

来發 (明 記) 摩 哆 有 限 公 司
LAI HUAT (MENG KEE) MOTOR PTE LTD

160 Sin Ming Drive #04-01, #04-02 & #07-03 Singapore 575722 Tel: 6453 8110 Fax: 6459 6267

GST No: M2-0128609-3

UEN: 199407592C

ESTIMATE

EST. No EST0035708
Wong Kaijie, Allan (Huang Kaijie,
Allan)

Page 1 of 1
Your ref. TP-SHC 504C MS FC
Job No. 74704
Our ref 24.09.11
Payment
Date 12/9/2024

Attn

Vehicle No SMA 7193X
Vehicle Model : Toyota C-HR
Accident on ... 10/9/2024

Quantity	Unit	Description	Unit price	Disc. pct.	Amount
Supply of Parts:					
1.00	Pc	Rear bumper centre garnish	575.10	25.00	431.33
Labour & Misc:					
1.00		To remove rear bumper in order to renew above part	200.00		200.00
1.00		To remove/refit/respray rear bumper diffuser (x2) after market	200.00		200.00

Sub-Total 831.33
GST 9.00% 74.82
Total S\$ 906.15

本公司拥有最先进的 CAROLINER MARK IV 机械，可提供给多种款式的车身及给于快速与准确的测量方式和大铁修理。
除外，还有先进的 SAICO Deluxe 喷漆烘炉。

"Our services include the latest and reliable CAROLINER MARK IV repair bench, draw-aligner and the support dolly system to provide accurate re-alignment and speedy repairs. We also provide the new and advanced SAICC Deluxe oven heater for re-spraying all motor vehicles."



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 First Submission	10/09/2024 19:32 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	10/09/2024 11:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	NICOLL HIGHWAY TOWARDS KPE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA7193X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WONG KAIJIE, ALLAN
NRIC No	SXXXX488F
Email Address	WONGKAIJIE@GMAIL.COM
Mobile Phone No	(Phone) +65-83389366
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	CHR HYBRID
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1797
Vehicle Fuel	Petrol-Electric
First Registration Date	18/06/2018
Chassis no	ZYX102112314
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5145475720

DRIVER



Name of Driver	WONG KAIJIE,ALLAN
NRIC No	SXXXX488F
Date Of Birth	01/09/1981
Occupation	Indoor
Driving Pass Date	22/09/2003
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	21 YEARS
Gender	Male
Mobile Number	(Phone) +65-83389366
Alt. Phone Number	-
Email Address	WONGKAIJIE@GMAIL.COM
Address	157 ANG MO KIO AVE 4 #04-560
Address complement	-
Postcode	560157
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Chain Collision
Weather Conditions	AFTER RAIN
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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 SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	EMAIL INCOME.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC504C
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Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	UE SENG WAH
NRIC No	SXXXX985C
Contact Number	(Phone) +65-97578008
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLK6565Y
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	CHER YONG KHUAN
NRIC No	SXXXX658I
Contact Number	(Phone) +65-97596565
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

[Signature]
10/9@
2pm

Policyholder's Signature / Date & Time

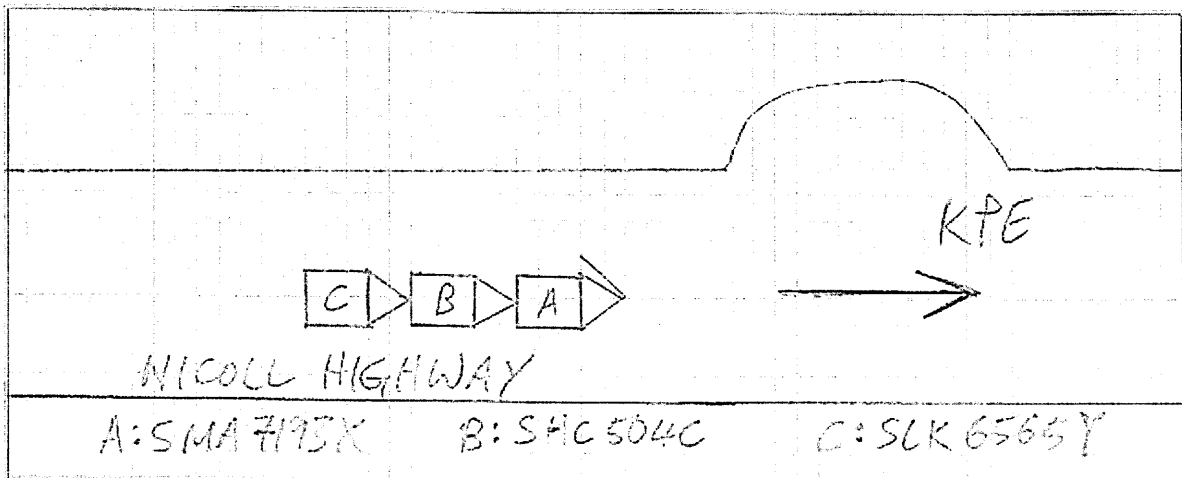
[Signature]

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

[Signature]
K. KIM HIN AUTO PTE LTD
TEL: 6542 7028

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

Sketch Plan



vi1an7022

Describe Circumstance of the Accident

On 10/9/24, about 1150 am, I was driving along Nicoll Highway and going toward the KPE entrance near the former ~~PE~~ People's Association building. The cars in front of me stopped rather abruptly and I managed to stop my car in time. I heard noises and then felt that something bumped into my car from behind. I then stepped ~~out to check~~ stopped my vehicle and stepped out to check.

Video footage of the accident is ~~not~~ available.


Upon viewing the video after the accident,

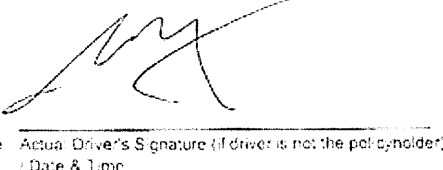
I saw that Car B (SHC #504C) managed to stop his car in time too. Car C could not stop in time and collided into Car B, which surged forward and collided into Car A.

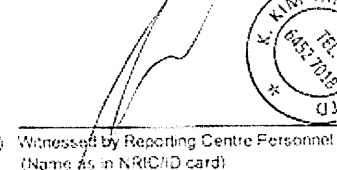
TP Claim's for that Meng Kee (Pls ~~contact~~ to them ~~for A report~~)

Declaration

(We declare the foregoing particulars are true in every respect)


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)



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5145475720

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SMA7193X**
Chassis Number : ZYX102112314
2. Name of Policyholder : WONG KAIJIE ALLAN
3. Effective Date of Insurance : 18 Jun 2024
4. Expiry Date of Insurance : 17 Jun 2025
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: WONG KAIJIE, ALLAN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: MAYBANK SINGAPORE LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : ASSURE GENERAL INSURANCE AGENCY & CREDIT PTE. LTD. (00000662806)
Date of Issue : 13 May 2024 16:09 hrs

For INCOME INSURANCE LIMITED



Chief Executive

[➤ Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	488F

Vehicle Details

Vehicle No.:	SMA7193X
Vehicle to be Exported:	Yes
Intended Deregistration Date:	27 Aug 2024
Vehicle Make:	TOYOTA
Vehicle Model:	C-HR HYBRID 1.8S CVT
Primary Colour:	Blue
Manufacturing Year:	2018
Engine No.:	2ZR8403284
Chassis No.:	ZYX102112314
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$27,410.00
Original Registration Date:	18 Jun 2018
First Registration Date:	18 Jun 2018
Transfer Count:	0
Actual ARF Paid:	\$10,374.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Jun 2028
PARF Rebate Amount:	\$6,743.00

Intended COE Rebate Details

COE Expiry Date:	17 Jun 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$36,000.00
COE Rebate Amount:	\$13,708.00
Total Rebate Amount:	\$20,451.00

Message

You will not be eligible for any COE rebate from the current COE (including unused COE from any lay-up period/s), if you renew your COE.

The information contained herein is correct as at 27 Aug 2024

OK