

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/21P23001613/4v43

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspct Vehicle No:

GBE8240X

at Workshop m/s

Car City 10m.

of

Insured:

SMN4627M

Policy No.

Claims No. IVS23/0055

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:

\$33k.

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4

days

Res.: Yes or No

Lum Sum:

15.1

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

3 1006

Date:

Person Contacted:

27811998

Vehicle: IN / OUT

Date / Time

Action / Instruction

\* No second hand parts

To: gate # 2157.10 (kolom 3x3AA)

Bumpe # 720.60

18/2/27 P/P # 4020.74 indom Anson (red 2212.55, 35%)

Veh No:

GBE8240X

Yr Regn:

31/03/16

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

Truck / Trailer or

Car

Make:

Nissan NV350

c.c

2488

Colour

3/ce/c

A/C:

Insured / Std / NI / NA

Sp. Reading

146922

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JN1MC2E2620005932

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195-15

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

8

mm

L/Bal.

6

mm

D.O.A.

28/12/22

D.O.I.

13/2/23

Survey held at

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

Rear

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) 20/2/23-typist

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

) S + RS. SI

) Photos

) Others

Report Format : TP

Lump Sum / I.B.I: (\$ 4020.74

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

TOTAL

[> Back to OneMotoring](#)

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Business
Owner ID:	100B
<b>Vehicle Details</b>	
Vehicle No.:	GBE8240X
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Feb 2023
Vehicle Make:	NISSAN
Vehicle Model:	NV350 PANEL VAN 2.5 5MT 5DR EURO V
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	YD25389143A
Chassis No.:	JN1MC2E26Z0005932
Maximum Power Output:	-
Open Market Value:	\$22,153.00
Original Registration Date:	31 Mar 2016
First Registration Date:	31 Mar 2016
Transfer Count:	0
Actual ARF Paid:	\$1,108.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	30 Mar 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$38,350.00
COE Rebate Amount:	\$11,999.00
<b>Total Rebate Amount:</b>	<b>\$11,999.00</b>

The information contained herein is correct as at 13 Feb 2023

OK





[https://www.sgcar mart.com/used\\_cars/listing.php?RGD=2016&MOD=Nissan NV350&RPG=20&VEH...](https://www.sgcar mart.com/used_cars/listing.php?RGD=2016&MOD=Nissan NV350&RPG=20&VEH...) 13-Feb-23

## 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	29/12/2022 13:00 (SGT)
Reported by	Driver
Date of Accident	28/12/2022 17:30 (SGT)
Exact Location of Accident	Tampines Ave 10, Singapore
Additional Location Information	ALONG TAMPINES AVE 10.
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE8240X
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	YONG FA HANDBAG TRADING
Company Reg No	4XXXX100B
Email Address	CALINTAN67@GMAIL.COM
Mobile Phone No	(Phone) +65-97689594
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv350
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	2488

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSSSNW00035692203

#### DRIVER

Name of Driver	NEW CHAI HUAT
NRIC No	SXXXX379G
Date Of Birth	24/02/1964
Occupation	Outdoor



Date Of Driving Pass	06/06/1985
Driving experience	37 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97689594
Alt. Phone Number	-
Email Address	CALINTAN67@GMAIL.COM
Address	BLK 888 TAMPINES STREET 81 #10-1092
Address complement	-
Postcode	520888
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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

AS PER SKETCH PLAN ATTACHED.

#### 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	SMN4627M
Vehicle Manufacturer	Honda
Vehicle Model	Vezel
Vehicle Variant	-
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	TAN WEI YONG
NRIC No	SXXXX487B

Contact Number	(Phone) +65-82922898
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	FRONT
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

Describe Circumstance of the Accident

28/12/2022 - 17.30 pm


I was driving along Tampines Ave 10 and SUND 4627M hit my back. No injury.

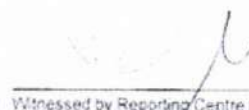
Declaration

We declare the foregoing particulars are true in every respect.

  
~~XXXXXX~~ XXXXX XXXXX

Policyholder's Signature / Date & Time

  
 Actual 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.

永發平家貿易

YONG FA HANDBAGS TRADING

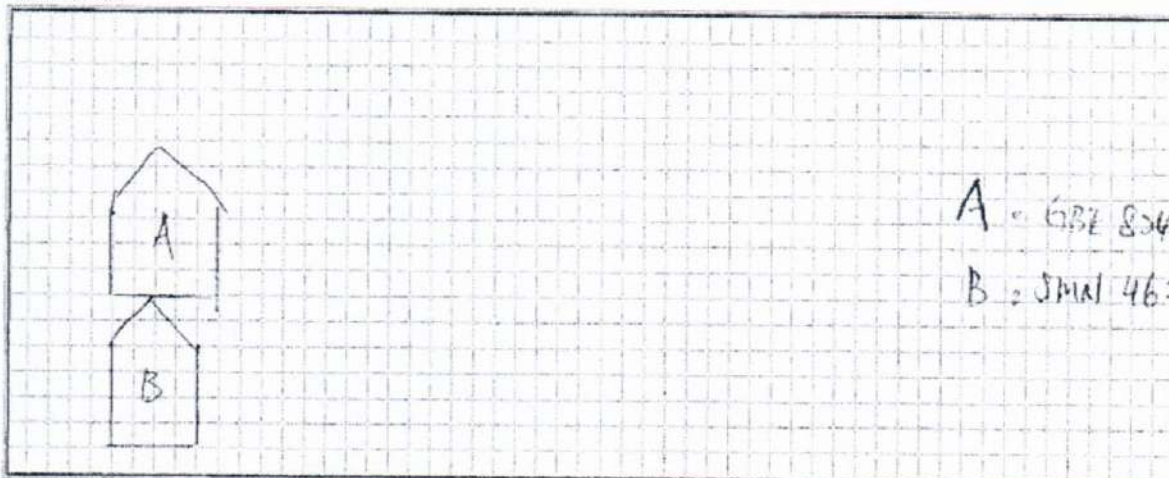
Policyholder's Signature / Date & Time

Chen J

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

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

Sketch Plan



v2jun2022



# LSJ INDUSTRIAL TRADING PTE LTD

GST NO: 20-0410286-G RCB NO: 200410286G

65 Ubi Crescent #05-08 HOLA Centre Singapore 408559

TEL: +65 6747 1771 FAX: +65 6747 6082

Email: lsjind@singnet.com.sg WEBSITE: www.lsjautomotive.com

## STATEMENT OF A/C AS AT 31/12/2022

CAR CITY AUTO CENTRE PTE LTD  
BLK 9006 #01-198 TAMPINES STREET 93  
SINGAPORE 528840

A/C CODE: CC036W

PAGE: 1

PRINT DATE: 4/1/2023

CURRENCY: S\$

TERM: 30Days

TEL: (656) 781-0300 (656) - FAX: (656) 782-0300

DATE	DESCRIPTION	RATE	DEBIT	CREDIT	BALANCE
02/12/2022	LSJ0092813		615.68		615.68

Dec 22	Nov 22	Oct 22	Sep 22	Aug 22	Jul 22	Jun 22	OVER 6 MTH	Total
615.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	615.68

NOTES: (1) BANK NAME: DBS BANK BANK ACCOUNT NO. :025-900724-1

(2) YOUR PROMPT SETTLEMENT WOULD BE APPRECIATED. IN EVENT OF ANY DISCREPANCY, KINDLY NOTIFY THE ACCOUNTS DEPARTMENT WITHOUT ANY DELAY.

(3) PAYMENT RECEIVED AFTER THE END OF THE MONTH WILL BE CREDITED ON THE NEXT MONTH'S

(4) ALL CHEQUE MUST BE CROSSED AND MADE PAYABLE TO LSJ INDUSTRIAL TRADING PTE LTD.

**CAR CITY AUTO CENTRE PTE LTD**

Blk 9006 Tampines Street 93 #01-198 Singapore 528840

TEL: (65) 85114276 FAX: (65) 67820300 EMAIL: anson@carcity.com.sg

**ACCIDENT REPAIR ESTIMATES**

Our Ref:

**Type of Claim** : TPVehicle No. : GBE 8240 XMake & Model : NISSAN NV350Year of Manufacture : 2015

Chassis No. : \_\_\_\_\_

Engine No. : \_\_\_\_\_

Policy No. : \_\_\_\_\_

Time of Accident : \_\_\_\_\_

Ins Company : CHINA

Excess : \_\_\_\_\_

Date of Accident : 28/12/2022

Suggested Days of Repair : \_\_\_\_\_

**Repair Estimates****Parts (a) Cost / List Price Items**

Plus/Less : \$ -

Total of Cost / List : \$ -

(b) Nett Price Items : \$ 3,448.10Less 10% : \$ 344.81Total of Nett Item : \$ 3,103.29(c) Special Nett Items : \$ 260.00**Total Parts Cost (Appendix A)** : \$ 3,363.29**Labour (Appendix B)** : \$ 2,870.00**Total Repair Cost** : \$ 6,233.29

In-house Vehicle Assessor

Case Owner : Anson

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:

The above total will be subjected to 7% G.S.T.

Name of Surveyor : Mervin LimCompany : HLHSurvey conducted on : 13/02/23 at 12.30pm**Remarks By Surveyor**(a) The repair of this vehicle is ~~authorized~~ is not authorized until further notice.

(b) Recommended Days of Repair : \_\_\_\_\_ day(s)

(c) Resurvey : Required / Not Required

(d) Excess : \$ \_\_\_\_\_

(e) Signature of surveyor : \_\_\_\_\_

Date: \_\_\_\_\_

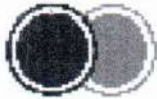


TEL: (65) 85114276 FAX: (65) 67820300 EMAIL: [anson@carcity.com.sg](mailto:anson@carcity.com.sg)

Case Owner	:	<u>Anson</u>
Year of Manufacture	:	2015

1-1350





# CAR CITY AUTO CENTRE PTE LTD

Blk 9006 Tampines Street 93 #01-198 Singapore 528840

TEL: (65) 85114276 FAX: (65) 67820300 EMAIL: anson@carcity.com.sg

## ESTIMATED REPAIR COST DETAILS

Vehicle No : GBE 8240 X Case Owner : Anson

Make & Model : NISSAN NV350 Year Manufacture : 2015

Chassis No : JN1MC2E26Z0005932 Engine No : 0

Date & Time : \_\_\_\_\_ Supplier : \_\_\_\_\_

Order By : \_\_\_\_\_ Type of Claim : TP

S/No	Part Description	QTY	Cost Price	List Price	Nett Price	S/N
1	REAR BUMPER <i>720.62</i>	1			<del>\$ 733.90</del>	<i>De</i>
2	REAR BUMPER CENTER BRACKET	1			\$ 141.30	<i>Surf</i>
3	TAILGATE	1			\$ 1,816.70	<i>DD</i>
4	LOGO	1			\$ 94.00	<i>11</i>
5	SEALANT @ \$20 EA <i>w. n. s. m. e. n</i>	2		<i>S/N</i>	<i>per</i>	\$ 40.00
6	NV350 LOGO	1			\$ 94.00	<i>11</i>
7	URVAN LOGO	1			\$ 94.00	<i>11</i>
8	70 KM STICKER	1		<i>S/N</i>	<i>per</i>	\$ 10.00
9	8 PAX STICKER	1		<i>S/N</i>	<i>per</i>	\$ 10.00
10	TAILGATE LOCK	1		<i>11</i>	\$ 287.10	<i>X</i>
11	REVERSE SENSOR	1	<i>set</i>	<i>S/N</i>	<i>Surf</i>	\$ 200.00
12	REAR END PANEL	1			\$ 187.10	<i>11</i>
13	REAR END SPONGE RH	1				<i>X</i>
14						
15						
16						
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30						

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

*P-26786*  
*112*  
*2410.74*  
*260*