

(08/11/13) wef

ASS. REC. BY: Merimen

REF:

CS/C7122012827/UV43

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: GBB28L

at Workshop m/s PA ub.

of _____

Insured: SJNB6352

Policy No. DMPCSNW00048282201

Claims No. SNM22D209116/C02/IRENE

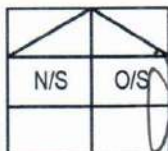
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value: £ 46k

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

Vehicle: IN / OUT

Date: _____ Person Contacted: LTA 814332

Date / Time Action / Instruction Dep 9500

8/5/23 4/5 £ 4600 inboard Ray

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 8/5/23-typist

Days Of Repair: 5

Resurvey No. of Trip: 1

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format : Merimen

Lump Sum H.B.I: (\$ 4600)

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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	853D
Vehicle Details	
Vehicle No.:	GBB28L
Vehicle to be Exported:	Yes
Intended Deregistration Date:	19 Dec 2022
Vehicle Make:	VOLKSWAGEN
Vehicle Model:	CADDY TDI DSG WGDR WIN
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	DFS220522
Chassis No.:	WV1ZZZ2KZHX160946
Maximum Power Output:	-
Open Market Value:	\$24,118.00
Original Registration Date:	22 Aug 2017
First Registration Date:	22 Aug 2017
Transfer Count:	0
Actual ARF Paid:	\$1,206.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	21 Aug 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$30,678.00
COE Rebate Amount:	\$14,332.00
Total Rebate Amount:	\$14,332.00

The information contained herein is correct as at 19 Dec 2022

OK

Vehicle Details

Vehicle No.	Make / Model
GBB28L	VOLKSWAGEN / CADDY TDI DSG WGDR WIN
Vehicle Type :	Vehicle Attachment 1 :
A50 - Goods (Closed) Van/Van Panel (Delivery)	No Attachment
Vehicle Scheme :	Chassis No. :
Normal	WV1ZZZ2KZHX160946
Propellant :	Engine No. :
Diesel	DFS220522
Motor No. :	Engine Capacity :
-	1968 cc
Power Rating :	Maximum Power Output :
-	-
Maximum Laden Weight :	Unladen Weight :
2177 kg	1480 kg
Year Of Manufacture :	Original Registration Date :
2017	22 Aug 2017
Lifespan Expiry Date :	COE Category :
21 Aug 2037	C - Goods Vehicle & Bus
PQP Paid :	COE Expiry Date :
\$30,678.00	21 Aug 2027
Road Tax Expiry Date :	PARF Eligibility Expiry Date :
21 Aug 2023	-
Inspection Due Date :	Intended Transfer Date :
21 Aug 2023	19 Dec 2022

Post an Advertisement
Sell it yourself! Advertise it at just
\$68 until it's SOLD!

Post an Ad

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Ways of Selling

2017 BMW X3 sDrive20i M-Sport Sunroof



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- > Easy loan approval
- > All terms are negotiable

Sort by 20 results/page

1 vehicles



Volkswagen Caddy

Any Category

Advanced Search



Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Volkswagen Caddy		Any	Any	2017	Any	Any	Any	Available
	Volkswagen Caddy	MPC Maxi 1.4A TSI	\$76,800	\$13,950 /yr	26-Dec-2017	1,395 cc	120,000 km	MPV	Available
Rare multi purpose car in the market. Best for those who need cargo space for work but at the same time need 7 seats to fetch family a...									
Posted: 05-Apr-2023									

PREMIUM AD

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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20 results/page

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Compare

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	19/12/2022 12:28 (SGT)
Reported by	Driver
Date of Accident	17/12/2022 16:05 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE TOWARDS TUAS SINGAPORE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB28L
-----------------------------	--------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CARLTON GLASS ENTERPRISE PTE LTD
Company Reg No	1XXXXX853D
Email Address	LEWISSYN@CARLTONGLASS.COM.SG
Mobile Phone No	(Phone) +65-67426882
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Caddy
Variant	VOLKSWAGEN / CADDY TDI DSG WGDR WIN
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	Auto
CC	1968

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	22-MU009260-R05

DRIVER

Name of Driver	SYN JUN HAO LEWIS
NRIC No	SXXXX716B
Date Of Birth	19/03/1995
Occupation	Indoor

Date Of Driving Pass	07/11/2013
Driving experience	9 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96166628
Alt. Phone Number	-
Email Address	Lewis_syn@hotmail.com
Address	BLK 9C BROADRICK ROAD - SINGAPORE 439474
Address complement	-
Postcode	439474
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 - 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)	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

REFER TO ATTACHED
STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD
TEL 67415336

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN8635Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	BALASUBRAMANIAN ARAVINTHAN
Passport No/FIN	GXXXX232L
Contact Number	(Phone) +65-90272254
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

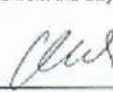
I was driving along PIE towards Tuas and the accident happened after the entrance of Bedok North. I filtered my vehicle from lane 2 to lane 3 and driving as per normal. Vehicle 85N 8635N then tried ~~filter~~ filter his vehicle from lane 2 to lane 3 and did not notice my vehicle. Thus, the collision happened. The right side of ~~the~~ my vehicle got damaged.

Declaration

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

If you wish to ~~claim~~ against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.


