

(08/11/13) Wef

ASS. REC. BY:

REF: CS/EG124090269/Rup3

0350

2029/July

## ASSIGNMENT

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

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: SMM 6758K

at Workshop m/s BMRT

of KRANJI DEPT

Insured: ERNO

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

Claims No. \_\_\_\_\_

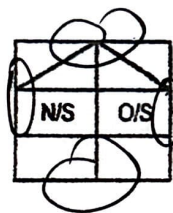
Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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



Bal. or Market Value: 74K

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SMM 6758K Yr Regn: 2019 / July

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

Truck / Trailer or

Make: RENAULT GRAND SCENIC 1.5DCI cc 1461

Colour: WHITE AC: Insured / Std / NI / NA

Sp. Reading: - TRadio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: VF1RFA00662894670

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/55R20

R: \_\_\_\_\_

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

TOYO / YOKO or

GITI

Front

Rear

R/Bal. 6 mm

R/Bal. 6 mm

L/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 30/08/24

D.O.I. 18/09/24

Survey held at

CARROS

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

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

Date / Time Action / Instruction

REPAIR LIM IT - 48K

TOTAL LOSS

Date/Time, File Pass to?

☐

: Prel. Report

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

: Interview (\$

: Tech. Invs (\$

: Weekend (\$

): \$ + RS. \$

): Photos

): Others

Report Format :

Lump Sum / I.B.I. (\$) )

TOTAL

☐



## 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	11/09/2024 16:49 (SGT)
Reported by	Actual Driver
Date of Accident	30/08/2024 09:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG JURONG WEST ST 61
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM6758K
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	STRIDES PREMIER PRIVATE HIRE AND LIMOUSINE PTE LTD
Company Reg No	2XXXXX055D
Email Address	KOKWAH.WONG@STRIDESPRIEMER.COM.SG
Mobile Phone No	(Phone) +65-68662627
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Renault
Model	Scenic
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1500
Vehicle Fuel	Diesel
First Registration Date	09/07/2019
Chassis no	VF1RFA00662894870
Effective Date/Time of Ownership	09/07/2019 00:00 (SGT)

### INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	24-MAB00505-R00

### DRIVER





Name of Driver	LOKE KUM HOONG
NRIC No	SXXXX534H
Date Of Birth	30/11/1960
Occupation	Outdoor
Driving Pass Date	06/11/1996
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	27 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96606876
Alt. Phone Number	-
Email Address	LOKEKH2000@GMAIL.COM
Address	BLK 828 JURONG WEST ST 81
Address complement	#08-292
Postcode	640828
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 - Major/Minor Rd
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20240901/2037.

#### 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	SKN1867E
Vehicle Manufacturer	Volkswagen
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	ERGO Insurance Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person	LOKE KUM HOONG
Gender	Male
Phone No	(Phone) +65-96606876
Address	BLK 828 JURONG WEST ST 81
Address Complement	#08-292
Post Code	640828
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMM6758K
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes



## 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 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")

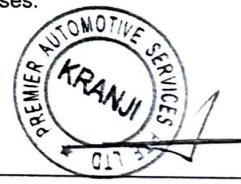
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.



