

ASS. REC. BY:

REF:

C12 / 15/07/20060060/Kgh3

C

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

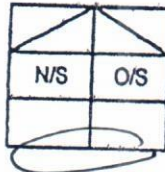
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

829K

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

06 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SKV 8177A

Yr Regn:

10, 15

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

Truck / Trailer or

A

Wagon

Make:

Honda Mobil

C.C

1497

Colour

M. Orange

A/C:

Insured / Std / NI / NA

Sp. Reading

142306

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MR14DD4870FP 000318

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm or

Tyre Size:

F: Hi

185/65R15

R:

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

Front

Rear

R/Bal.

9

mm

R/Bal.

9

mm

L/Bal.

9

mm

L/Bal.

9

mm

D.O.A.

11/6/24

D.O.I.

12/6/2024

Survey held at

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

4/7/21 Lp @ 4300d Calw used @ 1530.30, 26%

Date/Time, File Pass to?

05/7/2006



: Prell. Report



: Final Report

Date/Time, File Return to?

2)

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

Days Of Repair:

6

Resurvey No. of Trip:

2

Survey Fee:

Transportation

S + RS. SI

: Photos

: Others

Report Format :

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

EZ claim

4300

TOTAL

# Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761  
TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg  
GST:201001158E RCB NO:201001158E

SKV8177A  
TP/China

M/S : CHINA TAIPING INSURANCE (S) PTE LTD  
3 ANSON ROAD  
16-00 SPRINGLEAF TOWER  
SINGAPORE 079909  
TEL: 63896111 FAX: 62221033  
ATTN: Motor Claim Department

Claim No: ES2400484  
Estimate No: ES2400484/YISHUN  
Date: 12 Jun 2024  
Policy No: MA034813  
Veh Reg No: SKV8177A  
Make/Model: HONDA MOBILIO SV 1.5  
CVT  
Chassis No: MRHDD4870FP000318  
Engine No: L15Z12101136  
Reg. Date: 02/10/2015

WS Ref: TP/CHINA  
Claim Type: Third Party  
Accident Date: 11/06/2024  
TP Veh Reg No: GBH4383C

## Estimate Repair Cost to Vehicle No : SKV8177A

Pages: 1/2

Description	U/Price	Quantity	Cost	Amount
			S\$	S\$
<b>Cost Plus</b>				
1 REAR BUMPER	220.00	1 PC	Bu 220.00	✓
2 REAR BUMPER CENTRE MOULDING	115.00	1 PC	Sen 115.00	✓
3 TAILLAMP	130.00	2 PC	CVA 260.00	✓
4 REAR TAILGATE	620.00	1 PC	Ry 620.00	✓
5 TAILGATE EMBLEM 'MOBILIO'	33.00	1 PC	na 33.00	✓
6 TAILGATE EMBLEM 'RS'	20.00	1 PC	na 20.00	✓
7 TAILGATE EMBLEM 'I-VTEC'	25.00	1 PC	na 25.00	✓
8 TAILGATE INNER LOCK	95.00	1 PC	pd 95.00	✓
9 TAILGATE INNER RUBBER	65.00	1 PC	Di/na 65.00	✓
10 TAILGATE INNER TRIM BOARD	68.00	1 PC	in 68.00	X
11 TAILGATE REFLECTOR	98.00	2 PC	Gr 196.00	✓
12 TAILGATE OUTER CENTRE GARNISH	135.00	1 PC	CM 135.00	✓
13 TAILGATE GLASS	290.00	1 PC	na 290.00	✓
14 TAILGATE MOULDING	78.00	1 PC	na 78.00	✓
15 REAR END PANEL OUTER	145.00	1 PC	Bu 145.00	✓
16 REAR END PANEL INNER TOP GARNISH	60.00	1 PC	na 60.00	✓
17 REAR WIPER ARM	48.00	1 PC	na 48.00	✓
18 REAR WIPER MOTOR	200.00	1 PC	na 200.00	✓
			2,673.00	
	Add 10%		267.30	2,940.30
<b>Special Net</b>				
19 TAILGATE REVERSE CAMERA	350.00	1 SET	pd/na 350.00	✓
20 REAR WINDSCREEN GLASS SEALANT	40.00	1 PC	na 40.00	✓
21 REAR WINDSCREEN GLASS TINTED FILM	120.00	1 PC	na 120.00	✓
22 IN CAR CAMERA	380.00	1 SET	mi 380.00	✓
				890.00

NOT Notified  
21 Sep @ 4300h

Running After Paint

6 days

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:



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GST:201001158E RCB NO:201001158E

M/S : CHINA TAIPING INSURANCE (S) PTE LTD  
3 ANSON ROAD  
16-00 SPRINGLEAF TOWER  
SINGAPORE 079909  
TEL: 63896111 FAX: 62221033  
ATTN: Motor Claim Department

WS Ref: TP/CHINA  
Claim Type: Third Party  
Accident Date: 11/06/2024  
TP Veh Reg No: GBH4383C

Claim No: ES2400484  
Estimate No: ES2400484/YISHUN  
Date: 12 Jun 2024  
Policy No: MA034813  
Veh Reg No: SKV8177A  
Make/Model: HONDA MOBILIO SV 1.5  
CVT  
Chassis No: MRHDD4870FP000318  
Engine No: L15Z12101136  
Reg. Date: 02/10/2015


