

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/H/A 22006024/4943

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____

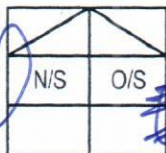
Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 6 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: _____

Yr Regn: _____

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

Truck / Trailer or _____

Make: _____

c.c. _____

Colour: _____

A/C: Insured / Std / NI / NA

Sp. Reading: _____

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

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: _____

R: _____

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

TOYO / YOKO or _____

Front _____

Rear _____

R/Bal. _____

mm

R/Bal. _____

mm

L/Bal. _____

mm

L/Bal. _____

mm

D.O.A. _____

D.O.I. _____

Survey held at _____

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

Rep 1 Ue.

O/S Damage

Not consistent.

6/7/22 1/5 @ 2900 inform Suben. (Ref # 7357-80, 722)

Date/Time, File Pass to?

☐

: Preli. Report

1) 06/7/22

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 6

Resurvey No. of Trip: 1

Survey Fee: _____

Transportation: _____

____ S + RS. ____ SI

) Photos

) Others

Report Format: TP

Lump Sum / I.B.I. (\$) 2900

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

TOTAL



Liu's Brother Auto Engineering Workshop
No. 1 Kaki Bukit Avenue 6 #01-01 AutoBay @ Kaki Bukit Singapore 417883

UEN No: 53291793J liusbroad@gmail.com

Tel: 67411730

ESTIMATE

Name: HL Assurance Singapore Pte Ltd

Address: Motor Claims Department

11 Keppel Road #11-01

ABI Plaza

Singapore 089057

Ref Date:

Ref No:

Vehicle No:

Model / Make:

23-06-2022

GBC6565H220617

GBC6565H

Toyota Hiace

Manual

Item #	Damaged Area	Description	Unit Price	Qty	Estimation / Quotation	N / SN	Cost Of Repair
1	Front	Wheel Hub-Cab <i>one n/c</i>	\$ 278.00	1	\$ 278.00		X
2	Rear	Bumper <i>2 n/c</i>	\$ 599.30	1	\$ 599.30		X
3		Bumper Clips 1 set <i>11</i>	\$ 48.00	1	\$ 48.00	SN	X
4	Rear Rh	Fender (Body Panel) <i>2 n/c</i>	\$ 1,718.50	1	\$ 1,718.50		X
5		Wheel Hub-Cab <i>one n/c</i>	\$ 278.00	1	\$ 278.00		X
6	Rear Lh	Bumper Bracket <i>11</i>	\$ 202.00	1	\$ 202.00		X
7	Front Lh	Side Panel <i>3 n/c</i>	\$ 477.00	1	\$ 477.00		✓
8	LH	Sliding Door <i>Body n/c</i>	\$ 1,594.50	1	\$ 1,594.50		✓
9	Rear LH	Fender (Body Panel) <i>2 n/c</i>	\$ 1,718.50	1	\$ 1,718.50		X
10	Rear LH	Wheel Rim <i>2</i>	\$ 360.00	1	\$ 360.00		X
11	Rear LH	Wheel Hub-Cab <i>one n/c</i>	\$ 278.00	1	\$ 278.00		✓
12		Labor for Panel Beating, Cut, Weld, Straighten & Replacing Parts Etc			\$ 1,200.00		1000
13		To putty & spray painting & including touch up paint on accident affected areas			\$ 1,200.00		750
14		To check and re-adjust wheel alignment			\$ 180.00		60
15		To apply Rust Proofing, reseal tuff-coating treatment on accident area			\$ 120.00		60

Total Parts & Labour of estimate for damaged vehicle

\$ 10,251.80

Total amount in Lumpsum Basis for repaired vehicle

\$ -

SDL



Liu's Bro Auto Engrg Wks

LKK Auto Consultants hence notify the Repairer of the following:

- To survey before/after spray painting
- To display damaged part(s) during survey
- 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 surveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

2- 2349.50
25%
P-1762.12
L- 1870
3632.12
2020
2905

Not Authorized
24/06/22
1/s @ 2900
6 days
Wu phi. Arden

RH Side Damage not consistent

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	19/06/2022 10:43 (SGT)
Date of Accident	17/06/2022 14:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Near 227 Petir Rd, Singapore
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC6565H
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	GOLDBELL LEASING PTE LTD
Company Reg No	1XXXXX196N
Email Address	IsaacNgCL@goldbellcorp.com
Mobile Phone No	(Phone) +65-64942888
Alternative Phone No	(Office) +65-64942888

