

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:

5

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

L1A 21637

Date / Time

Action / Instruction

Rep / IK.

3/11/22 1/5 @ 4800 informed Susan @ 05 Days (Red \$5,971.70 / 55%)

Veh No:

GBF8354X

Yr Regn:

23/103/17

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

Truck / Trailer or (air)

Make:

Toyota Lince

c.c

2982

Colour:

Red

A/C:

Insured / Std / NI / NA

Sp. Reading

185386

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

KDH 201 019 4934

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: N/A / S/Rim / STD A/Rim or

Tyre Size:

F:

195 R15

R:

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

TOYO / YOKO or

Austone

Front

Rear

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

11/10/22

D.O.I.

20/10/22

Survey held at

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

O/S Frt, O/S Body.

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

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

Site Insp (\$

) S + RS, SI

☐

Interview (\$

) Photos

☐

Tech. Invs (\$

) Others

☐

Weekend (\$

)

Report Format :

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

TOTAL



Liu's Brother Auto Engineering Workshop

No. 1 Kaki Bukit Avenue 6 #01-01 AutoBay @ Kaki Bukit Singapore 417883

UEN No: 53291793J

liusbro@gmail.com

Tel: 67411730

ESTIMATE

Name: MS First Capital Insurance Limited

Address: Motor Claims Department

16 Raffles Quay #42-01

Hong Leong Building

Singapore 048581

Ref Date:

19-10-2022

Ref No:

GBF8354X221011

Vehicle No:

GBF8354X

Model / Make:

Toyota Hiace

Capacity: 2982 cc

DX 3.0 M

| Item # | Damaged Area | Description | Unit Price | Qty | Estimation / Quotation | N / SN | Cost Of Repair |
|--------|--------------|---|-------------|-----|------------------------|--------|----------------|
| 1 | Front | Bumper | \$ 681.20 | 1 | \$ 681.20 | | ✓ |
| 2 | | Bumper Side Bracket 2/s | \$ 145.50 | 1 | \$ 145.50 | | X |
| 3 | | Bumper Clips 1 set | \$ 50.00 | 1 | \$ 50.00 | | ✓ |
| 4 | | Head Lamp 0/s | \$ 866.10 | 1 | \$ 866.10 | | ✓ |
| 5 | | Door 0/s | \$ 1,455.20 | 1 | \$ 1,455.20 | | ✓ |
| 6 | | Door LTA "Corporate" ROC Detail Sticker | \$ 50.00 | 1 | \$ 50.00 | SN | 30 SN |
| 7 | Sliding door | Door "Corporate" Advertisement & Artwork | \$ 150.00 | 1 | \$ 150.00 | SN | ✓ SN |
| 8 | | Step Garnish 0/s | \$ 241.20 | 1 | \$ 241.20 | | ✓ |
| 9 | | Door Rear Pillar 0/s | \$ 665.30 | 1 | \$ 665.30 | | X |
| 10 | | Sliding Door 0/s | \$ 1,655.10 | 1 | \$ 1,655.10 | | X |
| 11 | | Fender 0/s | \$ 1,692.10 | 1 | \$ 1,692.10 | | X |
| 12 | | Door View Mirror Assy 0/s | \$ 450.00 | 1 | \$ 450.00 | | ✓ |
| 13 | | Rear Hub Cap 0/s | \$ 180.00 | 1 | \$ 180.00 | | X |
| 14 | | To check all wiring & electrical component for proper function | | | \$ 50.00 | | 20 |
| 15 | | To check and re-adjust wheel alignment | | | \$ 80.00 | | 60 |
| 16 | | To remove, replace and transfer front door panel, fitting and mechanisms | | | \$ 80.00 | | 60 |
| 17 | | To remove, replace and transfer rear sliding door panel, fitting and mechanisms | | | \$ 80.00 | | 60 |
| 18 | | To apply Rust Proofing, reseal tuff-coating treatment on accident area | | | \$ 100.00 | | 60 |
| 19 | | Labor for Panel Beating, Cut, Weld, Straighten & Replacing Parts Etc | | | \$ 900.00 | | 600 |
| 20 | | To putty & spray painting & including touch up paint on accident affected areas | | | \$ 1,200.00 | | 1000 |

Total Parts & Labour of estimate for damaged vehicle

\$ 10,771.70

Total amount in Lumpsum Basis for repaired vehicle

\$ -

SDL

Liu's Bro Auto Engrg Wks

Not Acknowledged
hu
no way
20/10/22
2/s # 4800/
5 days

Liu's 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:

Date:

P-53988
252
4049.1
180
1860
6089.1

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 Actual 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 | 12/10/2022 23:30 (SGT) |
| Reported by | Driver |
| Date of Accident | 11/10/2022 15:45 (SGT) |
| Exact Location of Accident | Singapore |
| Additional Location Information | BLK 892A TAMPINES AVE 8 OPEN CARPARK |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | GBF8354X |
|-----------------------------|----------|

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 | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Toyota |
| Model | Hiace |
| Variant | DX 3.0 M |
| Exact purpose for which vehicle was being used at time of accident | Private hire |
| Are you claiming under your own insurance policy for repair to your vehicle? | No - Claiming third party |
| Vehicle Category | Commercial vehicle |
| Transmission | Manual |
| CC | 0 |

INSURANCE COMPANY

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

DRIVER

| | |
|----------------|---------------------------|
| Name of Driver | MOHAMAD KHAIRUL BIN ROSLI |
| NRIC No | SXXXX131I |
| Date Of Birth | 12/02/1988 |
| Occupation | Outdoor |

| | |
|--|---|
| Date Of Driving Pass | 09/02/2017 |
| Driving experience | 5 YEARS AND 8 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-87426242 |
| Alt. Phone Number | - |
| Email Address | IsaacNgCL@goldbellcorp.com |
| Address | HDB Bedok North Green, 541 Bedok North Street 3 |
| Address complement | #11-1240 |
| Postcode | 460541 |
| 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) | 7 |
| 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 | QISTINA |
| Gender | Female |

PASSENGER 2

| | |
|--------------|------|
| Name | AQIL |
| Gender | Male |

PASSENGER 3

| | |
|--------------|--------|
| Name | FAZRUL |
| Gender | Male |

PASSENGER 4

| | |
|--------------|---------|
| Name | SHAHRUL |
| Gender | Male |

PASSENGER 5

| | |
|--------------|----------|
| Name | QUSHAIRI |
| Gender | Male |

PASSENGER 6

| | |
|--------------|--------|
| Name | AISHAH |
| Gender | Female |

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

AFTER CHECKING MY BLINDSPOT, IT WAS CLEARED HENCE I SLOWLY REVERSED MY VEHICLE TOWARDS THE BIN CENTRE. AS I WAS REVERSING SLOWLY, SUDDENLY A VEHICLE APPEARED FROM MY RIGHT SIDE MAKING A WIDE TURN AND COLLIDED ONTO MY VEHICLE RIGHT SIDE PORTION.

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 | GZ3385A |
| Vehicle Manufacturer | Toyota |
| Vehicle Model | Hiace |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Commercial vehicle |
| Name of Driver | NG SEOW CHUAN |
| NRIC No | SXXXXX070E |
| Contact Number | (Phone) +65-91218235 |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | 1 |

SKETCH PLAN

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 Officer
Aizam Bin Atan
Witnessed by Reporting Centre Personnel

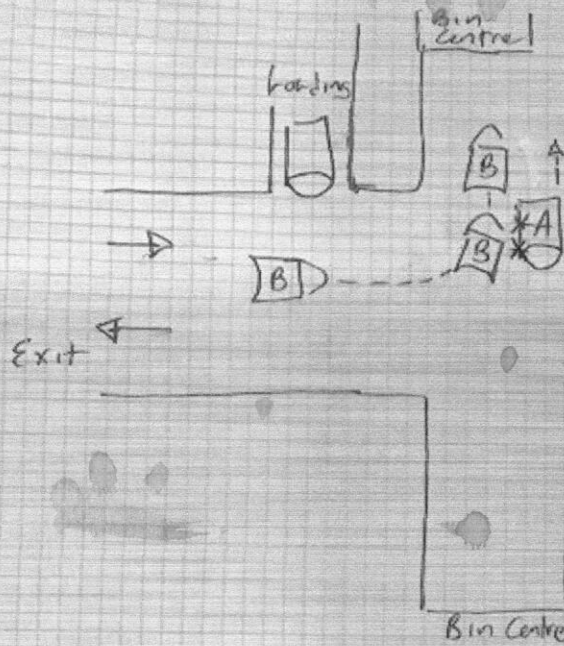
Sketch Plan

REFER TO ATTACHED ACCIDENT DIAGRAM

ACCIDENT DIAGRAM

Ver. Jan 2022

BLK 892 A Rampines Ave 8



A: GDF 8354X
B: G2 3385A

Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer
Alzam Bin Alan
Witnessed by Reporting Centre
Personnel


Describe Circumstances of the Accident

AFTER CHECKING MY BLINDSPOT, IT WAS CLEARED HENCE I SLOWLY REVERSED MY VEHICLE TOWARDS THE BIN CENTRE. AS I WAS REVERSING SLOWLY, SUDDENLY A VEHICLE APPEARED FROM MY RIGHT SIDE MAKING A WIDE TURN AND COLLIDED ONTO MY VEHICLE RIGHT SIDE PORTION.

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 Officer
Aizam Bin Atan

Witnessed by Reporting Centre
Personnel

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

| Vehicle Owner Particulars | |
|-------------------------------------|-------------------------|
| Owner ID Type: | Company |
| Owner ID: | 196N |
| Vehicle Details | |
| Vehicle No.: | GBF8354X |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 19 Oct 2022 |
| Vehicle Make: | TOYOTA |
| Vehicle Model: | HIACE DX 3.0 M |
| Primary Colour: | Orange |
| Manufacturing Year: | 2016 |
| Engine No.: | 1KD2607479 |
| Chassis No.: | KDH2010194934 |
| Maximum Power Output: | - |
| Open Market Value: | \$31,865.00 |
| Original Registration Date: | 23 Mar 2017 |
| First Registration Date: | 23 Mar 2017 |
| Transfer Count: | 1 |
| Actual ARF Paid: | \$1,594.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 22 Mar 2027 |
| COE Category: | C - Goods Vehicle & Bus |
| COE Period(Years): | 10 |
| QP Paid: | \$48,901.00 |
| COE Rebate Amount: | \$21,637.00 |
| Total Rebate Amount: | \$21,637.00 |

The information contained herein is correct as at 19 Oct 2022

OK


INSURER ENQUIRY

Find insurer

Vehicle reg. no.

GZ3385A

Date of Accident

11/10/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance MS First Capital Insurance Ltd

Period of Insurance 24/11/2021 - 23/11/2022

Requested By Susan Low (Liu's Brother Auto...

Requested Date 19/10/2022 10:16

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**



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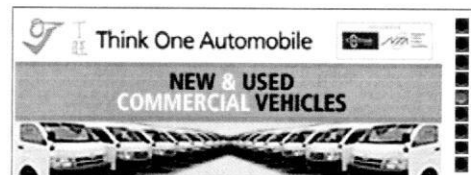
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Continental Sedan For Family.
Short-term Drive Or Renew COE.
1 Owner.
Direct Owner StarAd



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Sort by Date Posted 20 results/page

43 vehicles










Hiace

Any Category

Advanced Search

Search

| | Make | Model | Price | Depreciation | Reg Date | Eng Cap | Mileage | Veh Type | Status |
|--|-------------|-----------------------------------|----------|--------------|-------------|----------|-----------|----------|-----------|
| Search Selection | Hiace | | Any | Any | 2017 | Any | Any | Any | Available |
|  | Toyota | Hiace 3.0M DX | \$56,800 | \$11,960 /yr | 21-Jul-2017 | 2,982 cc | - | Van | Available |
| Fuel Type: Diesel Cheapest in the market! Fully-covered panel manual diesel van. Well maintained engine and gearbox, no repair needed. Good condition... SG Motor Link Pte Ltd Posted: 20-Oct-2022 | | | | | | | | | |
|  | Toyota | Hiace 3.0A DX | \$52,800 | \$12,390 /yr | 23-Jan-2017 | 2,982 cc | - | Van | Available |
| Fuel Type: Diesel Free \$300 worth of accessories vouchers! \excellent condition, Toyota Hiace 5 door auto, good to start up business, well maintained and... SG Motor Link Pte Ltd Posted: 19-Oct-2022 | | | | | | | | | |
|  | Toyota | Hiace 3.0M | \$55,800 | \$11,870 /yr | 03-Jul-2017 | 2,982 cc | - | Van | Available |
| Fuel Type: Diesel Free \$300 worth of vouchers, restaurant or hotels vouchers! Super rare one and only light pink Toyota Hiace, excellent condition, new fr... SG Motor Link Pte Ltd Posted: 19-Oct-2022 | | | | | | | | | |
|  | Toyota | Hiace 3.0M DX | \$49,800 | \$11,610 /yr | 02-Feb-2017 | 2,982 cc | - | Van | Available |
| Fuel Type: Diesel LED Headlights! Fresh Paintwork! New Carpet Floorboard! Wear & Tear Replaced! No Repairs Needed! Premium Warranty Coverage! Co... Car (S) Pte Ltd Posted: 19-Oct-2022 | | | | | | | | | |
|  | 2008 Toyota | Hiace 3.0M 4DR Diesel (For Lease) | | | | | | | |
| \$1,080/mth Leasing a powerful van Toyota Hiace 3.0M Diesel (2008) fulfil your business needs! Contact us for more info. More info about this vehicle | | | | | | | | | |
|  | Toyota | Hiace 3.0M DX | \$51,800 | \$11,790 /yr | 13-Mar-2017 | 2,982 cc | - | Van | Available |
| Fuel Type: Diesel Free \$300 Worth of Accessories Vouchers! 1 Owner Only! Excellent condition, Nice Vintage Number plate!, New Freshly Coated Paintwor... SG Motor Link Pte Ltd Posted: 18-Oct-2022 | | | | | | | | | |
|  | Toyota | Hiace 3.0M | \$60,000 | \$11,970 /yr | 24-Oct-2017 | 2,982 cc | 53,400 km | Van | Available |
| Fuel Type: Diesel Low mileage and underutilized commercial van up for sale! Smooth Engine and gearbox, power and reliable engine that suits all commer... Posted: 18-Oct-2022 | | | | | | | | | |