

Not Authored
 1 Day @
 Repair After Rain
 9 days



ESTIMATE TO REPAIR

VEHICLE NO. : GBK 2650 D
 MAKE : TOYOTA
 MODEL : HIACE VAN TURBO 5DR MT
 YEAR : 2019
 CHASSIS NO : JTFHT02P100250231

SURVEYOR NAME	: Kenneth LKF
DATE OF SURVEY	: 27.01.23
TIME OF SURVEY	:

DATE : 26-Jan-23
 DATE OF ACCIDENT : 20-Jan-23
 THIRD PARTY REF : GBF 4035 T / SOMPO INS

No.	Parts Description/ Labour	Type	Unit Price	Nett Item Amt	Amount
1 pc	rear bumper				Ry \$481.80 ✓
2 ps	rear bumper reintainer		\$24.80		n/c \$40.60 ✓
1 pc	rear end panel - outer				Ry \$363.70 ✓
1 pc	rear end panel - inner				\$1,172.50 ✓
1 pc	rear end panel garnish				\$112.30 ✓
1 pc	tailgate				Ry \$2,293.30 ✓
1 pc	tailgate outer garnish				way \$151.20 ✓
1 pc	tailgate emblem				me \$72.20 ✓
1 pc	tailgate TOYOTA HIACE sticker				me \$75.50 ✓
1 pc	tailgate lock				Ta \$293.50 ✓
1 pc	tailgate rubber				\$433.30 ✓
2 ps	tailgate hinge		\$72.20		n \$144.40 X
2 ps	tailgate damper		\$321.10		\$642.20 ✓
1 pc	n/s taillamp				ru \$324.70 ✓
1 pc	n/s taillamp lower panel				Ry \$605.10 ✓
1 pc	n/s rear fender				Ry \$1,640.40 ✓
1 pc	n/s rear fender inner panel				\$1,511.40 ✓
1 pc	n/s rear fender air dust				\$36.90 ✓
	Less 25%				\$10,395.00
					\$2,598.75
					\$7,796.25
1 set	rear bumper sensor	S.Nett			ther \$200.00 ✓
1 pc	70 KM/H sticker	S.Nett			me \$25.00 ✓
	To putty & spray paint.				\$1,600.00 1200 ✓
	To transfer tailgate fitting.				\$80.00 60 ✓
	To remove & refix rear windscreen glass.				\$100.00 ✓
	To anti-rust.				90 \$180.00 ✓
	Labour charges.				\$2,000.00 1400 ✓
TG-ML/-	TOTAL				\$11,981.25

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 allowed on "no prejudice" basis
 • No illegal modification(s) is allowed
 • Supplier item(s) must be resurveyed and is subject to final approval from Insurance Company
 • Co. Reg No. M2-0019086-D
 Acknowledged by Repairer
 Signature:
 Date:

Lim Tan Motor Pte Ltd
 Blk 176 Sin Ming Drive #03-09 Sin Ming, Singapore 570532
 Tel: 65-64520893 Fax: 65-64589127 Email: info@ltm.sg Website: www.LTM.sg
 Co. Reg No. 199307277D
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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 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	20/01/2023 11:11 (SGT)
Reported by	Driver
Date of Accident	20/01/2023 08:35 (SGT)
Exact Location of Accident	Near Blk 22, Singapore
Additional Location Information	UPPER SERANGOON ROAD NEAR SERANGOON JC
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK2650D
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SIONG AUTO PTE LTD
Company Reg No	2XXXXX076M
Email Address	SALES@SIONGAUTO.COM.SG
Mobile Phone No	(Phone) +65-91129425
Alternative Phone No	-

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	Goods vehicle
Transmission	Manual
CC	2754

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5116486273-02

DRIVER

Name of Driver	LIAW YEW CHYE
NRIC No	SXXXX302A
Date Of Birth	12/06/1961
Occupation	Outdoor

IMPORTANT NOTICE

SKETCH PLAN

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 willful misrepresentation or withholding of material facts may allow insurance companies to reassess 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 G.A 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 the 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.

B 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 be 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 insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers", the Insurers' lawyers/law firms, the Mandatory Authority of Singapore and any relevant government agency/authority (such as the police), for the purposes 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 making 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 internet cover of envelope postal 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 be 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 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.



[Signature]
Signature / Date & Time

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

[Signature]
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) QUEK ZIXIANG

Sketch Plan