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	Auto
CC	2494

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	D22099240
Cover Note Number	NA

DRIVER

Name of Driver	LEE ZHAO JIE
NRIC No	SXXXX716G

Date Of Birth 28/01/1993
 Occupation Outdoor
 Date Of Driving Pass 06/09/2018
 Driving experience 3 YEARS AND 9 MONTHS
 Gender Male
 Mobile Number (Phone) +65-88188861
 Alt. Phone Number -
 Email Address mailitolzj@gmail.com
 Address 152 Bukit Batok Street 11
 Address complement #03-274
 Postcode 650152
 Is the driver the policyholder? No
 If No, Relationship of the Driver with the Insured Hirer
 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 Side Swipe
 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? No
 Was any injured conveyed to hospital by ambulance? -
 Was any other vehicle or property damaged? Yes
 Number of Passengers (Including Driver) 2
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

PASSENGER 1

Name Faiz
 Gender Male

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

I was driving from Petir Road and had passed through the traffic junction. Suddenly, third party vehicle coming from Cashew Road's slip road entered into main road and onto my lane, side swiping the left side of my vehicle. Upon impact, my vehicle was pushed to the right and grazed the road kerb. Both drivers stopped our vehicle and I managed to take a few pictures. The lady driver requested that we parked at a safe place and exchange particulars. The driver wanted to private settle this matter but I can't agree as this vehicle is leased. No injury involved.

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 SKS1088K
 Vehicle Manufacturer Mercedes
 Vehicle Model E250

Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	NG LIAN CHU
NRIC No	SXXXX631H
Contact Number	(Phone) +65-96624758
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMMAD AZALY BIN ABDULLAH

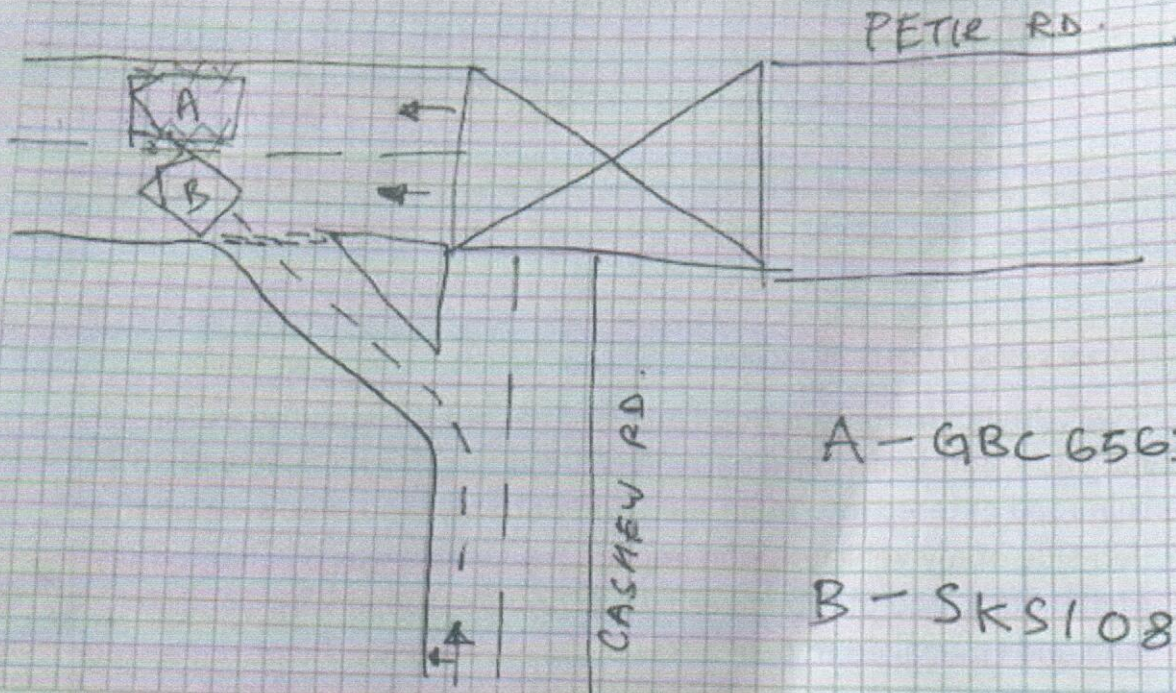
Policyholder's Signature
 Date & Time:

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

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

17062022

ACCIDENT DIAGRAM



A - GBC 6565H

B - SKS 1088K

[Signature]

Policyholder's Signature
Date & Time:

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

17/6/22

VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMMAD AZALY BIN ABDULLAH

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving from Petir Road and had passed through the traffic junction. Suddenly, third party vehicle coming from Cashew Road's slip road entered into main road and onto my lane, side swiping the left side of my vehicle. Upon impact, my vehicle was pushed to the right and grazed the road kerb. Both drivers stopped our vehicle and I managed to take a few pictures. The lady driver requested that we parked at a safe place and exchange particulars. The driver wanted to private settle this matter but I can't agree as this vehicle is leased. No injury involved.

DECLARATION

I/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: 17062022

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMMAD AZALY BIN ABDULLAH
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	196N
Vehicle Details	
Vehicle No.:	GBC6565H
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Jun 2022
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE MANUAL
Primary Colour:	Blue
Manufacturing Year:	2013
Engine No.:	1KD2294297
Chassis No.:	JTFHT02P500115351
Maximum Power Output:	-
Open Market Value:	\$25,820.00
Original Registration Date:	28 May 2013
First Registration Date:	28 May 2013
Transfer Count:	1
Actual ARF Paid:	\$1,291.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	27 May 2023
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$58,502.00
COE Rebate Amount:	\$5,425.00
Total Rebate Amount:	\$5,425.00

The information contained herein is correct as at 23 Jun 2022

OK

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 23 Jun 2022 / 15:57:58

Receipt Date/Time : 23 Jun 2022 / 15:57:12

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220623-002802

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SKS1088K As at 17 Jun 2022/14:00:00 Insurance Co: HL ASSURANCE PTE. LTD.				
1	Insurance Enquiry - SKS1088K Enquiry Fee 20220623155442971278	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
Paid By				
	426588XXXXXX1485	eNETS Credit Card		7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

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3 vehicles



toyota hiace

Any Category

Advanced Search



Search

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

Search Selection

toyota hiace

Any

Any

2013

Any

Any

Any

Available

**Toyota Hiace Commuter 3.0M****\$20,800**

\$26,830 /yr

05-Apr-2013

2,982 cc

-

Bus

Available

Fuel Type: Diesel

1 owner. Reliable Toyota Hiace 12 seater bus. Very well maintained and regular service done. Silent powerful 1KD Euro 4 turbo engine. A...

PREMIUM AD

Posted: 24-Jun-2022

**Toyota Hiace 3.0M****\$24,800**

\$18,400 /yr

31-Oct-2013

2,982 cc

-

Van

Available

Fuel Type: Diesel

Brand new blue colour unit! 1 owner unit! Brand new upholstery! Comes with nice number plate! 5 doors for easy access! Carpet floorbo...

PREMIUM AD

Car (S) Pte Ltd

Posted: 24-Jun-2022

**Toyota Hiace 3.0M DX****\$23,800**

\$15,820 /yr

27-Dec-2013

2,982 cc

-

Van

Available

Fuel Type: Diesel

Cheaper Than Leasing! This Is A 4 Door And Fully Carpeted Unit. Engine And Gearbox In Tip Top Condition, Very Well Maintained Unit, N...

ABWIN (1994) Pte Ltd

Posted: 24-Jun-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
------	-------	-------	--------------	----------	---------	---------	----------	--------

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20 results/page

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Handwritten notes: GBC 7207, av 289k - 10k.

Search results for Toyota Hiace:

Model	Price	Registration	Eng Cap	Mileage	Year Type	Status
Toyota Hiace Commuter 2.0M	\$28,800	2013	2013	1,882 cc	2013	Available
Toyota Hiace 3.0M	\$18,800	2013	2013	1,882 cc	2013	Available
Toyota Hiace 3.0M DX	\$12,800	2013	2013	1,882 cc	2013	Available

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