



Venda Engineering & Trading Pte Ltd

GST / Company Reg No.: 200411725H

Quotation

From : VENDA ENGINEERING & TRADING PTE LTD 8 TUAS AVENUE 18 SINGAPORE 638892 Officer in Charge : HOH PEI JIN Tel : Email :	Customer : GOLDBELL LEASING PTE LTD 59 SENOKO ROAD SINGAPORE 758123 Attn : Tel : 6494 2800 Fax No. : 6861 7097
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Quotation No. : CQ022-0710169	Quotation Date : 29/07/2022	Terms : 30 DAYS
Vehicle No. : GBF4919T	Chassis No. : FEA01BA20365	Policy Number : 29152864
Model : CANTER FEA01BR2SDEB (CBU)	Date of Accident : 26/07/2022	
Third Party Insurer : ALLIED	TP Vehicle No. : YQ7082G	
Remarks :		

ITEM	DESCRIPTION	Qty	UNIT PRICE	AMOUNT (SGD)
1	REPLACE & REPAIR RH SIDE FREEZER BOX ✓ BR	1	400 500.0000	500.00
2	PUTTY & SPRAY PAINT RH SIDE FREEZER BOX ✓	1	400 500.0000	500.00

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:

Sub Total 1,000.00
Discount (0.00)
GST(7.00%) 70.00
Total (SGD) 1,070.00

VENDA ENGINEERING & TRADING PTE LTD



Authorised Signature

Please conduct the survey at
Venda Engineering @ 8 Tuas Avenue 18 Level 5 Singapore 638892

Steve (LKK)
1/8/22, 2:00pm
P/P
M/P
3/8/22

We accept the above quotation.

Customer's Name & Signature
Company Stamp/Date

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Mailing Address : No.1, Sunview Road, #08-15 Eco-Tech@Sunview, Singapore 627615
Contact Number (HQ) : (Tel) : 6355 9014 (Purchasing Dept.) 6355 9015 (Sales Dept.)
(Fax) : 6254 0424
E-mail : venda_eng@singnet.com.sg



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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	196N
Vehicle Details	
Vehicle No.:	GBF4919T
Vehicle to be Exported:	Yes
Intended Deregistration Date:	07 Aug 2022
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEA01BR25DEB (CBU)
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	4P10C34919
Chassis No.:	FEA01BA20365
Maximum Power Output:	-
Open Market Value:	\$28,714.00
Original Registration Date:	18 Nov 2016
First Registration Date:	18 Nov 2016
Transfer Count:	0
Actual ARF Paid:	\$1,436.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	17 Nov 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$20,781.00
COE Rebate Amount:	\$8,889.00
Total Rebate Amount:	\$8,889.00

The information contained herein is correct as at 30 Jul 2022

OK

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	27/07/2022 09:35 (SGT)
Reported by	Driver
Date of Accident	26/07/2022 14:45 (SGT)
Exact Location of Accident	2 Stamford Rd, Singapore 178882
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF4919T
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	GOLDBELL LEASING PTE LTD
Company Reg No	1XXXXX196N
Email Address	isaacngcl@gbl.com.sg
Mobile Phone No	(Phone) +65-89336100
Alternative Phone No	(Office) +65-64942897

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Canter
Variant	FEA01BR2SDEB (CBU)
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	2998

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	29152864

DRIVER

Name of Driver	MUHAMMAD JAMAL AFSAL BIN HABIBU RAHMAN
NRIC No	SXXXXX098C
Date Of Birth	05/11/1986
Occupation	Outdoor

Date Of Driving Pass	31/07/2009
Driving experience	13 YEARS
Gender	Male
Mobile Number	(Phone) +65-89336100
Alt. Phone Number	-
Email Address	isaacngcl@gbf.com.sg
Address	BLK 121 BUKIT MERAH VIEW #04-68
Address complement	-
Postcode	151121
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	UNKNOWN
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

ON 26/07/2022 AT ABOUT 1445HRS I WAS DRIVING VEHICLE A (GBF4919T) ALONG 2 STAMFORD ROAD, SWISSOTEL. WHILE AT THE LOADING BAY I WAS ABOUT TO MOVE OFF FROM THE BAY SUDDENLY VEHICLE B (YQ7082G) REVERSING AND COLLIDED ONTO VEHICLE A LEFT SIDE POTION. NOBODY WAS INJURED DURING THE ACCIDENT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YQ7082G
Vehicle Manufacturer	-

Model	-
Variant	-
Colour	-
Vehicle Category	-
Name of Driver	Commercial vehicle
Contact Number	-
Address	(Phone) +65-86486988
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLANIMPORTANT 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Sketch Plan

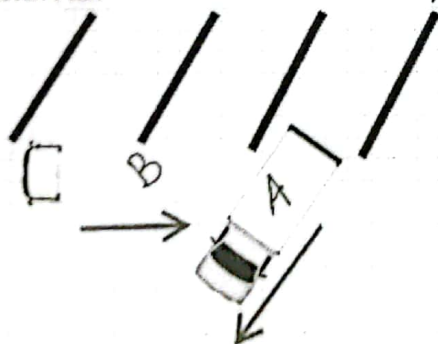
Driver's Signature (If driver is not the policyholder) / Date & Time

26/07/22

10/0

Witnessed by Reporting Centre Personnel

NAZREEN



A - GBF4919T

B - YQ7082G

SWISSOTEL LOADING BAY

Describe Circumstances of the Accident

ON 26/07/2022 AT ABOUT 1445HRS I WAS DRIVING VEHICLE A (GBF4919T) ALONG 2 STAMFORD ROAD, SWISSOTEL. WHILE AT THE LOADING BAY I WAS ABOUT TO MOVE OFF FROM THE BAY SUDDENLY VEHICLE B (YQ7082G) REVERSING AND COLLIDED ONTO VEHICLE A LEFT SIDE POTION. NOBODY WAS INJURED DURING THE ACCIDENT.

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

Witnessed by Reporting Centre Personnel

26/07/22 2610

NAZREEN