

CS/A1822011220/DN4 3

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD/TP/PWS/TP RES/OD RES/EVA/INV/INV  
To inspect Vehicle No: \_\_\_\_\_  
at Workshop no: \_\_\_\_\_  
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.



Bel. or Market Value: \_\_\_\_\_  
IBAC Accident Report: \_\_\_\_\_ 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

Veh No: GBJ 5117 M Yr Reg: 2019, May  
Type: M Car / H Cycle / Bus / Van / Large / Taxi / Prime Mover /  
Truck / Trailer or 2982  
Make: Toyota Hiace  
Colour: Silver MS: Insured / Std / NI / NA  
Sp. Reading: 136957 T/Factor Insured / Std / NI / NA  
Eng No: 1KD2853233  
C/No: JTFHT02P500\*249034  
Gen. Cond: Good / Fair / Poor / Burnt  
Steering: In order / Jammed / Leaked / Burnt or  
Brake: In order / Jammed / Leaked / Burnt or  
Mod: Nil / SRM / STD / Rim or  
Tyre Size: F: 195 R15C  
R: 11  
BS / DUN / EXNOVA / GY / FS / LIZA / HIC / JOSTH / PR / SONY /  
TYRE / YOKE or Michelin  
Front: \_\_\_\_\_ Rear: \_\_\_\_\_  
R/Bal: 8 mm R/Bal: 8 mm  
L/Bal: 5 mm L/Bal: 5 mm  
D.O.A: \_\_\_\_\_ D.O.I: 09/11/22  
Survey held at: Goh Lee Hwa AMK  
Des. of Damages: Frl / Rear / C/S / MS / U/C / Roof top or  
Rw H/S  
The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time	Action / Instruction
	Alien 2 SMJ 6363 G
18/11/22	Prime L/S 4,000/- in 5 days of my
	(Red, 1/220.70, 74%)

Date/Time, File Pass to? ☐ Preli. Report  
1) 22/11/22 ☐ Final Report  
Date/Time, File Return to?

Days Of Repair: 5  
Resurvey No. of Trip: 2

Report Format: \_\_\_\_\_  
Lump Sum / L.B.L: (\$) 4000

Add Fee: ☐ Site Insp (\$) ☐ Interview (\$) ☐ Tech. Ins (\$) ☐ Weekend (\$)

Survey Fee:	
Transportation	
Food & Drink	
Phone	
Other	
TOTAL	

# 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	07/11/2022 16:16 (SGT)
Reported by	Driver
Date of Accident	04/11/2022 19:15 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE TOWARDS TOWN ( AFTER BRADDELL )
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ5117M
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	MEGA POWER ENGRG AND TRADING
Company Reg No	40869100W
Email Address	koh@megapower.com.sg
Mobile Phone No	(Phone) +65-91554576
Alternative Phone No	+65-64823389

## 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	Income Insurance Limited
Policy Number / Cover Note Number	5109311627-03

## DRIVER

Name of Driver	CHIA KIAT NYIK
NRIC No	S2627338B
Date Of Birth	19/10/1955
Occupation	Outdoor

Date Of Driving Pass	26/09/1981
Driving experience	41 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91554576
Alt. Phone Number	-
Email Address	koh@megapower.com.sg
Address	APT BLK 83 MACPHERSON LANE
Address complement	#10-247
Postcode	360063
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	Collision - Head to Rear
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)	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

ON 4/11/2022 TIME 1915, I WAS TRAVELLING CTE , TRAFFIC SLOW , FRONT VEHICLE SLOW , I FOLLOW SLOW, SUDDENLY I WAS HIT FROM BEHIND ( SMJ6363G)

#### 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	SMJ6363G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	BOEY JIA RONG

Contact Number	-
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

ON 4-11-2022 TIME 1915, I WAS TRAVELLING  
CIC, TRAFFIC SLOW, FRONT VEHICLE SLOW I FOLLOW  
SLOW, SUDDENTLY I WAS HIT FROM BEHIND (SMJ63636)

