

ASS. REC. BY: Rasm

REF:

CS/FCI 22004493/Rty³

661M

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: GBD 7593Pat Workshop m/s TWIN WHEELSof 38, WOODLANDS RD #101-14 E1Insured: FCI

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.Bal. or Market Value: 32k

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: GBD 7593P Yr Regn: 2015 / APR

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

Truck / Trailer or _____

Make: Volkswagen CADDY 1.6 TDI MT c.c 1598Colour: WHITE A/C: Insured / Std / NI / NASp. Reading: 198/41 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WV12222KZFX108976

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 01/04/22 D.O.I. 19/05/22Survey held at TWIN WHEELS

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

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

Date / Time

Action / Instruction

REPAIR UNIT - 16K

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee:

☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech. Invs (\$ _____)

Photos

Others

Report Format: _____

Lump Sum / Fee: (\$ _____)

**TWIN WHEELS AUTO TRADING ENTERPRISE**

38 Woodlands Industrial Park E1

#03-14 Singapore 757700

Tel: 6765 2616, Fax: 6765 6177

Email: twin_woodlands@singnet.com.sg

Reference Number : PFI-2022003

Date : 18.05.2022

CUSTOMER

Name : Koufu Pte Ltd

Address : 1 Woodlands Height

Singapore 737859

VEHICLE NO.: GBD 7593 PMODEL : VOLKSWAGEN CADDY**Quotation 3rd Party Claims - for vehicle no. GBD 7593 P with Vehicle No.SBS 3441 S****Accident on 29.04.2022, along Kallang Road**

NO	PARTS REPLACEMENT	QTY	LIST PRICE
1	REAR DOOR - LEFT <i>bt</i>	1PC	\$ 2,009.70
2	REAR DOOR HANDLE - LEFT <i>de</i>	1PC	\$ 285.60
3	REAR DOOR LOCK - LEFT <i>X</i>	1PC	\$ 600.70
4	REAR DOOR HINGE - LEFT <i>X</i>	2PCS	\$ 377.54
5	REAR TAILLAMP - LEFT <i>scr</i>	1PC	\$ 760.50
6	REAR DOOR - RIGHT <i>bt</i>	1PC	\$ 2,009.70
7	REAR DOOR EMBLEM <i>me</i>	1PC	\$ 180.97
8	REAR DOOR LOCK - RIGHT <i>X</i>	1PC	\$ 600.70
9	REAR DOOR LOCK CATCH <i>X</i>	1PC	\$ 200.77
10	REAR DOOR RUBBER - RIGHT <i>me</i>	1PC	\$ 266.90
11	REAR BUMPER <i>de</i>	1PC	\$ 1,260.33
12	REAR BUMPER REINFORCEMENT <i>?</i>	1PC	\$ 526.70
13	REAR BUMPER RETAINER <i>LH ?</i>	<i>1pc</i> 2PCS	\$ 201.94
14	REAR END PANEL <i>X</i>	1PC	\$ 899.60
15	REAR END PANEL RUBBER <i>X</i>	1PC	\$ 109.79
	TOTAL LIST PRICE		\$ 10,291.44
	LESS - 10%		\$ 1,029.14
	TOTAL AMOUNT		\$ 9,262.30
	PARTS - SPECIAL NETT	QTY	S/NETT
16	REAR DOOR WINDSCREEN SEALANT - LEFT <i>me</i>	1SET	\$ 60.00 <i>30</i>
17	REAR DOOR STICKER - 6PAX <i>me</i>	1PC	\$ 10.00 <i>✓</i>
18	REAR DOOR STICKER - 70KM <i>me</i>	1PC	\$ 10.00 <i>✓</i>
19	REAR DOOR WINDSCREEN SEALANT - RIGHT <i>me</i>	1SET	\$ 60.00 <i>30</i>
20	REAR RIGHT DOOR - COMPANY LOGO <i>me</i>	1SET	\$ 280.00 <i>100</i>
21	REAR BUMPER REVERSE SENSOR <i>?</i>	1SET	\$ 350.00 <i>200?</i>
	TOTAL SPECIAL NETT PRICE		\$ 770.00

	LABOUR CHARGES		
22	TO DISMANTLE & REFIX LEFT & RIGHT DOOR WINDSCREEN GLASS.	\$	240.00 180
23	LABOUR TO SPRAY PAINT	\$	900.00 400
24	LABOUR TO PANEL BEATING	\$	950.00 600
	TOTAL LABOUR	\$	2,090.00

Subtotal	\$	12,122.30
GST 7%	\$	848.56
Grand Total	\$	12,970.86

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:

Rasul
Hp 90010068
5 days
4/8
19/05/22 @ 1615
Resurvey 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	11/05/2022 18:59 (SGT)
Date of Accident	29/04/2022 21:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	KALLANG RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD7593P
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KOUFU PTE LTD
Company Reg No	199602661M
Email Address	ruth.tee@koufu.com.sg
Mobile Phone No	(Phone) +65-65060166
Alternative Phone No	(Office) +65-65060166

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	CADDY 1.6 TDI MT 2CAA72
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	1598

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00041572201
Cover Note Number	27/4/22-26/4/23

DRIVER

Name of Driver	YEW YEU HENG ALEX(YU YAOXING,ALEX)
NRIC No	S8141442D

Date Of Birth
Occupation
Date Of Driving Pass
Driving experience
Gender
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

19/12/1981
Indoor
22/01/2019
3 YEARS AND 3 MONTHS
Male
(Phone) +65-94749319

-
alexeyew_19@hotmail.com
BLK 461B BT BATOK WEST AVE 8 #10-720

-
652461
No
Employee
No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Head to Rear
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 vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No
2
Yes
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
Hong Kah North Neighbourhood Police Post
(Phone) +65-18005679999
(Fax) +65-65652508
Blk 370 Bukit Batok Street 31 #01-201 Singapore 650370
No
-

CIRCUMSTANCES OF ACCIDENT

REFER POLICE REPORT

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

SBS3441S
-

EC. BY: **2** The Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category
 Name of Driver
 NRIC No
 Contact Number
 Address
 Address complement
 Postcode
 Insurance Company Name
 Nature Of Damage
 Details of property damaged in accident
 No. Of Passenger (Including Driver)

Bus
 MOHAMED RIZAL BIN IBRAHIM
 S8824030H

INJURED PERSONS DETAILS

INJURED 1

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

YEW YEU HENG ALEX
 Male
 (Phone) +65-94749319
 -
 -
 -
 -
 -
 GBD7593P
 -
 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 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;

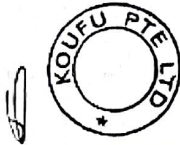
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(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

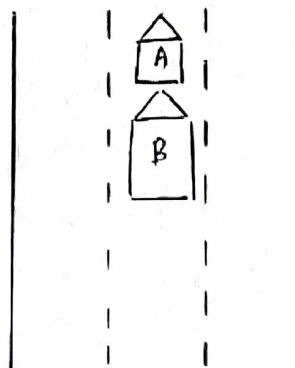
Driver's Signature (If driver is not the policyholder) / Date & Time



11/5/22

Witnessed by Reporting Centre Personnel

Sketch Plan



A: GBD 7593 P

B: SBS 3441S

Kallang Road

Describe Circumstances of the Accident

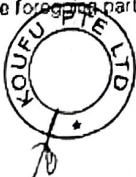
please refer to my attachment police Report No.

T/20220420/2039

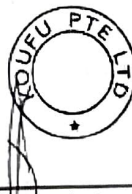
The reason for my late reporting is because I was on
 mc, please refer to my attachment mc letter
 from: 30 April 2022 to 10 May 2022.