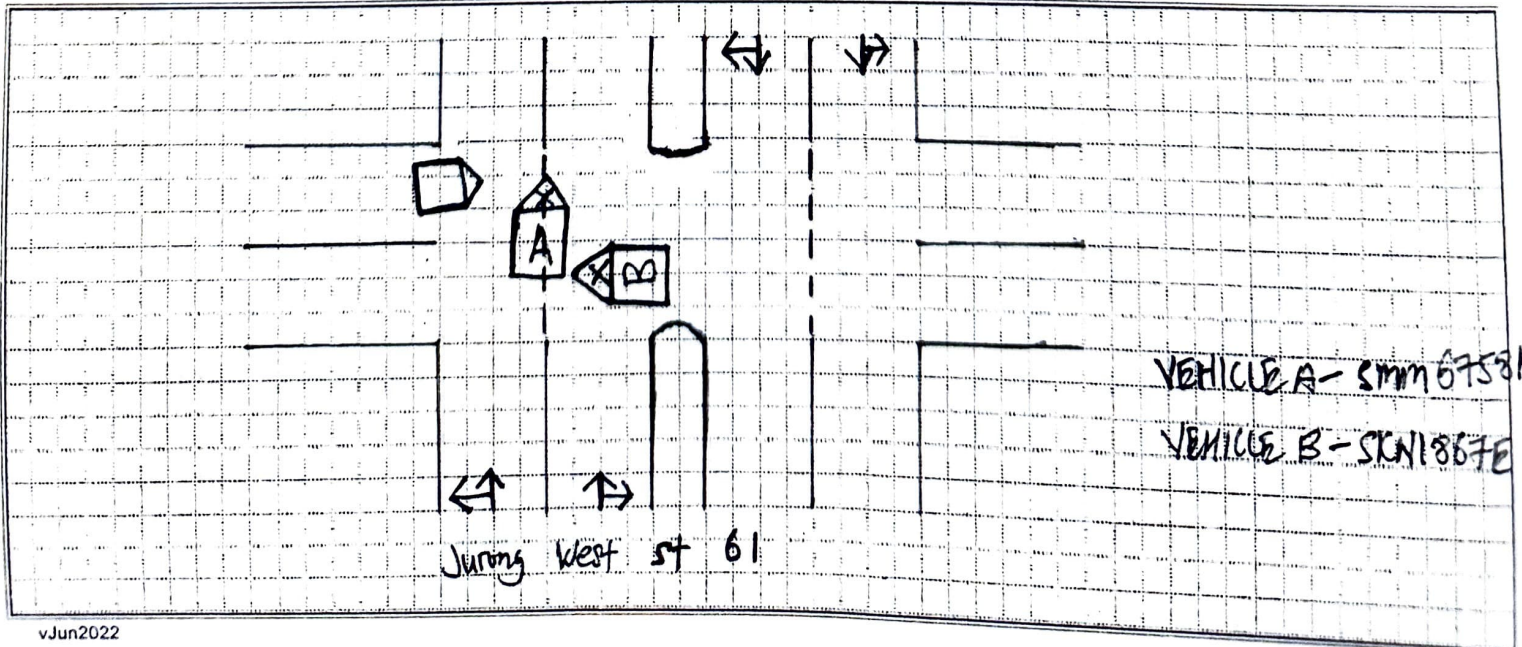
Policyholder's Signature / Date & Time

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



Back to OneMotoring

## Apply for PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Company  
Owner ID: 055D

### Vehicle Details

Vehicle No.: SMM6758K  
Vehicle to be Exported: No  
Intended Deregistration Date: 09 Sep 2024  
Vehicle Make: RENAULT  
Vehicle Model: GRAND SCENIC IV 1.5 DCI AT EU6  
Primary Colour: White  
Manufacturing Year: 2019  
Engine No.: K9KF649D059869  
Chassis No.: VF1RFA00662894870  
Maximum Power Output: 81.0 kW (108 bhp)  
Open Market Value: \$25,440.00  
Original Registration Date: 09 Jul 2019  
First Registration Date: 09 Jul 2019  
Transfer Count: 0  
Actual ARF Paid: \$17,616.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 08 Jul 2029  
PARF Rebate Amount: \$12,331.00

### Intended COE Rebate Details

COE Expiry Date: 08 Jul 2029  
COE Category: A - Car up to 1600cc & 97kW  
(130bhp)  
COE Period(Years): 10  
QP Paid: \$26,659.00  
COE Rebate Amount: \$12,875.00  
Total Rebate Amount: \$25,206.00

### 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 09 Sep 2024

OK



# Renault Grand Scenic Diesel 1.5A dCi

**\$73,800** Instalment \$1,046/mth

PREMIUM AD

💰 Apply for 2.48% loan

♡ Shortlist

📄 Loan Calculator

## Overview Financial Photo Research

Depreciation	📘 \$13,700 / year
Reg. Date	17-Jun-2019 (4yrs 8mths 28days COE left)
Manufactured	📘 2019
Mileage	85,552 km (16.3k / year)
Transmission	Auto
Engine Cap	1,461 cc
Road Tax	📘 \$1,048 / year
Power	81.0 kW (108 bhp) <a href="#">View specs of the Renault Grand Scenic Diesel (2017-2022)</a>
Curb Weight	📘 1,540 kg
Fuel Type	Diesel (Euro 5 Engine and Above)
COE	📘 \$26,170
OMV	📘 \$25,440
APR	📘 \$17,616