

ASS. REC. BY:

REF: 1051 CS/ICS24120414/Kvp3

C

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. MPC24A00134200

Claims No. DMPC2401771H/ST

Sum Insured: _____

Excess: _____

0

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 8190k

IDAC Accident Rpt: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: 05 days

Res.: Yes or No

Lum Sum: 20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Date / Time

Action / Instruction

1 Park & Found damaged.

8/1 L/Ry @ 4550k Cash (red 4266.83, 48%)

Veh No: SLD 1919 EYr Regn: OK 24Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Tesla Model Y

C.C. _____

Colour M. P. White

A/C: Insured / Std / NI / NA

Sp. Reading 11387

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LRWYHCF S3RC 465807Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: Nil / S/Rim / STD A/Rim or

Tyre Size: F: _____

R: _____

255/45R19

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

TOYO / YOKO or

Hankook

Front

Rear

R/Bal. 8 mmR/Bal. 8 mmL/Bal. 8 mmL/Bal. 8 mmD.O.A. 22/12/24D.O.I. 30/12/2024

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop orFR OK FR

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

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

S + RS. SI

Fees

Others

Add Fee: ☐

: Site Insp (\$)

☐

: Interview (\$)

☐

Tech Invs (\$)

☐

Weekend (\$)

Report Format :

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

TOTAL

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	790C

Vehicle Details

Vehicle No.:	SLD1919E
Vehicle to be Exported:	Yes
Intended Deregistration Date:	23 Dec 2024
Vehicle Make:	TESLA
Vehicle Model:	MODEL Y RWD
Primary Colour:	White
Manufacturing Year:	2024
Engine No.:	-
Chassis No.:	LRWYHCF53RC465807
Maximum Power Output:	220.0 kW (295 bhp)
Open Market Value:	\$52,540.00
Original Registration Date:	01 Apr 2024
First Registration Date:	01 Apr 2024
Transfer Count:	0
Actual ARF Paid:	\$31,826.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Mar 2034
PARF Rebate Amount:	\$23,869.00

Intended COE Rebate Details

COE Expiry Date:	31 Mar 2034
COE Category:	B - Car-Details at OneMotoring
COE Period(Years):	10
QP Paid:	\$97,000.00
COE Rebate Amount:	\$77,600.00
Total Rebate Amount:	\$101,469.00

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 23 Dec 2024

OK

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	23/12/2024 15:49 (SGT)
Reported by	Actual Driver
Date of Accident	22/12/2024 10:30 (SGT)
Exact Location of Accident	Near 47 Jln Pemimpin, Singapore 577200
Additional Location Information	ALONG JLN PEMIMPIN
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD1919E
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM TONG HWEE DARREN
NRIC No	SXXXX790C
Email Address	LIM.TONGHWEE@GMAIL.COM
Mobile Phone No	(Phone) +65-97496445
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Tesla
Model	MODEL Y
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1999
Vehicle Fuel	Electric
First Registration Date	-
Chassis no	LRWYHCFS3RC465807
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	ECICS Limited
Policy Number / Cover Note Number	MPC24A00134200

DRIVER

Name of Driver	HAN SIHUI
NRIC No	SXXXX817G
Date Of Birth	19/08/1984
Occupation	Indoor
Driving Pass Date	15/09/2003
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	21 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97723915
Alt. Phone Number	-
Email Address	HANSIHUI84@GMAIL.COM
Address	991 BUKIT TIMAH ROAD
Address complement	#08-06
Postcode	S589630
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO 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	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
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 Authorised 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 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. The 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.
 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.

x

[Signature]

Policyholder's Signature / Date & Time

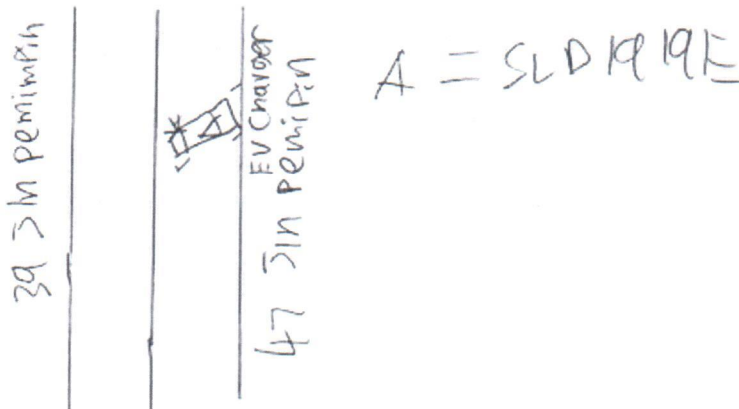
[Signature]

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

[Signature]

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Refer to Police report No. T/20241223/7026

*KINDLY TAKE NOTE THAT YOU HAVE 14 DAYS FROM DATE OF ACCIDENT TO CONVERT TO OWN DAMAGE CLAIM

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel



SINGAPORE POLICE FORCE



T/20241223/7026

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20241223/7026

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/12/2024 11:12		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: HAN SIHUI			Address: 991 BUKIT TIMAH ROAD #08-06 Maplewoods SINGAPORE 589630		
ID Type / ID No.: NRIC NO / S8424817G			Contact No.: Home/Office: Mobile: 97723915		
Nationality: SINGAPORE CITIZEN			Email: hansihui84@gmail.com		
Sex: Female	Age: 40	Date of Birth: 19/08/1984	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Audit manager			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/12/2024 10:30	Type of Location: EVOne charging point at 47 Jalan Pemimpin
Location: JALAN PEMIMPIN				
Weather: Sunny		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLD1919E	Motor car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20241223/7026

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20241223/7026

CONTINUATION OF REPORT

Driver				
Name	HAN SIHUI		ID No.	S8424817G
Related Vehicle	SLD1919E (Motor car)		Contact No.	97723915
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL		Degree of Injury	NIL
GAO EXPRESS TOWING COMPANY STAFF AWARE OF ACCIDENT				
Name	MICHAEL CHIN		ID No.	NIL
Related Vehicle	NIL		Contact No.	87780090
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL		Degree of Injury	NIL

Brief Details.

