment, Can Be Opened Both Sides and Rear. Easy And Low Cost Maintenance Commercia...  
 Posted: 12-Apr-2022



**Toyota Dyna 150 3.0M** **\$83,888** \$10,350 /yr 15-Jun-2020 2,982 cc 52,000 km Truck **Available**  
**Fuel Type:** Diesel  
 Toyota Dyna 10 feet lorry with 6 feet box attachment, can be opened both sides and rear. Easy and low cost maintenance commercial lo...  
 Posted: 06-Apr-2022

Save this search criteria, to get email alerts whenever a match is found.

Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

For old advertisements, view **Expired ads**

20 results/page

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## 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	06/05/2022 17:57 (SGT)
Date of Accident	06/05/2022 09:55 (SGT)
Exact Location of Accident	AYE, Singapore
Additional Location Information	TWDS MCE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK7962X
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LIVINWALL PTE LTD
Company Reg No	201713542C
Email Address	mercy@gowithgush.com
Mobile Phone No	(Phone) +65-94372104
Alternative Phone No	+65-94372104

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
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
Transmission	Manual
CC	2982

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5124491831
Cover Note Number	-

#### DRIVER

Name of Driver	DHANASEKAR JAYAKUMAR
Passport No/FIN	G7620368M

Date Of Birth	20/07/1978
Occupation	Outdoor
Date Of Driving Pass	13/04/2015
Driving Experience	7 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-82557380
Alt. Phone Number	-
Email Address	mercy@gowithgush.com
Address	2 GAMBAS CRESCENT #01-35
Address complement	-
Postcode	757044
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON THE SAID DATE AND TIME OF ACCIDENT, I WAS DRIVING MY LORRY A (GBK7962X) ALONG AYE TOWARDS MCE AFTER JURONG TOWN HALL EXIT. DUE TO HEAVY TRAFFIC AHEAD, I FOLLOWED THE CAR IN FRONT OF ME SLOWLY MOVING FORWARD. SUDDENLY, I FELT AN IMPACT FROM BEHIND AND REALISED THAT WAS VEHICLE B (SJN4779T) UNABLE TO BRAKE IN TIME AND COLLIDED ONTO MY LORRY REAR PORTION. I WENT TO SEE DOCTOR AFTER THIS ACCIDENT AND WAS GIVEN 2 DAYS MC. IF I STILL FEELING ANY UNCOMFORTABLE AFTER THIS I WILL FOLLOW UP MY MEDICAL TREATMENT. HENCE, I HERE TO LODGE THIS REPORT TO CLAIM AGAINST VEHICLE B (SJN4779T)'S INSURANCE FOR MY ACCIDENT DAMAGES.

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 VEHICLE PROPERTY 1**

Vehicle Registration Number	SJN4779T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category .....	Private car
Name of Driver .....	LIM HOW KIONG
Contact Number .....	(Phone) +65-97930530
Address .....	-
Address complement .....	-
Post code .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	VEHICLE B
No. Of Passenger (Including Driver) .....	-

### INJURED PERSONS DETAILS

INJURED1

Name of injured person .....	DHANASEKAR JAYAKUMAR
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	GBK7962X
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

**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 willful 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 :

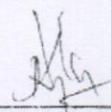
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

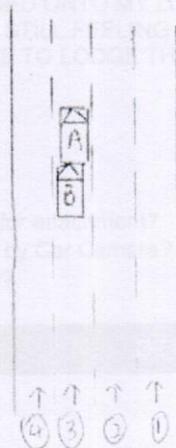
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
 Policyholder's Signature / Date & Time

 06/15/2022 13:00  
 Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

**Sketch Plan**



veh (A) G1BK 7962X  
 veh (B) SSN 4779T

Along AYE Towards MCE  
 After Jurong town hall exit

**Describe Circumstances of the Accident**

On the said date & time of accident. I was driving my Lorry A (GBK 7962X) along AYE towards MCE after Jurong town hall exit. Due to heavy traffic ahead. I followed the car in front of me slowly moving forward, Suddenly, I felt an impact from behind and realized that was Vehicle B (SJM 4779T) unable to brake in time and collided onto my lorry rear portion.

I went to see doctor after this accident & was given 2 days MC. If I still feeling any uncomfortable after this I will follow up my medical treatment.

Hence, I hereto lodge this report to claim against Vehicle B (SJM 4779T)'s insurance for my accident damages.



**Declaration**

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

  
Policyholder's Signature, Date & Time

  
Driver's Signature (if driver is not the policyholder), Date & Time

Witnessed by Reporting Centre Personnel

# PRECISE AUTO SERVICE

NO. 1 KAKI BUKIT AVE 6 #02-33/34/36 AUTOBAY SINGAPORE 417883

TEL : 67457367 FAX : 68413390

CO. REG. NO. : 35766600C

GST REG. NO. : 35766600C

*not attached  
see  
10/5/22  
H/S @ 3800  
5 days*

23-06-22

Date Of Accident : 06-05-2022

OUR REF : GBK 7962X/T/22

*LKK - Mercedes*

*Date In/Out: 06-05-22 to 14-05-22. 5 days*

## LIVINWALL PTE LTD

2 Gambas Crescent (\*Nordcom Two)

#01-35

Singapore 757044

### ESTIMATE BILL ON VEH. NO. : GBK 7962X

MODEL : TOYOTA DYNA

CHASSIS NO : JTFAT35Y06K215809

### LIST ITEM

Tail Gate	<i>1619.20</i>	<i>10/5/22</i>	1,712.80
Tail Gate Side Lock - LH		<i>sent</i>	181.75
Tail Gate Side Lock Bracket - LH		<i>sent</i>	161.10
Tail Gate Rubber Stopper - LH		<i>see</i>	43.90 X
Tail Gate Hinges - N/S	2pcs @ 161.90	<i>in</i>	323.80 X
Tail Gate Sticker "Toyota"		<i>see</i>	160.75
Tail Gate Lower Member		<i>in</i>	672.40 X
Tail Gate Lower Member Sticker "Dyna"		<i>see</i>	61.10
Rear Wheel Mudguard Bracket		<i>sent</i>	97.80
Rear Wheel Mudguard - LH		<i>in</i>	272.85
Rear Wheel Mudflap		<i>win</i>	185.10
Rear Wheel Mudflap Bracket		<i>sent</i>	65.10
Tail Lamp - N/S		<i>one</i>	288.40
Tail Lamp Bracket		<i>sent</i>	181.70
			4,408.55
		Less Discount 25%:	1,102.14
			3,306.41

### SPECIAL NETT ITEM

Tail Gate 70 km/h Sticker		<i>see</i>	<i>10</i>	20.00
Tail Gate 13 Pax Sticker		<i>see</i>	<i>10</i>	20.00
Rear Step Member		<i>sent</i>	<i>280</i>	280.00
Rear Aluminium Tool Box Bracket		<i>sent</i>	<i>150</i>	180.00

Rear Aluminium Tool Box

Dis 450 800.00

Reverse Sensor

Small 200 380.00

**LABOUR CHARGE**

Towing.

11 100.00 X

To Check Wiring System.

20 80.00

To Tuff Coat Affected Areas.

40 180.00

To Remove & Refix Reverse Sensor.

40 150.00

To Respray Affected Areas.

580 850.00

To Renew Daamaged Parts, Straighten & Repair Rear N/S Side Gate, Side Gate Lower Member & Aligned All Parts.

600 700.00

7,046.41

GST 7% :

493.25

**TOTAL AMOUNT :**

**7,539.66**

P-3274-88  
 252  
 2456.13  
 1070  
 1280  
 4806.13  
 222  
 3844

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: