



# Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761  
 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg  
 GST:201001158E RCB NO:201001158E

GBF1109J  
TP/AIG

**M/S :** AIG ASIA PACIFIC INSURANCE PTE LTD  
 78 SHENTON WAY  
 #07-16 AIG BUILDING  
 SINGAPORE 079120

TEL: 64193000 FAX: 64153727  
 ATTN: Motor Claim Department *Not Authorized*

WS Ref: TP/AIG *C/Ring &*  
 Claim Type: Third Party *Returning After Claim*  
 Accident Date: 22/10/2022 *9 days*  
 TP Veh Reg No: SKA4449C

**Estimate No:** ES2291111/YISHUN  
**Date:** 26 Oct 2022  
**Policy No:** 22-MH000659-R06  
**Veh Reg No:** GBF1109J  
**Make/Model:** TOYOTA TOYOTA  
 DYNA 150 MANUAL  
**Chassis No:** JTFAT35Y70K206374  
**Engine No:** 1KD2607311  
**Reg. Date:** 29/06/2016

### Estimate Repair Cost to Vehicle No :GBF1109J

Description	U/Price	Quantity	List Price S\$	Amount S\$
<b>List Price</b>				
1 FRONT BUMPER	477.70	1 PC	<i>B1</i> 477.70	✓
2 FRONT GRILLE	560.90	1 PC	<i>CM</i> 560.90	
3 FRONT GRILLE LOGO	83.90	1 PC	<i>M</i> 83.90	
4 FRT (DYNA) LOGO	79.80	1 PC	<i>M</i> 79.80	
5 FRONT PANEL TOP CENTER GARNISH	285.10	1 PC	285.10	?
6 RH HEADLAMP	831.20	1 PC	831.20	?
7 AIRCON EVAPORATOR	1,129.10	1 PC	<i>M</i> 1,129.10	X
8 RH TAILLAMP	251.00	1 PC	251.00	?
9 RH TAILLAMP PANEL	59.90	1 PC	<i>B1</i> 59.90	
10 REAR EXHAUST PIPE	669.10	1 PC	<i>B1</i> 669.10	
11 REAR EXHAUST PIPE MOUNTING	39.20	1 PC	<i>D11</i> 39.20	
12 CENTRE EXHAUST PIPE	1,851.80	1 PC	<i>B1</i> 1,851.80	
13 CENTRE EXHAUST PIPE MOUNTING	39.20	1 PC	39.20	?
14 CENTRE EXHAUST PIPE BRACKET	48.10	1 PC	48.10	?
15 CENTRE EXHAUST PIPE HANGER MOUNTINGS	49.00	2 PCS	98.00	?
16 REAR NUMBER PLATE LAMP	67.20	1 PC	67.20	?
17 REAR NUMBER PLATE BRACKET	179.80	1 PC	<i>B1</i> 179.80	
<i>FRT WIPER PANEL</i>			6,751.00	
		Less 25%	1,687.75	5,063.25
<b>Special Net</b>				
18 RH DOOR LTA STICKER	20.00	1 PC	<i>NCC</i> 20.00	
19 FRONT NUMBER PLATE	25.00	1 PC	<i>B1</i> 25.00	
20 REAR NUMBER PLATE	25.00	1 PC	<i>B1</i> 25.00	
21 REVERSE SENSOR WITH HOLDER	200.00	1 PC	<i>NH</i> 200.00	
22 LH TAILGATE	1,100.00	1 PC	<i>B1</i> 1,100.00	
23 RH TAILGATE	1,100.00	1 PC	<i>B1</i> 1,100.00	
24 RH TAILGATE LOCK SHAFT	380.00	1 PC	<i>D11</i> 380.00	
25 RH TAILGATE LOCK SHAFT LOWER CATCH	75.00	1 PC	<i>K</i> 75.00	X
26 REAR FLOOR STAINLESS STEEL PLATE	360.00	1 PC	<i>B1</i> 360.00	
27 RIVETS	25.00	1 BOX	<i>M</i> 25.00	
			3,310.00	3,310.00

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**WS Ref:** TP/AIG  
**Claim Type:** Third Party  
**Accident Date:** 22/10/2022  
**TP Veh Reg No:** SKA4449C

### Estimate Repair Cost to Vehicle No :GBF1109J

Description	U/Price	Quantity	List Price S\$	Amount S\$
<b>Labour</b>				
28 REMOVE DAMAGED FRT BUMPER,BRACKETS,GRILLE,HEADLAMP,WIPER PANEL,MIRROR,STAYS,PANEL BEAT & REPAIR FRT END PANEL,INNER FLOOR PANEL	700.00	1 LA	700.00	400
29 REMOVE & REFIX DASHBOARD	280.00	1 LA	280.00	X
30 REMOVE & REFIX UNDE DASH AIR-CON	100.00	1 LA	100.00	X
31 PUTTY & RESPRAY ON FRT BUMPER,GRILLE,FRT PANEL,WIPER PANEL,FRT RH PILLAR,FRT RH DOOR	1,100.00	1 LA	1,100.00	800
32 REMOVE DAMAGED TAILGATE,REAR DECK STAINLESS STEEL PLATES,PANEL BEAT & REPAIR REAR FLOOR FRAME,SIDE PANELS & REPLACING REAR END DAMAGED PARTS	1,500.00	1 LA	1,500.00	1000
33 PUTTY & RESPRAY TAILGATES,REAR DEXK END FRAME,SIDE FRAME	800.00	1 LA	800.00	?
34 TO RE-DO REAR BODY STICKER, ADVERTISING LOGO	650.00	1 LA	650.00	?
			5,130.00	5,130.00

Total S\$ 13,503.25  
 Add GST @ 7% 945.23  
**Total Amount Payable S\$ 14,448.48**

**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:  
 Date:

**For Cheng Hoe Motor Pte Ltd**

*[Handwritten Signature]*  
 \_\_\_\_\_  
 AUTHORISED SIGNATURE

# 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 ..... 25/10/2022 19:29 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 22/10/2022 16:10 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... BUKIT MERAH EXIT  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBF1109J

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... STAMFORD CATERING SERVICES PTE LTD  
Company Reg No ..... 2XXXXX251C  
Email Address ..... magdalene@select.com.sg  
Mobile Phone No ..... (Phone) +65-68878321  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... TOYOTA DYNA 150 MANUAL  
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 ..... Tokio Marine Insurance Singapore Ltd  
Policy Number / Cover Note Number ..... 22-MH000659-R06

### DRIVER

Name of Driver ..... BABANTO RONALD UNABIA  
Passport No/FIN ..... GXXXX997M  
Date Of Birth ..... 12/07/1985  
Occupation ..... Outdoor

Date Of Driving Pass 23/06/2016  
 Driving experience 6 YEARS AND 4 MONTHS  
 Gender Male  
 Mobile Number (Phone) +65-87509608  
 Alt. Phone Number -  
 Email Address magdalene@select.com.sg  
 Address -  
 Address complement -  
 Postcode -  
 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 Chain Collision  
 Weather Conditions Clear  
 Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No  
 Number of vehicles involved in the accident 3  
 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) 1  
 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 -

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

There is tree pruning on left side of the road. I follow front vehicle moving slowly. SKA4449C collided onto my rear and my vehicle was pushed forward resulted chain collision of 3 vehicles. Nobody injured.

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 SKA4449C  
 Vehicle Manufacturer -  
 Vehicle Model -  
 Vehicle Variant -  
 Vehicle Colour -  
 Vehicle Category Private car  
 Name of Driver CHUA ZENG DA

NRIC No	SXXXX004D
Contact Number	(Phone) +65-98551398
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number	SNA9546L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LOH KUM KENG ALBERT (LUO JINQING, ALBERT)
NRIC No	SXXXX635G
Contact Number	(Phone) +65-98468041
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Describe Circumstance of the Accident

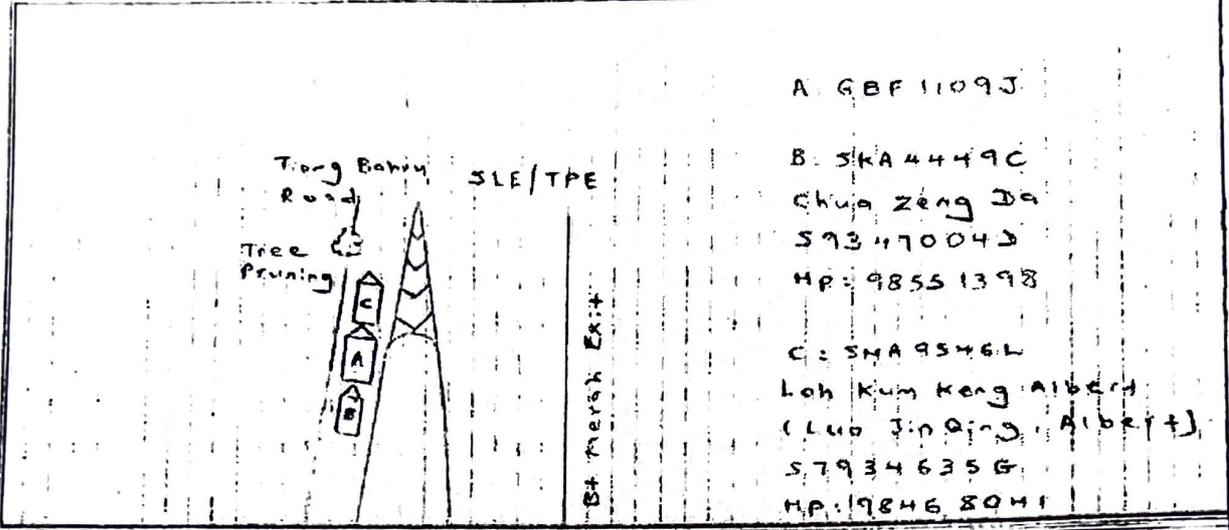
\*\* NOTE : PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE

Claim under your Own Comprehensive policy. Pls check your policy for more information

( ) Claim Own Policy ( / ) Claim Third party ( ) Reporting Only

( ) Claim OD/ TP at other workshop ( \_\_\_\_\_ )

Sketch Plan



DOA: 22/10/22 4:11pm

There is tree pruning on left side of the road. I follow front vehicle moving slowly. SKA4449C collided onto my rear and my vehicle was pushed forward resulted chain collision of 3 vehicles. Nobody injured.

Declaration

I/We declare the foregoing particulars are true in every respect.

*[Signature]*  
Policyholder's Signature / Date & Time

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

*[Signature]* 25/10/22  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)