ASS. REC. BY: Thevan | REF: CS/AIS2200639/UUY3

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: SLD 980H

Policy No. SP2002177834

Claims No. 2022 22005486KC

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
	X

Bal. or Market Value: 98k

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 5 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: YQ6768T Yr Regn: 25/4/22

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

Truck / Trailer or _____

Make: Toyota dyna c.c 2982

Colour Silver A/C: Insured / Std / NI / NA

Sp.Reading 5736 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JHHA6VL1630K002094

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: ~~195~~ 19R15C

R: 19R15C

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	29/6/22	D.O.I.	5/7/22 1500

Survey held at Tramwork

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
	RW: 98k
	rebate: 3%/22
	RW: S 9878
19/8/22	Thevan informed ~~LS $5400~~ (Red 4910.75, 47%)

Date/Time, File Pass to? 1) _____ : Prell. Report : Final Report

Date/Time, File Return to? 2) 24/8/22-typist

Days Of Repair: 5

Resurvey No. of Trip: 1

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

Survey Fee: _____

Transportation: _____ S + RS _____ SI

Photos _____

Others _____

TOTAL _____

Report Format : Merimen

Lump Sum / ~~I.B.I:~~ ($ 5400 _____)

k to OneMotoring

ire PARF/COE Rebate for Registered Vehicle

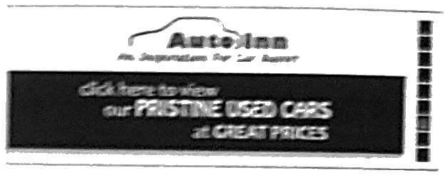
ehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	986G
Vehicle Details	
Vehicle No.:	YQ6768T
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Aug 2022
Vehicle Make:	TOYOTA
Vehicle Model:	DYNA 150 5MT
Primary Colour:	Silver
Manufacturing Year:	2022
Engine No.:	1GD8891715
Chassis No.:	JHHAGV4630K002094
Maximum Power Output:	-
Open Market Value:	$31,609.00
Original Registration Date:	25 Apr 2022
First Registration Date:	25 Apr 2022
Transfer Count:	1
Actual ARF Paid:	$1,581.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	$0.00
Intended COE Rebate Details	
COE Expiry Date:	24 Apr 2032
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	$39,381.00
COE Rebate Amount:	$38,122.00
Total Rebate Amount:	$38,122.00

The information contained herein is correct as at 19 Aug 2022

OK

Post an Advertisement
$68 until it's SOLD!

Post an Ad | Advertiser Login | Ways of Selling



Sort by Date Posted 20 results/page

2 vehicles

Any Category | Advanced Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection		Dyna 150 3.0M	Any	Any	2021	Any	Any	Any	Available
	Toyota Dyna 150 3.0M		$82,800	$9,010 /yr	28-Oct-2021	2,982 cc	-	Truck	Available
	Toyota Dyna 150 3.0M		$90,800	$10,780 /yr	20-Jan-2021	2,982 cc	-	Truck	Available

Toyota Dyna 150 3.0M — Fuel Type: Diesel
"G" Plate Registered. Ready Stock! Comes With 3 Years Warranty. 2 x Free Servicing. 1 Year Free Road Tax. Fast And Easy Loan Approval

Toyota Dyna 150 3.0M — Fuel Type: Diesel
... height aluminum box with checker plate flooring worth $4500. 1 owner only, low mileage done. G-plate lorry means low ERP rates...

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

... Toyota, Honda, Nissan, Mitsubishi & BMW. There are plenty of cars for sale, from vans, trucks, sedan cars, luxury cars, sports ... cars & OPC cars. You can also buy from a car auction, look up car loans, low mileage cars, car brands, carpark rates & car insurance. Find buy used ... Singapore, used Dyna 150 3.0M Singapore, used Dyna 150 3.0M, used vehicles Singapore or even buy used Dyna 150 3.0M Singapore. We have new car dealers, ... dealers, and used car dealers on our site. Find new car price lists, new car launches and new car promotions. Visit our partner sites for job openings for Singapore jobs, real estate, mover, car performance parts, car discussion, forum discussion, commercial vehicle leasing & COE results.

All prices and ... on Sgcarmart.com are gathered from sources and based on algorithms that are believed by Sgcarmart.com to be reliable, but no assurance can be given ... complete or current. Sgcarmart.com does not assume any responsibility for errors or omissions or warrant the accuracy of this information.

TeamWork Garage Pte Ltd

TeamWork Garage Pte Ltd
53 Ubi Avenue 1 #01-23/24 Spore 408934
Paya Ubi Industrial Park
Tel : 6844 2475
E-mail : claims@teamworkgarage.com
ROC number : 201015366H

LKK Auto Consultants hence notify the Repairer of the following:
- 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
- All supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

NTUC

Thevan
82235769
4days
5/7/22
1500

REPAIR PERFORMA INVOICE

Vehicle number	YQ6768T
Make / Model	TOYOTA DYNA
Chassis number	JHHAGV4630K002094
Accident date	29/6/22
Reference	2206-38

