

REF:

CS/INC 24060039/Avp3

ASSIGNMENT

From: _____ Date: _____

Estim: ~~Estim~~OD / ~~IP~~ / RES / CD RES / EVA / INV / MVTo In: ~~Estim~~ Vehicle No: _____at Work: ~~Estim~~ m/s

of _____

Insured: SKR 20296

Policy No. _____

Claim's No. MT/1281124-602

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: _____

IDAC Accident Report: _____ 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SF0619E Yr Regn: 2010/DecType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Altis C.C. 1598Colour: Black A/C: Insured / Std / NI / NASp. Reading: 169830 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR053REE104105394Gen. 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: 195/65R15R: 195/65R15

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

TOYO / YOKO or

Front

R/Bal. 06 mmL/Bal. 06 mmD.O.A. 9/6/24Survey held at N51

Rear

R/Bal. 06 mmL/Bal. 06 mmD.O.A. 11/06/24

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

TP INC

21/8/24 Adrian confirmed LS \$2300 (red 5417.32, 70%)

COE Expiry: 30/11/2025

Estimate given during: Yes ()

1st Survey: No ()

MV: 18KPV: 5.3KNett: 12.7K

Date/Time, File Pass to?



Prel. Report

Days Of Repair: 5

Resurvey No. of Trip: _____

1)



Final Report

Date/Time, File Return to?

2)

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Inve (\$)

Survey Fee:

Transportation:

S + RS: \$1

Photos

Others

Report Format:

Report Form / R.P. / C.

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 416Z

Vehicle Details

Vehicle No.: SFQ619E
Vehicle to be Exported: No
Intended Deregistration Date: 23 Jun 2024
Vehicle Make: TOYOTA
Vehicle Model: COROLLA ALTIS 1.6 AUTO
Primary Colour: Black
Manufacturing Year: 2010
Engine No.: 1ZRX039072
Chassis No.: MR053REE104105394
Maximum Power Output: 90.0 kW (120 bhp)
Open Market Value: \$16,286.00
Original Registration Date: 08 Dec 2010
First Registration Date: 08 Dec 2010
Transfer Count: 3
Actual ARF Paid: \$16,286.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 30 Nov 2025
COE Category: A - Car (1600cc & below)
COE Period(Years): 5
PQP Paid: \$18,238.00
COE Rebate Amount: \$5,238.00
Total Rebate Amount: \$5,238.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be deregistered once the COE expires, or when it reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 23 Jun 2024

OK

sgcarmart



Login | Sign Up

New

Used

Electric

Loan

Rent

Sell

Directory

e-Shop

Insurance

Articles

Forum



Altis

Price Range



Depreciation



> 10 year(s) old



Vehicle Type



Search

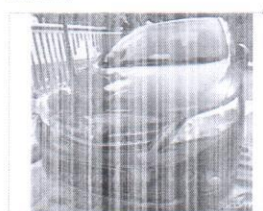
Used Car Comparison

--- Comparing 3 Vehicles ---

Toyota Corolla Altis 1.6A (COE till 09/2025)

Toyota Corolla Altis 1.6A (COE till 10/2025)

Toyota Corolla Altis 1.5A (COE till 01/2026)



Clear All

Add all to Shortlist

Add to Shortlist

Add to Shortlist

Add to Shortlist

Back to search result

CAR DETAILS				
Price	\$17,800	\$19,800	\$19,999	✕
Instalment	N.A.	N.A.	N.A.	✕
Registration Date	03-Jan-2011	20-Feb-2011	17-Mar-2011	✕
Manufactured	2010	2011	2010	✕
Mileage	210,000 km	172,158 km	-	✕
Transmission	Auto	Auto	Auto	✕
Engine Cap	1,598 cc	1,598 cc	1,598 cc	✕
Road Tax	\$1,039 /yr	\$1,039 /yr	\$1,039 /yr	✕
Power	90.0 kW (120 bhp)	90.0 kW (120 bhp)	90.0 kW (120 bhp)	✕
Curb Weight	1,195 kg	1,195 kg	1,195 kg	✕
Features	-	1.6l fuel efficient 16 valve DOHC VVT-i engine, smooth auto transmission, ECT, dual SRS airbags, ABS, digital climate control aircon.	-	✕
Accessories	-	-	-	✕
Description	Original paintwork, engine and gearbox are in perfect condition to drive till next year end.	This car is well known for its reliability and functionality. Excellent condition with a spacious cabin and boot space.	Good catch for short term usage! Good condition and well maintained! Contact for viewing appointment.	✕
COE	\$16,570	\$17,600	\$19,069	✕
OMV	\$16,446	\$15,510	\$16,446	✕
ARF	\$16,446	\$15,510	\$16,446	✕
Depreciation	\$14,000 /yr	\$14,600 /yr	\$12,440 /yr	✕
No. of Owners	5	3	3	✕
Type of Vehicle	Sedan	Sedan	Sedan	✕
Category	COE Car, Direct Owner Sale	COE Car, Premium Ad Car	COE Car	✕
Availability	Available	Available	Available	✕
Remarks	COE expiry date 2025-09-30	COE expiry date 2025-10-31	COE expiry date 2026-01-31	✕
SELLER INFORMATION				
Seller	Direct Owner	Monster Motors Alliance Pte Ltd	SG2000 Motor Leasing	✕
Address	-	8 Tagore Lane	60 Jalan Lam Huat #06-60/61	✕
Office Number	-	-	62192000	✕

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	10/06/2024 10:32 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	09/06/2024 10:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE - CITY BEFORE ORCHARD RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFQ619E
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TAN KING POH
NRIC No	S7272416Z
Email Address	KINGPOHTAN@GMAIL.COM
Mobile Phone No	(Phone) +65-97221602
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5120391072-03

DRIVER

Name of Driver	TAN KING POH
NRIC No	S7272416Z
Date Of Birth	06/09/1972
Occupation	Indoor

Driving Pass Date	03/08/1993
Driving experience	30 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97221602
Alt. Phone Number	-
Email Address	KINGPOHTAN@GMAIL.COM
Address	956 HOUGANG ST 91 #14-298 S530956
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	Chain Collision
Weather Conditions	Clear
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 TO ATTACHED REPORT

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	FILE TOO LARGE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKR2029E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LEE WENG XUAN

Contact Number	(Phone) +65-80719850
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMX1974C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

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 willful misrepresentation or withholding of material facts may allow insurance companies to reassess 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

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

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

Sketch Plan

Veh A: SFG 619E
Veh B: SKR 2029E
Veh C: SMX 1974C


Witness: Mr. [Name]

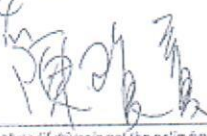
Describe Circumstance of the Accident

On above date & time, I was driving my vehicle A (SF0619E) traveling along CTE towards city. on second lane of a 4-lanes, expressway. Somewhere before Orchard Road exit, I slowed down my vehicle and wanted to After left. Out of sudden, I felt an impact from rear of my vehicle. I then moved my vehicle to the road shoulder and exchange particular. I then realised I was involved in a 3 car chain accident. Vehicle following. SKR2029E, SMX1974C

Declaration

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

Policyholder's Signature / Date & Time
 10/6/2024
 10:15a

Driver's Signature (If driver is not the policyholder) / Date & Time
 10/6/2024
 10:15a

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