Car was parked and charging at EVOne charging point at 47 Jalan Pemimpin (outside Gao Express Towing Services).

Accident happened some time between 0930 and 1115 on 22 Dec 2024.

I was informed of damage to the car, and came back to check.

Michael Chin, from Gao Express Towing Services, was present on site and told me that his colleague had knocked into our car earlier while turning, and he (Michael) was waiting there to inform me, to avoid misunderstanding of a hit-and-run, as instructed by his boss Jim Koh.

Penned down a signed memo with Michael (attached), documenting his account of the events and that it was their staff who was at fault.

We would like to lodge a Police report so that we can retrieve the video footage from building 47 Jalan Pemimpin S(577200).



**SINGAPORE
POLICE FORCE**



T/20241223/7026

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20241223/7026

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
NEO ZHI YUAN
Contact No.: 65476079

Signature Of Informant:
The identity of the person making this report has been
authenticated by Singpass. No signature is required.

Date/Time:
23/12/2024 11:12

Classification Of Case:

NP168

Optima Werkz Pte Ltd (Co.Reg.No:201212455W)
10 Ang Mo Kio Industrial Park 2A, #01-05/06 AMK Autopoint
Singapore 568047
Tel: 6481 1522

INSURER:

ECICS Limited (HQ)

PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	
Policy No:	MPC24A00134200	Date of Loss:	22/12/2024
Vehicle Reg. No.:	SLD1919E	Driveable?	
Driver Age/Info:		Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	LIM TONG HWEE DARREN		
Make/Model:	TESLA MODEL Y RWD, (A)	Vehicle Reg. Date:	01/04/2024
Vehicle Colour:	WHITE	Chassis No:	LRWYHCFS3RC465807
Engine No:	NIL		
Odometer:	11386 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	5 ✓		
Present Location:	OPTIMA WERKZ PTE LTD (HQ)		

Not Notified
11 Sep 84550h
Running After Pains
Ex TRA

COST OF CLAIMS	Amount
Parts	6,856.83
Miscellaneous Items	140.00
Labour	1,820.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	8,816.83
+ GST 9.00% (S\$)	793.51
Nett Amount (S\$)	9,610.34

This claim is handled by: LING TING AN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

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:

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 27 Dec 2024)
Parts:	143	TESLA MODEL Y RWD (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLD1919E)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		Bonnet	0.00	0.00	R *1,953.27 F X
2	1		Bonnet lock	0.00	0.00	R *54.20 F X
3	1		Bumper bracket RH, front	0.00	0.00	CPA *0.93 F
4	1		Bumper fog lamp cover RH	0.00	0.00	M/I *6.54 F
5	1		Bumper reinforcement, front	0.00	0.00	R *299.06 F
6	1		Bumper, front	0.00	0.00	CM *542.06 F
7	1		Fender bracket RH, front	0.00	0.00	R *0.93 F X
8	1		Fender moulding RH, front	0.00	0.00	M/I *65.42 F
9	1		Fender RH, front	0.00	0.00	Bu *495.33 F
10	1		Fender shield RH, front	0.00	0.00	CM *177.57 F
11	1		Headlamp RH	0.00	0.00	su *1,741.00 F
12	1		*FRONT BUMPER ABSORBER FOAM	0.00	0.00	su *46.73 F X
13	1		*FRONT BUMPER LOWER REINFORCEMENT	0.00	0.00	R *102.80 F
14	1		*FRONT BUMPER UNDER COVER	0.00	0.00	CM *336.45 F
15	1		*FRONT BUMPER LOWER GRILLE	0.00	0.00	su *186.91 F X
16	1		*FRONT SUPPORT PANEL	0.00	0.00	CM *158.87 F X
17	1		*FRONT SUPPORT PANEL UPPER BRACKET	0.00	0.00	R *14.95 F X
18	1		*FRONT FENDER INNER BRACKET RH	0.00	0.00	R *13.08 F X
19	1		*FRONT BONNET TESLA EMBLEM	0.00	0.00	su *37.38 F

F=Franchise part.

Sub Total (S\$)	6,233.48
+ Margin on L,N Items 10.00% (S\$)	623.35
Total Parts (S\$)	6,856.83

Report was unsubmitted during this print-out.
Generated using **Merimen e-Claims IEAS**

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	1	FRONT BUMPER CLIPS	50.00 ✓
2	1	FRONT FENDER INNER SHIELD CLIPS RH	40.00 —
3	1	FRONT NUMBER PLATE & HOLDER	50.00 X
Sub Total (S\$)			140.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	LABOUR CHARGES TO REMOVE, REPLACE, REFIX, READJUST FRONT ACCIDENT AREAS.	New	700.00 600l
2	LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT FRONT BONNET, FRONT BUMPER, FRONT FENDER RH & ETC.	New	700.00 600l
3	TO DAIGNOSIS FAULT CODE & RESET MEMORY.	New	300.00 120l
4	TO CHECK WIRING & ELECTRICAL SYSTEM.	New	120.00 20l
Gross Labour Cost (S\$)			1,820.00

Report was unsubmitted during this print-out.
Generated using **Merimen e-Claims IEAS**

< END OF ESTIMATES >