Policyholder's Signature / Date & Time


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

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

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 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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
(Name as in NRIC/ID card)

Sketch Plan



Handwritten notes on the grid:

- Top center: A car icon with 'A' and 'B' labels.
- Top right: 'PIE' and 'wards'.
- Bottom left: 'A: GBB28C' and 'B: SJNS63S2'.
- Bottom center: 'SEN 863SN'.

Progressive Car Care Pte Ltd

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716
 TEL: 6741 5336 FAX: 6741 7208 Email: claims@proccare.com.sg
 GST:201006949C RCB NO:201006949C

*Not Allowed
 10/4/23
 2/5 \$4600
 5 days
 who the reg.*

*o/c
 5/5/23*

M/S : CHINA TAIPING INSURANCE (SINGAPORE) PTE

3 Anson Road
 Springleaf Tower #16-00
 Singapore 079909

TEL: 63896111 FAX: 6221033

ATTN: Motor Claim Department \ CHINA

Estimate No: EST1509078

Date: 19 Dec 2022

Policy No: 22-MU009260-R05

Veh Reg No: GBB28L

Make/Model: VOLKSWAGEN CADDY
 TDI DSG WGDR WIN

Chassis No: WV1ZZZ2KZHX160946

Engine No: DFS220522

Reg. Date: 22/08/2017

Your Ref No: TP 1222-7171

Claim Type: Third Party

Accident Date: 17/12/2022

TP Veh Reg No: SJN8635Z

Estimate Repair Cost to Vehicle No :GBB28L

Description	U/Price	Quantity	Price SS	Amount SS
List Price				
1 REAR SLIDING DOOR - RH <i>20/But</i>	3,142.950	1 PC	3,142.95	2650
2 REAR SLIDING DOOR PROTECTOR - RH <i>grand</i>	151.5500	1 PC	151.55	
3 ROCKER PANEL - RH <i>20/But</i>	2,073.450	1 PC	2,073.45	1873.95
4 REAR TYRE RIM HUPCAP - RH <i>M/S</i>	59.3500	1 PC	59.35	
5 REAR BUMPER <i>grand</i>	786.1000	1 PC	786.10	
6 REAR BUMPER SIDE HOLDER - RH <i>17</i>	55.7500	1 PC	55.75	
7 REAR RIM - RH <i>822</i>	273.6500	1 PC	273.65	
			6,542.80	
	Less 10%		654.28	5,888.52
Special Net				
8 SEALANT <i>5/1. dry door</i>	20.0000	1 PC	20.00	
9 SPONGE TAPE <i>5/1. dry door</i>	20.0000	.5 PC	10.00	
			30.00	30.00
Labour				
10 TO KNOCK OUT DENTS, CUT/WELD ROCKER PANEL, REMOVE, REPLACE ACCIDENT PARTS	700.0000	1 JOB	700.00	600
11 TO RESPRAY PAINT ON ACCIDENT PORTIONS	800.0000	1 JOB	800.00	600
12 TO CHECK WIRING	30.0000	1 JOB	30.00	20
13 TO REMOVE, REPLACE R/H SLIDING DOOR GLASS	80.0000	1 JOB	80.00	50
14 TO REMOVE, TRANSFER DOOR AND DOOR FITTINGS	80.0000	1 JOB	80.00	50
15 TUFFKOTE	60.0000	1 SER	60.00	50
16 TO REMOVE, TRANSFER REAR BUMPER SENSOR	100.0000	1 JOB	100.00	40
17 TO REMOVE AND REFIT REAR END PANEL LINING AND GARNISH TO FACILITATE REPAIR	80.0000	1 JOB	80.00	17X
18 TO RESET CHECK LIGHT	200.0000	1 JOB	200.00	30
			2,130.00	2,130.00

*P- 4734.88
 102
 4261.35
 20
 1470
 4281.35*

Progressive Car Care Pte Ltd

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716
TEL: 6741 5336 FAX: 6741 7208 Email: claims@procarcare.com.sg
GST:201006949C RCB NO:201006949C

M/S : CHINA TAIPING INSURANCE (SINGAPORE) PTE

3 Anson Road
Springleaf Tower #16-00
Singapore 079909

TEL: 63896111 FAX: 6221033

ATTN: Motor Claim Department \ CHINA

Your Ref No: TP 1222-7171

Claim Type: Third Party

Accident Date: 17/12/2022

TP Veh Reg No: SJN8635Z

Estimate No: EST1509078

Date: 19 Dec 2022

Policy No: 22-MU009260-R05

Veh Reg No: GBB28L

Make/Model: VOLKSWAGEN CADDY
TDI DSG WGDR WIN

Chassis No: WV1ZZZ2KZHX160946

Engine No: DFS220522

Reg. Date: 22/08/2017

Estimate Repair Cost to Vehicle No :GBB28L

Description	U/Price	Quantity	Price	Amount
			SS	SS
			Total	SS 8,048.52
			Add GST @ 7%	563.40
			Total Amount Payable	SS 8,611.92

TOTAL: SINGAPORE DOLLAR EIGHT THOUSAND SIX HUNDRED ELEVEN AND CENTS NINETY TWO ONLY

For Progressive Car Care Pte Ltd

AUTHORISED SIGNATURE

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: