

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/AG/22007279/urc**ASSIGNMENT**

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: 6BC 6899Uat Workshop m/s 11 u's

of _____

Insured: SLV 5571C

Policy No. _____

Claims No. C10016652/JL

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

Bal. or Market Value: \$10k.

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: 3 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: Dep 10k.

Vehicle: IN / OUT

Veh No: 6BC 6899U Yr Regn: 15/107/13

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

Truck / Trailer or (M)Make: Toyota hiace C.C. 2982Colour: white A/C: Insured / Std / NI / NASp. Reading: 248990 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTFHT02PX00117631Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195R15

R: _____

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

TOYO / YOKO or Anstone

Front

R/Bal. 6 mm

Rear

R/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 26/07/22D.O.I. 1/8/22

Survey held at _____

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

O/S Frt.

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

Date / Time Action / Instruction 11/8/22 14-07-202311/8/22 14-07-202311/8/22 14-07-2023 11/8/22 14-07-2023 11/8/22 14-07-2023 (red 3432.20, 72%)

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 11/8/22-typistDays Of Repair: 3Resurvey No. of Trip: 1

Survey Fee:

Transportation:

) S + RS SI

) Photos

) Others

Report Format: TPLump Sum H.B.H: (\$ 1300)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

TOTAL

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

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	196N
Vehicle Details	
Vehicle No.:	GBC6899U
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Jul 2022
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE MANUAL
Primary Colour:	Yellow
Manufacturing Year:	2013
Engine No.:	1KD2292279
Chassis No.:	JTFHT02PX00117631
Maximum Power Output:	-
Open Market Value:	\$25,820.00
Original Registration Date:	15 Jul 2013
First Registration Date:	15 Jul 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:	14 Jul 2023
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$58,502.00
COE Rebate Amount:	\$5,599.00
Total Rebate Amount:	\$5,599.00

The information contained herein is correct as at 29 Jul 2022

OK

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Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 29 Jul 2022 / 17:03:36

Receipt Date/Time : 29 Jul 2022 / 17:03:36

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220729-003438

Previous Receipt No. :

**S/N Item Description/
Business Transaction Reference
No.**

Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
--------------------------------	-------------------------	-------------------------------

Result of Insurance Enquiry - SLV5571C

As at 26 Jul 2022/08:50:00

Insurance Co: AUTO & GENERAL INSURANCE (SINGAPORE) PTE.
LIMITED

1 Insurance Enquiry - SLV5571C
Enquiry Fee
20220729170153468289

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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PML Unit With Warranty & Servicing Package.



You Only Live Once. Last Chance
To Buy Before It's Taken Off
Market 2 Aug 12pm.
Vivre Auto Pte Ltd StarAd



Sort by results/page

2 vehicles



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	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	hiace		Any	Any	2013	Any	Any	Any	Available
	Toyota	Hiace 3.0M DX	\$22,800	\$16,250 /yr	27-Dec-2013	2,982 cc	-		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. At ABWIN (1994) Pte Ltd Posted: 30-Jul-2022								
	Toyota	Hiace Commuter 3.0A High Roof	\$28,800	N.A	25-Mar-2013	2,982 cc	-	Bus	Available
	Fuel Type: Diesel New Paintwork! Wear and Tear Replace! Low Mileage and Smooth Transmission! No repair Needed! Drive With Peace Of Mind! Full Loan... Bell KSL Auto Pte Ltd Posted: 18-Jul-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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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	26/07/2022 18:56 (SGT)
Reported by	Driver
Date of Accident	26/07/2022 08:50 (SGT)
Exact Location of Accident	Marina Blvd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC6899U
-----------------------------	----------

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) +65-92346539
Alternative Phone No	(Office) +65-64942897

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	Manual
CC	2982

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D22099240

DRIVER

Name of Driver	MUHAMMAD HAFIZ BIN IBRAHIM
NRIC No	SXXXX964C
Date Of Birth	01/06/1996
Occupation	Outdoor

Date Of Driving Pass 14/06/2016
 Driving experience 6 YEARS AND 1 MONTH
 Gender Male
 Mobile Number (Phone) +65-92346539
 Alt. Phone Number -
 Email Address isaacngcl@gbf.com.sg
 Address BLK 302 JURONG EAST STREET 32 #06-18
 Address complement -
 Postcode 600302
 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 Collision - Change/cross lane
 Weather Conditions Raining
 Road Surface Wet

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 0850HRS, I WAS DRIVING VEHICLE A (GBC6899U) ALONG MARINA BOULEVARD MAKING A RIGHT TURN TO MARINA GARDENS DRIVE, SUDDENLY VEHICLE B (SLV5571C) ON THE MOST RIGHT LANE, RIGHT TURN LANE ONLY. SUDDENLY VEHICLE B DECIDED TO GO STRAIGHT AND COLLIDED EHILE I WAS TURNING. NO INJURY.

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 SLV5571C
 Vehicle Manufacturer Toyota

Vehicle Model	Wish
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NEO PECK ENG
NRIC No	SXXXX258D
Contact Number	(Phone) +65-83836602
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 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")

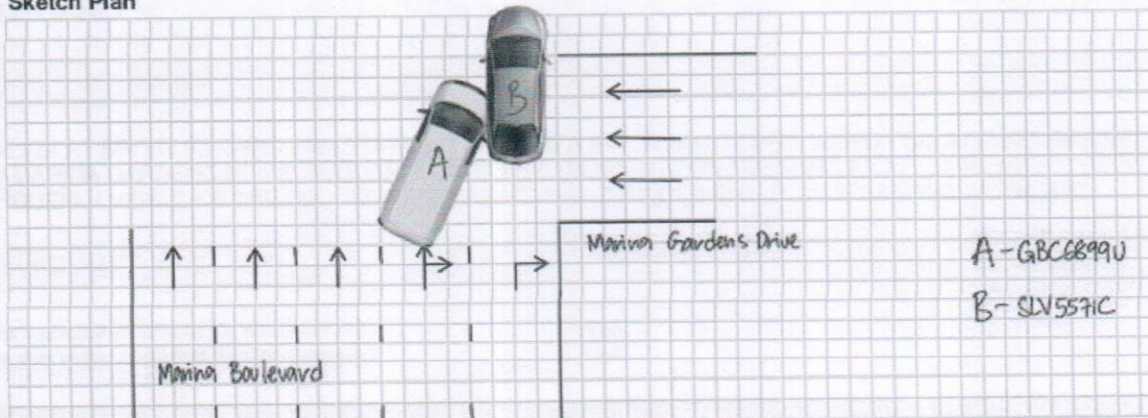
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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

Sketch Plan

Describe Circumstances of the Accident

ON 26/07/2022 AT ABOUT 0850HRS, I WAS DRIVING VEHICLE A (GBC6899U) ALONG MARINA BOULEVARD MAKING A RIGHT TURN TO MARINA GARDENS DRIVE, SUDDENLY VEHICLE B (SLV5571C) ON THE MOST RIGHT LANE, RIGHT TURN LANE ONLY. SUDDENLY VEHICLE B DECIDED TO GO STRAIGHT AND COLLIDED EHILE I WAS TURNING. NO INJURY.

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 26/09/12 (740



Witnessed by Reporting Centre
Personnel Amin

FINAL BILL

29-07-2022

GBC6899U220726

GBC6899U

Toyota Hiace

Manual

Name: Auto & General Insurance (Singapore) Pte Ltd

Address: Motor Claims Department

190 Clemenceau Avenue #03-01

Singapore Shopping Centre Singapore 239924

Ref Date:

Ref No:

Vehicle No:

Model / Make:

[illegible]

Total Parts & Labour of estimate for damaged vehicle

\$ 4,732.20

Total amount in Lumpsum Basis for repaired vehicle

\$ 3,200.00

SDL Three Thousand Two Hundred Only

Liu's Bro Auto Engrg Wks

Not Authorized
llh
1/8/22

1/5 $\frac{1300}{3 \text{ days}}$

Subm. to: 15

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) for 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

$$\begin{array}{r} 2-1487 \\ 22 \\ \hline 1115.28 \\ 520 \\ \hline 1635.28 \\ 222 \\ \hline 1308. \end{array}$$