Declaration

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

*[Signature]*



Policyholder's Signature / Date & Time

*[Signature]*

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



Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

**GOH LEE HWA AUTOMOBILE PTE LTD**

Block 5033 Ang Mo Kio Industrial Park 2

#01-255 Singapore 569536

Tel No: (65) 6482 5168

Fax No. (65) 6482 4452

Co.reg no. 200808259H

**Reference No: 81122****[WITHOUT PREJUDICE SAVE AS TO COSTS]****Date: 08.11.2022****Mega Power Engrg and Trading****39 Genting Road****Singapore 349485,****Toyota Hiace****Estimated Repair Cost for Vehicle Reg. No: GBJ 5117 M****REPLACEMENT OF DAMAGED PANELS / PARTS**

1 Pc. Rear Boot	✓/Dental		2,182.90	✓	1855.30
2 Pcs. Rear Boot Hinger	HH	@ 68.10	136.20	X	
2 Pcs. Rear Boot Absorber	HH	@ 299.80	599.60	X	
1 Pc. Rear Boot Inner Lock	HH		519.40	X	
1 Pc. Rear Boot Inner Board	HH		490.50	X	
10 Pcs. Rear Boot Board Clips	HH	@ 6.00	60.00	X	
1 Pc. Rear Boot Logo	HH	69.10	69.10	✓	10/- SH
1 Pc. Rear Boot Hiace Sticker	HH		68.30	✓	10/- SH
1 Pc. Rear Boot 1250Kg Sticker	HH		58.50	✓	10/- SH
1 Pc. Rear Boot Weatherstrip	SH		399.80	X	
* 2 Pcs. Rear Lamp	Cut n/s o/s HH	@ 398.20	796.40	✓	
1 Pc. Rear Lamp Inner Panel	HH		465.10	X	
1 Pc. Rear Lamp Housing Panel	HH		422.80	X	
1 Pc. Rear Bumper	CRAC		659.50	✓	496.40
* 1 Pc. Rear Bumper Retainer	n/s CRAC mounty		69.30	✓	
1 Pc. Rear Bumper Catch	HH		120.30	X	
1 Set. Rear Bumper Parking Sensor	Draw		509.40	✓	150/- SH
1 Pc. Rear Fender LH	Dental		1,286.50	✓	
1 Pc. Rear Fender Corner Garnish	Cut/nt		86.10	✓	
1 Pc. Rear Fender Inner Corner Panel	HH		486.50	X	
* 1 Pc. Rear Fender Air Dust Garnish	original		110.80	✓	
1 Pc. 70 KM/H Sticker	HH		10.00	✓	SH
* 1 Pc. Rear End Panel Outer	key		583.10	X	
1 Pc. Rear Inner End Panel	HH		690.60	X	

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1 Pc. 8 Pax Sticker *the*10.00 ✓ *SH*

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**Total (Panels / Parts):** **10,890.70 (SGD)****LABOR CHARGES**

To remove &amp; refit windscreen.

~~180.00~~ *120/-*

To remove &amp; refit floorboard.

220.00 *HH*

To remove &amp; refit all wiring.

~~180.00~~ *30/-*To welding, knocking, straightening repair & renew  
& All accident affected area.~~1,800.00~~ *800/-*To respray painting on inner & outer parts & all  
accident affected area.~~1,800.00~~ *800/-*

To rust proof all accident affected area.

~~150.00~~ *40/-*

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**Total (Labor Charges):** **4,330.00 (SGD)***List**4,371.70**SH**190.00**Labor 1790.00**25% 3278.77*

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**TOTAL COST SUMMARY**

PANELS / PARTS	10,890.70
LABOR CHARGES	4,330.00

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Grand Total:	<b><u>15,220.70 (SGD)</u></b>
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**For payment.****1. PAYNOW: UEN 200808259H****2. BANK TRANSFER: Maybank Singapore Acct. No. 04141090974**

ACKNOWLEDGED BY	DATE	GOH LEE HWA AUTOMOBILE PTE LTD
		Alfred Quah

Note: Full payment must be completed 7 days from the invoice date. There will be an interest of 1.5% imposed per month on overdue invoice. Thank you.

09/11/2022 @ 1330m  
N/A Andrew  
L/sun  
5 dgs.  
LKK Auto  
[Signature]

5,258.77  
4/5 4,000/-

**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: