

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 12 Jul 2023 / 18:30:29

Receipt Date/Time : 12 Jul 2023 / 18:30:29

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-230712-003617

Previous Receipt No. :

**S/N Item Description/  
Business Transaction Reference  
No.**

<b>Amount Before GST (S\$)</b>	<b>GST Amount (S\$)</b>	<b>Amount After GST (S\$)</b>
--	---------------------------------	---------------------------------------

Result of Insurance Enquiry - SKS697J

As at 12 Jul 2023/17:14:00

Insurance Co: AUTO & GENERAL INSURANCE (SINGAPORE) PTE.  
LIMITED

1 Insurance Enquiry - SKS697J  
Enquiry Fee  
20230712182849609498

24.77	1.98	26.75
-------	------	-------

**Sub-Total**

24.77	1.98	26.75
-------	------	-------

**Total Before Rounding**

24.77	1.98	26.75
-------	------	-------

**Rounding Difference**

0.00

**Total Amount Payable**

26.75

Paid By

450898XXXXXX6673

eNETS Credit Card

26.75

Total

26.75

Cash Change

0.00

Tendered Amount

26.75

Excess Refundable Amount

0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

# J-MART MOTOR PTE LTD

Block 5, Defu Lane 10, #01-578,  
Defu Industrial Park C, Singapore 539186

Tel : 6343-0934 Fax : 6343-0921

Email : jmartauto@gmail.com

Registration No: 201400246D

GST Reg. No: 201400246D

## **RE : estimate cost for vehicle no : GBD 58P**

Bal brought forward:	\$	11,964.30
Remove & refit rear w/screen.		120.00
Transfer tailgate fitting.		80.00
Upholstery.		120.00
		<hr/>
		12,284.30
	Plus 8% GST	982.74
		<hr/>
		13,267.04

SD : Thirteen thousand two hundred sixty-seven & cents four only.

# J-MART MOTOR PTE LTD

Block 5, Defu Lane 10, #01-578,  
Defu Industrial Park C, Singapore 539186  
Tel : 6343-0934 Fax : 6343-0921  
Email : jmartauto@gmail.com  
Registration No: 201400246D  
GST Reg. No: 201400246D

13-Jul-23

Our ref : TP/5290/23

Auto Best Trading

## RE : estimate cost for vehicle no : GBD 58P

1 pc	tailgate	\$	2,175.00	nett
1 pc	Nissan emblem		97.00	
1 pc	NV 200 emblem		145.00	
1 pc	Vanette emblem		97.00	
1 pc	tailgate lock		366.00	
1 pc	tailgate w/strip		136.00	
1 pc	tailgate outer garnish		388.00	
1 pc	camera		1,200.00	
2 pcs	taillamp		548.00	
1 pc	tailgate trimboard		240.00	
1 pc	tailgate stopper		16.00	
1 pc	rear bumper		660.00	
2 pcs	rear bumper retainers		98.00	
8 pcs	rear bumper clips		52.00	
1 pc	rear bumper sponge		133.00	
1 pc	end panel outer		564.00	
1 pc	end panel inner		654.00	
1 pc	spare tyre panel		1,374.00	
1 pc	end panel inner garnish		99.00	
10 pcs	end panel inner garnish clips		65.00	
1 pc	spare tyre tray		388.00	
1 pc	spare tyre screw		32.00	
			<hr/> 9,527.00	
		less 10%	<hr/> 952.70	
			<hr/> 8,574.30	
1 pc	rear no plate		30.00	snett
1 pc	rear w/screen gum		50.00	
1 pc	rear w/screen seal		30.00	
1 pc	70 km/h sticker		25.00	
1 pc	6 pax sticker		25.00	
	Panel beating.		1,600.00	
	Spray painting.		1,600.00	
	Wiring.		30.00	
			<hr/> 11,964.30	

**Describe Circumstance of the Accident**

Waiting for the main road to be clear, suddenly  
my veh rear portion being collided by veh B.

**Declaration**

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

**AUTO BEST TRADING**

Policyholder's Signature / Date & Time

13/07/23

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

13/07/23

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.

AUTO BEST TRADING

.....  
Authorised Signature

Policyholder's Signature / Date & Time

13/07/23

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

13/07/23

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

Sketch Plan

Sketch Plan area with handwritten notes:

- Top right: REA: 01/7/23
- Below REA: A. GOD 58 P
- Below A: B. SKS 6973
- Center: A hand-drawn diagram showing a car labeled "KATIE" and a person labeled "Katie Butte" with an arrow pointing to the car.

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

Date Of Driving Pass	25/01/1980
Driving experience	43 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96715315
Alt. Phone Number	-
Email Address	AUTOBEST1999@GMAIL.COM
Address	APT BLK 610 WOODLANDS AVENUE 4 #08-435
Address complement	-
Postcode	730610
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

#### REFER TO THE ATTACHED SKETCH PLAN

#### 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	SKS697J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-



## 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	13/07/2023 13:40 (SGT)
Reported by	Actual Driver
Date of Accident	12/07/2023 17:14 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLIP ROAD OF KAKI BUKIT AVENUE 4
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD58P
-----------------------------	--------

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	AUTO BEST TRADING
Company Reg No	52894563K
Email Address	AUTOBEST1999@GMAIL.COM
Mobile Phone No	(Phone) +65-96715315
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
Variant	NV200 DX 1.6 AT ABS AIRBAG 2WD 5DR LGV
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	1597

#### INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5135236033

#### DRIVER

Name of Driver	LAU PENG ANN
NRIC No	S1541057D
Date Of Birth	09/09/1962
Occupation	Indoor

