

ASS. REC. BY: Thuan

REF: CS/AIS22006391/UY3

**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: \_\_\_\_\_

N/S	O/S
X	

(Policy Condition)  
Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value: 98k  
 IDAC Accident Rpt: \_\_\_\_\_ 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: YQ6788T 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: 3HT1AGVU630K002094  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: In order / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Mod: Nil / S/Rim / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: 19R15C  
 R: 19R15C  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or \_\_\_\_\_  

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

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
	MV: <u>98k</u>
	Renote: <u>38/22</u>
	MV: <u>59878</u>

Date/Time, File Pass 10?  : Prell. Report  
 : Final Report

1) \_\_\_\_\_  
 Date/Time, File Return 10? \_\_\_\_\_  
 2) \_\_\_\_\_

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

Days Of Repair: \_\_\_\_\_  
 Resurvey No. of Trip: \_\_\_\_\_

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

Survey Fee:	_____
Transportation:	_____
_____ S + RS _____ SI	_____
Photos	_____
Others	_____
TOTAL	_____

**Vehicle PARF/COE Rebate for Registered Vehicle**

**Vehicle Owner Particulars**

Owner ID Type:	Company
Owner ID:	986G
<b>Vehicle Details</b>	
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
<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:	24 Apr 2032
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$39,381.00
COE Rebate Amount:	\$38,122.00
<b>Total Rebate Amount:</b>	<b>\$38,122.00</b>

The information contained herein is correct as at 19 Aug 2022

OK



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Get 1 month's Advertise for just  
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2021 Toyota Dyna 150 3.0M  
 Fuel Type: Diesel  
 150 Plate Registered. Ready Stock! Comes With 3 Years Warranty, 2 x Free Servicing, 1 Year Free Road Tax, Fast And Easy Loan Approval.  
 J&K Auto Pte Ltd  
 Phone: 64942122

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 at GREAT PRICES

Sort by Date Posted 20 results/page

2 vehicles



Dyna 150 3.0M

Any Category

Advanced Search

Clear

Search Selection	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
	Dyna 150 3.0M		Any	Any	2021	Any	Any	Any	Available
	Toyota	Dyna 150 3.0M	\$82,800	\$9,000 /yr	28-Oct-2021	2,982 cc	-	Truck	Available
Fuel Type: Diesel 150 Plate Registered. Ready Stock! Comes With 3 Years Warranty, 2 x Free Servicing, 1 Year Free Road Tax, Fast And Easy Loan Approval. J&K Auto Pte Ltd Phone: 64942122									
	Toyota	Dyna 150 3.0M	\$90,800	\$10,780 /yr	29-Jan-2021	2,982 cc	-	Truck	Available
Fuel Type: Diesel Color: freight aluminum box with checker plate flooring worth \$4500. 1 owner only, low mileage done. G-plate lorry means low ERP rates... Phone: 72342122									

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 100 advertisements, view Expired ads

20 results/page

- |                                    |                                     |                                      |                              |                            |
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TeamWork Garage Pte Ltd

53 Ubi Avenue 1 #01-23/24

Paya Ubi Industrial Park

Tel : 6844 2475

E-mail : claims@teamworkgarage.com

ROC number : 20105366H

REPAIR PERFORMANCE INVOICE

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 legal action(s) is allowed

• Any complementary item(s) must be resurveyed and

is subject to final approval from Insurance Company

NTUC

Thruvan  
82235769

4 days up

5/7/22

1500

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	MC
2	TAILGATE STOPPER	90.20	XSL
4	TAILGATE LOWER HINGE	654.28	DT
1	TAILGATE LOWER MEMBER	758.67	DT
2	TAILGATE SIDE PIN	66.30	XSL
2	TAILGATE SIDE HINGE	279.18	BT
2	TAILGATE SIDE LOCK	353.98	XSL
1	TAILGATE REINFORCEMENT	712.91	BT
2	TAILLAMP PANEL	437.58	BT
2	TAILLAMP	541.64	CL
2	TAILLAMP REFLECTOR	91.96	CL
1	SPARE TYRE CARRIER	286.99	XSL
1	SPARE TYRE BRACKET	142.23	BTXZ
2	REAR NUMBER PLATE LAMP	129.36	XSL
1	TOW HOOK	165.00	BT
1	EXHAUST SILENCER	899.91	XSL
1	EXHAUST SILENCER MOUNTING	47.85	XSL

7192.10  
Less 25% 1798.02  
5394.08

PARTS REPLACEMENT - SPECIAL NETT ITEMS

1	TAILGATE STICKER - TOYOTA	70.00	MC40
1	TAILGATE STICKER - DYNA	70.00	MC40
1	TAILGATE STICKER - 60KM/H	70.00	MC40
1	TAILGATE STICKER - 13 PAX	70.00	MC40
1	REAR NUMBER PLATE	60.00	MC40
1	REAR STEP PANEL (AFTER MARKET)	350.00	BT 200
1 SET	REVERSE SENSOR	250.00	200
1	ALUMINIUM WOODEN BOARD	800.00	XSL 5400

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	1000.00	600 200
6	APPLY ANTI RUST ON AFFECTED AREAS	150.00	30

labour to remove rear canopy 300  
labour to straighten chassis 200  
Subtotal 2570.00  
Grand total 9704.08

F: 5850  
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 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	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  
experience  
er  
e Number  
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

19/11/2014  
7 YEARS AND 7 MONTHS  
Male  
(Phone) +65-88531303  
-  
keithlian@hotmail.com  
23 KAKI BUKIT RD 3  
-  
415812  
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? .....  
Translator's name .....  
Translator's ID .....  
Translator's phone number .....  
Translator's email .....  
Original language used in the statement .....

No  
2  
Yes  
No  
Yes  
4  
No  
-  
-  
-  
-  
-

PASSENGER 1

Name .....  
Gender .....

KALAM  
Male

PASSENGER 2

Name .....  
Gender .....

AZOM  
Male

PASSENGER 3

Name .....  
Gender .....

KARUIN  
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  
Geylang Neighbourhood Police Centre  
(Phone) +65-18008486999  
(Fax) +65-68486799  
1 Cassia Link Singapore 397618  
No  
-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT.

MENT(S)  
Accident photos available for attachment?  
Are there any video captured by Car Camera?

Yes  
No

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SLD980H  
Vehicle Manufacturer -  
Vehicle Model -  
Vehicle Variant -  
Vehicle Colour Private car  
Vehicle Category -  
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

..... injured person  
.....  
..... Complement  
.....  
..... Side  
.....  
..... Estimate Age Years Old  
..... Sustained  
..... injured person in which vehicle?  
..... were seat belts worn?  
..... Was this injured conveyed to hospital by ambulance?

KARUIN  
Male

-

-

-

-

-

NECK & BACK  
YQ6768T

-

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)**

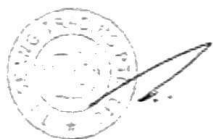
I understand, acknowledge, agree and consent that

(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.



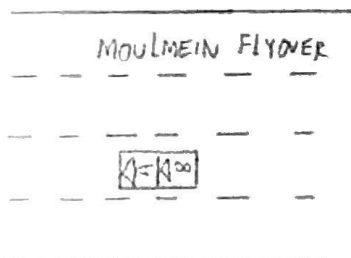
\_\_\_\_\_  
Policyholder's Signature / Date & Time

*G. Jaya Kumar*

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

*ROLLINDA BINTI A. WAHAB*  
Witnessed by Reporting Centre Personnel 30/06/12

Sketch Plan




A - YQ 6768T  
B - SLD 980H

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

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

  
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



T/20220624/2162

Report No. T/20220624/2162

**CONTINUATION OF REPORT**

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.