ASS. REC. BY: Kenneth | REF: SM01 CS | SM024110415 | Kmp3 | C

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TP / WS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s RC

of _____

Insured: _____

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.

N/S	O/S

Bal. or Market Value: $21K

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 10 days Res.: Yes or No

Lum Sum: 1+3/20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SKT 2022G Yr Regn: 05, 15

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or (A)

Make: Subaru BRZ c.c 1998

Colour M. Blue A/C: Insured / Std / NI / NA

Sp.Reading 99095 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JF1ZC6K72YG007705

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: _____

R: 215/45ZR17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	5 mm	L/Bal.	5 mm
D.O.A.	18/11/24	D.O.I.	20/11/2024

Survey held at _____

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

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

Date / Time	Action / Instruction
/	Bootlid jammed, est not ready
31/1/25	W/Shop unable to locate 2nd parts for this rare model.
3/6	@952d- Called (Red. @1933.50, 17%)

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: 10

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Survey Fee: _____

Transportation: ___S + RS. ___SI

Photos

Others

TOTAL

Report Format :

Lump Sum / I.B.I: ($ _____)

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 witholding 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	19/11/2024 11:15 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	18/11/2024 11:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JALAN BUKIT MERAH
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT2622G

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM ZHEN RONG, JEREMY
NRIC No	SXXXX863A
Email Address	JEREMYLIMZR@GMAIL.COM
Mobile Phone No	(Phone) +65-82221827
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	BRZ 2.0 6AT RWD
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 car
Transmission	Auto
CC	1998
Vehicle Fuel	Petrol
First Regisration Date	28/05/2015
Chassis no	JF1ZC6K72FG007705
Effective Date/Time of Ownership	14/04/2021 02:04 (SGT)

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number	P10740099R02

DRIVER

Name of Driver	LIM ZHEN RONG, JEREMY
NRIC No	SXXXX863A
Date Of Birth	06/07/1993
Occupation	Indoor
Driving Pass Date	11/12/2012
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	11 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82221827
Alt. Phone Number	-
Email Address	JEREMYLIMZR@GMAIL.COM
Address	BLK 24 CACTUS DRIVE 05-08 SINGAPORE 809694
Address complement	-
Postcode	-
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	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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	-

PASSENGER 1

Name	NEO MIN HUI
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No	(Fax) +65-62181399
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE SKETCH PLAN AND POLICE REPORT

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	GBJ3658G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	NEO MIN HUI
Gender	Female
Phone No	(Phone) +65-98328938
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	3 DAYS MC
Injured person in which vehicle?	SKT2622G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	LIM ZHEN RONG, JEREMY
Gender	Male
Phone No	(Phone) +65-82221827
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	3 DAYS MC
Injured person in which vehicle?	SKT2622G
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

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 any 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.

1005hrs
19/11/2024

Policyholder's Signature / Date & Time

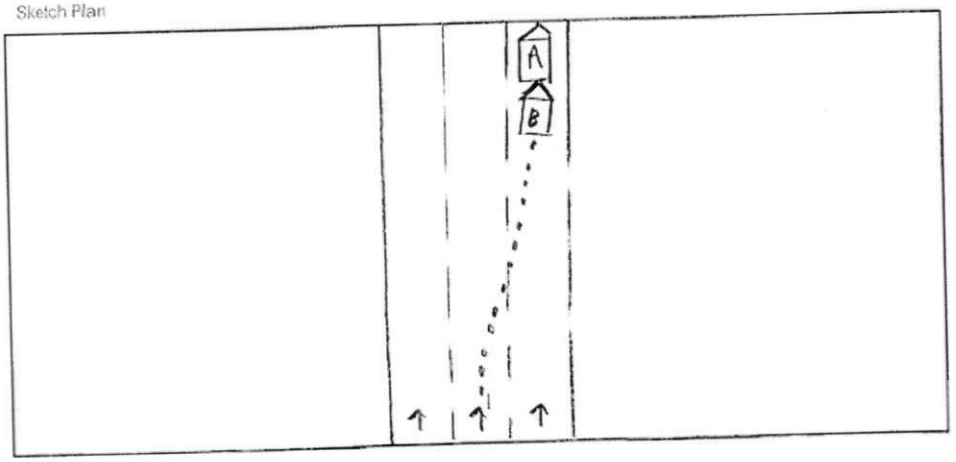
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

19/11/2024

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

AH LIM MOTOR CO. SIN MING

Sketch Plan



SKETCH PLAN #2

Describe Circumstance of the Accident

Date of Accident : 18/11/2024 Time : 11:45 am Location : Jalan Bukit merah

My Vehicle A : SKT2622G Vehicle B : GBJ3658G Vehicle C :

Refer to police report

☐ Claim OD/TP at Ah Lim Motor ☑ Claim OD/TP at other workshop ☐ Reporting Only

Remarks : Please forward a copy of my eFile accident Report to :

My Workshop :

Workshop Email Address :

☐ Note : Please take note that your insurer have a 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information

Declaration

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

19/11/2024 1024 hrs.

Policyholder's Signature / Date & Time

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

19/11/2024

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

vJun2022

Land Transport Authority

10 Sin Ming Drive Singapore 575701
www.lta.gov.sg

26 May 2025

Our ref 2605250901N038122849

LIM ZHEN RONG, JEREMY
24 CACTUS DRIVE
#05-08
SINGAPORE 809694

Dear Sir/Madam

Your Renewal Of Certificate Of Entitlement (COE) For Vehicle No. SKT2622G Is Successful

We received to your application on 26 May 2025 to renew COE for the above vehicle.

2. You may be pleased to know that the COE for this vehicle has been renewed until 27 May 2035.

3. The road tax for this vehicle will expire/has expired on 27 May 2025. Please renew the road tax promptly, as it is an offence to use or keep a vehicle without valid road tax and insurance. Late renewal fees will be imposed, if road tax is renewed after it expires.

4. Please visit onemotoring.lta.gov.sg for more vehicle-related information and services, or contact us via lta.gov.sg/feedback if you have any queries.

What You Need To Know:

- You may visit onemotoring.lta.gov.sg for more motoring information and digital services provided by the Land Transport Authority.

Visit onemotoring.lta.gov.sg for more information and to access a wide range of vehicle-related services. If you need a Singpass or Corppass account, visit www.singpass.gov.sg or www.corppass.gov.sg.

Yours sincerely

Assistant Registrar of Vehicles
Vehicle Quota & Registration Division
Land Transport Authority
[This is a computer-generated letter, no signature is required.]

Not Authorised
$ 952 oh
Resurvey B4 paint
10days
$ 9520h

ESTIMATE

RC AUTO

160 Sin Ming Drive #06-20 Sin Ming Autocity Singapore 575722
Tel : 97619383 Email: rcauto5555@gmail.com
Reg. No. 53199168K

SKT 2622 G

Date : 17/.02.2025

Quantity	Description/Particular	Unit Price	Amount	
	REAR BOOTLID		2430	00
	REAR BOOLTID LOCK		289	00
	REAR BOOTLID EMBLEM		120	00
	REAR BOOLTID EMBLEM(BRZ)		90	00
	REAR LAMP		460	00
	REAR FENDER		1490	00
	REAR BOOTLID LAMP BRACKET		45	00
	REAR BUMPER RETAINER		60	00
	REAR TAIL LAMP PANEL		380	00
	REAR BUMPER REFORCEMENT		310	00
	REAR PANEL		580	00
	REAR WINDSCREEN RUBBER		211	00
	REAR FUEL CAP		180	00
	REAR BOOLTID RUBBER		260	00
	REAR BUMPER		920	00
	REAR BUMPER LOWER LID		790	00
		TOTAL	8615	00
		LESS ~~10~~ 20	7753	50

Received the above goods in good order and condition

for RC AUTO

Received by

E.&.O.E.

Authorised Signature

ESTIMATE

RC AUTO

160 Sin Ming Drive #06-20 Sin Ming Autocity Singapore 575722
Tel : 97619383 Email: rcauto5555@gmail.com
Reg. No. 53199168K

SKT 2622 G Date :

Quantity	Description/Particular	Unit Price	Amount		
	TOWING FEES	(Bill)	120	00	100 ✓
	TO RENEW ABOVE PARTS		1700	00	1200
	TO RESPRAY JOB		1200	00	1000
	ANTI RUSH		30	00	✓
	REVERSE SENSOR		Dd 250	00	200 IN
	TO REMOVE REAR WINDSCREEN AND QUARTER		250	00	180
	GLASS				
	TO CHECK WIRING		30	00	20
	TO REMOVE UPHOLSTERY		120	00	✓
	GRAND TOTAL		11453	50	

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:

Received the above goods in good order and condition

for RC AUTO

Received by

E.&.O.E.

Authorised Signature

Efficient Towing Services

402B Fernvale Lane #22-229 Singapore 792402
Ah Di Mobile: 8588 8877
Email : efficienttowing.sg@gmail.com
Business Reg. No.: 53349344K

24 Hours Towing Services

bizSAFE 3

NO. 180252

CASH SALE / JOB ORDER

Date : 18/4/[illegible]

Messrs: RC [illegible]

车牌
Vehicle No. SKT2622G

车型
Model No: [illegible]

时间 (日/夜)
Time (day/night):

联络号码
Contact No:

由
Location: D/ [illegible] Central

到
To: [illegible] #08-20

银额
Cash $ 100

其他
Others:

经手人
Authorised By: [signature]

Tow Truck Driver Name: [illegible]

- [ ] Jump Start/Changing of battery
- [ ] Tyre Replacement
- [ ] Accident/Breakdown
- [ ] Multi/Basement
- [ ] With Load/Cargo Box
- [ ] King Dolly
- [ ] Transport Charge
- [ ] Low Body Kit
- [ ] Door Opening Service
- [ ] Crane Up/Winch Out
- [ ] Collect Doc/Key
- [ ] Repo
- [ ] Woodlands and Tuas Checkpoint

注意: 本公司对所拖之车辆, 在進行中如有任何损失或破坏,
一概由车主自行负责。

Note: Vehicle is towed at owner's risk. The company accepts no responsibility for damages or other misdemeanour to your vehicle whilst being towed.

E. & O. E.