## Estimate Repair Cost to Vehicle No : SKV8177A

Pages: 2/2

Description	U/Price	Quantity	Cost S\$	Amount S\$
<b>Labour</b>				
23 REMOVE AND REFIX REAR WINDSCREEN GLASS	100.00	1 LA	100.00	✓
24 REMOVE & REFIX REAR BUMPER ASSY, TAILLAMPS, TAILGATE ASSY, SPOILER, REFLECTORS, LOCK ASSY; TO CUTTING, WELDING & RENEW REAR END PANEL OUTER; KNOCKING & REPAIR REAR PANEL INNER, REAR LH FENDER & REALIGN THE SAME	900.00	1 LA	900.00	600 ✓
25 REMOVE & REFIX REVERSE CAMERA, REAR IN-CAR CAMERA, REVERSE SENSOR & RESET SYSTEM	50.00	1 PC	50.00	✓
26 PUTTY & RESPRAY ON REAR PANEL, TAILGATE, REAR BUMPER, REAR LH FENDER	900.00	1 LA	900.00	750 ✓
27 RUSTPROOFING	50.00	1 LA	50.00	✓
				2,000.00

Total	S\$ 5,830.30
Add GST @ 9%	524.73
Total Amount payable	S\$ 6,355.03

For Cheng Hoe Motor Pte Ltd



AUTHORISED SIGNATURE

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GST:201001158E RCB NO:201001158E

Supp 1

M/S : CHINA TAIPING INSURANCE (S) PTE LTD  
3 ANSON ROAD  
16-00 SPRINGLEAF TOWER  
SINGAPORE 079909  
TEL: 63896111 FAX: 62221033  
ATTN: Motor Claim Department

Claim No: ES2400484  
Estimate No: ES2400484/YISHUN  
Date: 15 Jun 2024  
Policy No: MA034813  
Veh Reg No: SKV8177A  
Make/Model: HONDA MOBILIO SV  
1.5 CVT  
Chassis No: MRHDD4870FP000318  
Engine No: L15Z12101136  
Reg. Date: 02/10/2015

WS Ref: TP/CHINA  
Claim Type: Third Party  
Accident Date: 11/06/2024  
TP Veh Reg No: GBH4383C

## Estimate Repair Cost to Vehicle No : SKV8177A

Description	U/Price	Quantity	Cost	Amount
			S\$	S\$
Supplementary 1				
Cost Plus				
1 TAILGATE DAMPERS	dis/In	84.00	2 PC 168.00	✓
			168.00	
		Add 10%	16.80	184.80
			Total	S\$ 184.80
			GST Amount	S\$ 16.63
			Total Amount payable	S\$ 201.43

For Cheng Hoe Motor Pte Ltd

  
AUTHORISED SIGNATURE

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 280E

### Vehicle Details

Vehicle No.: SKV8177A  
Vehicle to be Exported: No  
Intended Deregistration Date: 11 Jun 2024  
Vehicle Make: HONDA  
Vehicle Model: MOBILIO SV 1.5 CVT  
Primary Colour: Orange  
Manufacturing Year: 2015  
Engine No.: L15Z12101136  
Chassis No.: MRHDD4870FP000318  
Maximum Power Output: 88.0 kW (118 bhp)  
Open Market Value: \$18,965.00  
Original Registration Date: 02 Oct 2015  
First Registration Date: 02 Oct 2015  
Transfer Count: 2  
Actual ARF Paid: \$18,965.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 01 Oct 2025  
PARF Rebate Amount: \$10,430.00

### Intended COE Rebate Details

COE Expiry Date: 01 Oct 2025  
COE Category: A - Car up to 1600cc & 97kW (130bhp)  
COE Period(Years): 10  
QP Paid: \$55,399.00  
COE Rebate Amount: \$7,232.00  
**Total Rebate Amount: \$17,662.00**

### 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 11 Jun 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	11/06/2024 14:27 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	11/06/2024 07:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF YISHUN AVE 2/ YISHUN CENTRAL
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV8177A
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ABDUL HALIM BIN ABDUL RAHMAN
NRIC No	SXXXX280E
Email Address	imanahalim18@gmail.com
Mobile Phone No	(Phone) +65-90045269
Alternative Phone No	+65-96602404

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	MOBILIO SV 1.5 CVT
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	1497

#### INSURANCE COMPANY

Name of Insurance Company	Etiqa Insurance Pte Ltd
Policy Number / Cover Note Number	MA034813

#### DRIVER

Name of Driver	ABDUL HALIM BIN ABDUL RAHMAN
NRIC No	SXXXX280E
Date Of Birth	18/03/1972
Occupation	Indoor

Driving Pass Date .....	05/09/1998
Driving experience .....	25 YEARS AND 9 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90045269
Alt. Phone Number .....	+65-96602404
Email Address .....	imanahalim18@gmail.com
Address .....	BLK 165 YISHUN RING RD #06-713
Address complement .....	-
Postcode .....	760165
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? .....	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 ATTACHED

#### 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 .....	GBH4383C
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	OON YEE KING
NRIC No .....	SXXXX285I

Contact Number	(Phone) +65-87147484
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



Describe Circumstance of the Accident

\*\* NOTE PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

( ) Claim Own Policy ( ☒ ) Claim Third party ( ) Reporting Only

( ) Claim OD/ TP at other workshop ( )

Sketch Plan



Doa - 11/6/24

Time: 0720hrs

Ins - Etika

Accident occurred at the junction of Yishun Ave 2 / Yishun Central. Traffic light just turned green. As I was slowly moving off, out of sudden I felt a very strong impact on my rear and realized lorry (B) had collided onto my car. I got down to check and also exchanged particulars with the lorry driver.

I was alone at that time. Clear and dry weather condition. I may consult doctor later as I felt some discomfort after the accident.


I realized that my rear in-car camera was missing when I reach the workshop. - may have drop on the road as my rear windscreen was totally shattered due to the accident.

Declaration

I/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  
(Name as in NRIC/ID card)  
11/6/24 (YS)

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 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

PLEASE  
TURN  
OVER