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

 11/5/22
 W

Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE



T/20220430/2039

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

1 of 3

Report No. T/20220430/2039

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/04/2022 12:50		Vide Report No.:		Station Diary No.: 21	
Informant's Particulars					
Name of Informant: YEW YEU HENG, ALEX			Address: APT BLK 461B BUKIT BATOK WEST AVENUE 8 #10-720 SINGAPORE 652461		
ID Type / ID No.: NRIC NO / S8141442D			Contact No.: Home/Office: Mobile: 94749319		
Nationality: SINGAPORE CITIZEN			Email: alexeyew_19@hotmail.com		
Sex: Male	Age: 40	Date of Birth: 19/12/1981	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Senior Area Manager (Koufu)			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 29/04/2022 21:50	Type of Location:
Location: KALLANG ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
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
GBD7593P	Van				Slightly Damaged	1
SBS3441S	Bus/Coach/Minibus				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20220430/2039

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Report No. T/20220430/2039

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

CONTINUATION OF REPORT

Driver			
Name	YEW YEU HENG, ALEX	ID No.	S8141442D
Related Vehicle	GBD7593P (Van)	Contact No.	94749319
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	30/04/2022	Date Discharge	30/04/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	MOHAMED RIZAL BIN IBRAHIM	ID No.	S8824030H
Related Vehicle	SBS3441S (Bus/Coach/Minibus)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 29/04/2022 at about 2150hrs, I was driving a van (V1: GBD7593P) belonging to the company I work for and was heading home. V1 came to a stop at the traffic junction of Kallang Road and Kallang Avenue (towards Geylang), in the second lane. My colleague was seated in the passenger seat.

Shortly after stopping, I felt a strong impact from the rear, pushing V1 forward. I alighted and saw that a green-coloured Go-Ahead Singapore bus service number 2 (V2: SBS3441S) to have collided into the rear of V1. At that moment, both myself and my passenger did not feel any pain and there were no visible injuries observed on ourselves. V1 sustained dents on its rear whereas V2 sustained a crack on its windshield, believed to be the contact point during the collision.

No ambulance or traffic police were called in. After exchanging particulars, we left. It was only at home when I felt unwell and vomited once. I went to the Accident & Emergency department of Ng Teng Fong General Hospital and was granted with 3 days of Medical Leave.



**SINGAPORE
POLICE FORCE**



T/20220430/2039

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

3 of 3

Report No. T/20220430/2039

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 /

Other MUSHAWWIR BIN ADRUS

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

30/04/2022 12:50

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Classification Of Case:

NP168

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	661M
Vehicle No.:	GBD7593P
Vehicle to be Exported:	No
Intended Deregistration Date:	23 May 2022
Vehicle Make:	VOLKSWAGEN
Vehicle Model:	CADDY 1.6 TDI MT 2CAA72
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	CAYBA4456
Chassis No.:	WV1ZZZ2KZFX108976
Maximum Power Output:	-
Open Market Value:	\$21,581.00
Original Registration Date:	27 Apr 2015
First Registration Date:	27 Apr 2015
Transfer Count:	0
Actual ARF Paid:	\$1,080.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	26 Apr 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$53,001.00
COE Rebate Amount:	\$15,502.00
Total Rebate Amount:	\$15,502.00

The information contained herein is correct as at 23 May 2022

OK

Volkswagen Caddy 1.6M TDI

Overview Financial Accessories Similar Research Photos Map

Price	\$35,000	Lifespan ⓘ	30-Jul-2035
Depreciation ⓘ	\$10,980 /yr View models with similar depre	Reg Date	31-Jul-2015 (3yrs 2mths 7days COE left)
Mileage	65,000 km (9.5k /yr)	Manufactured ⓘ	2015
Road Tax ⓘ	N.A.	Transmission	Manual
Dereg Value ⓘ	\$15,946 as of today (change)	Fuel Type	Diesel
COE ⓘ	\$50,002	OMV ⓘ	\$21,999
Engine Cap	1,598 cc	ARF ⓘ	\$1,100
Curb Weight ⓘ	1,400 kg	No. of Owners ⓘ	2
Type of Vehicle	Van		