Qty	Particulars	Unit Price - SGD $
	PARTS REPLACEMENT - LIST ITEMS	
1	TAILGATE	1303.50 / DT
2	TAILGATE SIDE BRACKET	230.56 / NEC
2	TAILGATE STOPPER	90.20 X SU
4	TAILGATE LOWER HINGE	654.28 / DT
1	TAILGATE LOWER MEMBER	758.67 / DT
2	TAILGATE SIDE PIN	66.30 X SU
2	TAILGATE SIDE HINGE	279.18 / BT
2	TAILGATE SIDE LOCK	353.98 X SU
1	TAILGATE REINFORCEMENT	712.91 / BT
2	TAILLAMP PANEL	437.58 / BT
2	TAILLAMP	541.64 / CIN
2	TAILLAMP REFLECTOR	91.96 / CIN
1	SPARE TYRE CARRIER	286.99 X SU
1	SPARE TYRE BRACKET	142.23 BT X2
2	REAR NUMBER PLATE LAMP	129.36 X SU
1	TOW HOOK	165.00 BT
1	EXHAUST SILENCER	899.91 X SN70
1	EXHAUST SILENCER MOUNTING	47.85 X SU
		7192.10
	Less 25%	1798.02
		5394.08
	PARTS REPLACEMENT - SPECIAL NETT ITEMS	
1	TAILGATE STICKER - TOYOTA	70.00 / NEC40
1	TAILGATE STICKER - DYNA	70.00 / NEC40
1	TAILGATE STICKER - 60KM/H	70.00 / NEC40
1	TAILGATE STICKER - 13 PAX	70.00 / NEC40
1	REAR NUMBER PLATE	60.00 MIS40
1	REAR STEP PANEL (AFTER MARKET)	350.00 BT 200
1 SET	REVERSE SENSOR	250.00 200(41
1	ALUMINIUM WOODEN BOARD	800.00 X SU
	Subtotal	1740.00
	Balance C/F	7134.08
	LABOUR AND MISCELLANEOUS CHARGES	
1	CHECK WIRING AND LIGHTNING SYSTEM	120.00 30
2	REMOVE & REPLACE TAILGATE ATTACHMENT	150.00 30
3	REMOVE & REPLACE REVERSE SENSOR	150.00 30
4	PANEL BEATING ON AFFECTED AREAS	1000.00 600
5	SPRAY PAINTING ON AFFECTED AREAS 300	1000.00 600 900
6	APPLY ANTI RUST ON AFFECTED AREAS	150.00 30
	labour to remove rear canopy 800 Subtotal	2570.00
	labour to straighten chassis 200 Grand total	9704.08

5400

F: 3800

RP: 5

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 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	30/06/2022 17:23 (SGT)
Reported by	Driver
Date of Accident	29/06/2022 04:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE TWDS AYE EXIT 7D
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YQ6768T

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	T.J. SEANG TRADING PTE. LTD.
Company Reg No	201019986G
Email Address	keithlian@hotmail.com
Mobile Phone No	(Phone) +65-88531303
Alternative Phone No	-

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	2755

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00069162200

DRIVER

Name of Driver	GUNASEKARAN JEYAKKUMAR
Passport No/FIN	G8239522P
Date Of Birth	22/08/1981
Occupation	Outdoor

Driving Pass	19/11/2014
experience	7 YEARS AND 7 MONTHS
er	Male
e Number	(Phone) +65-88531303
Phone Number	-
ail Address	keithlian@hotmail.com
Address	23 KAKI BUKIT RD 3
Address complement	-
Postcode	415812
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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	KALAM
Gender	Male

PASSENGER 2

Name	AZOM
Gender	Male

PASSENGER 3

Name	KARUIN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Geylang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008486999
Alt. Police Station Phone No	(Fax) +65-68486799
Police Station Address	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT.

ATTACHMENT(S)

Accident photos available for attachment?	Yes
Is there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLD980H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	GUNASEKARAN JEYAKKUMAR
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK & BACK
Injured person in which vehicle?	YQ6768T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	KALAM
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK & BACK
Injured person in which vehicle?	YQ6768T
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

INJURED 3

Name of injured person	AZOM
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK & BACK
Injured person in which vehicle?	YQ6768T
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

...jured person	KARUIN
...	Male
...	-
...ess Complement	-
...Code	-
...oximate Age Years Old	-
...uries Sustained	-
...ured person in which vehicle?	NECK & BACK
...were seat belts worn?	YQ6768T
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 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.

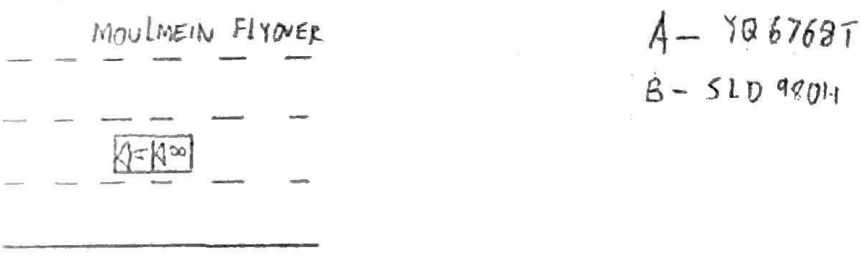
(collectively the "**Purposes**")

(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	Witnessed by Reporting Centre Personnel
	G. Jaya Kumar.	ROSLINDA BINTE A. WAHAB 30/06/12

Sketch Plan



A – YQ 6768T

B – SLD 9801H

Describe Circumstances of the Accident

Refer to police report

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

G. Jaya Kumar

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

ROSLINDA BINTI A WAHAB

Witnessed by Reporting Centre Personnel 20/06/22

SINGAPORE POLICE FORCE

Police Station Of Origin.
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

CONTINUATION OF REPORT

Report No. T/20220[illegible]

Driver Name	GUNASEKARAN JEYAKKUMAR	ID No.	G8239522P
Related Vehicle	SLD980H (Car)	Contact No.	88531303
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	Slight

Brief Details.

On the above mentioned date, time and location. I was driving along said expressway on the 3rd lane at about 60-70km/h suddenly out of the sudden I felt an impact from the rear. I then exited my vehicle to make a check and discovered that another vehicle has hit onto my lorry and its engine block was totally destroyed and both the driver and the passenger ran away along the road to exit the express way.