

22/03/2002

ASS. REC. BY:

REF:

CS7/FC1/9075453/Eod3/12

Special Instruction:

Survivor: Steve

ASSIGNMENT (Office)From (Person): Meena Chiu of BCI Date/Time: 27/3/19

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

OD/TP/WS/TP RES/OD RES/EVA/INV/MV/CSTo Inspect Vehicle No: GBB 7995Z Insured: SAC 401Rat Workshop m/s YC AUTO Tel: 6261 4007/9626 3494of 41K 9 PIONEER ROAD NORTH #01-56Policy No: \_\_\_\_\_ Claim No: D19002036MFH

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

Make of Veh: \_\_\_\_\_ D.O.A. 14/3/19

(Client's Record)

CA / REV / REP. / REV 24 HRS YRS H.O.D. Endorsement: \_\_\_\_\_Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN/OUT

Date/Time	Action/Instruction ( <u>X</u> ) Estimate
	<u>GBB 7995Z</u> x
	<u>SAC 401R</u> NS/INC17003635/H11H322 DOA: 19/2/17
	<u>Disassemble: 28/3/2019</u>
	<u>After repair: 1/4/2019</u>

ASSIGNMENT

From  
Estimated Cost  
QD / TP / WS / TP RES / QD RES / EVA / INV / MV  
To Inspect Vehicle No:  
at Workshop m/s  
of  
Insured  
Policy No  
Claims No  
Sum Insured:  
(Client's Record)  
Make of Veh:

Date:

Excess:

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Report:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time / Action / Instruction

MV- 7500  
PV- 2161  
NV- 3339

Veh No

GB079952

Yt Regn.

1/03/10

Type

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

Truck / Trailer or

Make:

FIAT DOBLO

c.c. 1248

Colour

Green

A/C

Insured / Std / NI / NA

Sp. Reading

220189

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

ZFA22300005621519

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Locked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rlm. / STD A/Rlm. or

Tyre Size:

F:

195/65R15

R:

11

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

Front

6

Rear

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

14/3/19

D.O.I.

27/3/19

Survey held at

YC Auto

1255pm

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

From LH

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

Date/Time. File Pass to:

☐

: Procl. Report

☐

: Final Report

Date/Time. File Return to:

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

150

Transportation

) S + R. 21

) Photos

) Index

) ...

100%

150

Report Format:

PR2

ump Sum / I.B.I. (3)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

### MOTOR SURVEY ASSIGNMENT

<b>Date</b>	25-03-2019	<b>Our Ref No.</b> D19002036MFSH
<b>Accident Date</b>	14-03-2019	<b>Claim Type.</b> Third Party
<b>Insured Vehicle</b>	SHC0401R	<b>Third Party Vehicle.</b> GBB7995Z
<b>Survey Location</b>	BLK 9 PIONEER ROAD NORTH #01-56	
<b>Contact Person.</b>	CHAN	
<b>Contact No.</b>	62614007/ 96263494	<b>Fax No.</b> 62665282
<b>Survey Type</b>	WITHOUT PREJUDICE:	
<b>Appointed Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	
<b>Contact Person</b>	NA	<b>Fax No.</b> 68416315
<b>Contact Number.</b>	NA	

### FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

### THIRD PARTY SURVEY REQUEST

<b>Cc : Workshop</b>	Y.C AUTO SERVICE	<b>Attention.</b> NIL
<b>Cc : TP Solicitor</b>	VISION LAW LLC	<b>TP Solicitor Fax No.</b> NA
<b>Officer Incharge</b>	MERINA CHIA SAN SAN	

*Veh In - Steve*  
*PRE*

### IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.  
 This is a computer generated letter, no signature required.

> Back to **OneMotoring**

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Company  
Owner ID: 1509N

### Vehicle Details

Vehicle No.: GBB7995Z  
Vehicle to be Exported: No  
Intended Deregistration Date: 28 Mar 2019  
Vehicle Make: FIAT  
Vehicle Model: DOBLO 1.3MJTD  
Primary Colour: Green  
Manufacturing Year: 2008  
Engine No.: 199A20002714506  
Chassis No.: ZFA22300005621519  
Maximum Power Output: -  
Open Market Value: \$19,955.00  
Original Registration Date: 01 Mar 2010  
First Registration Date: 01 Mar 2010  
Transfer Count: 1  
Actual ARF Paid: \$998.00

### Intended PARF Rebate Details

PARF Eligibility: No  
PARF Eligibility Expiry Date: -  
PARF Rebate Amount: \$0.00

### Intended COE Rebate Details

COE Expiry Date: 29 Feb 2020  
COE Category: C - Goods Vehicle & Bus  
COE Period(Years): 10  
QP Paid: \$23,501.00  
COE Rebate Amount: \$2,161.00  
Total Rebate Amount: \$2,161.00

The information contained herein is correct as at 28 Mar 2019

OK

**Das WeltAuto.**  
Used cars you can trust. Guaranteed.

**Low on mileage. High on savings.**



Fiat Doblo

Price Range ▾

Depreciation ▾

2011 ▾

Vehicle Type ▾

Advanced Search

Home » Used Cars » Reeve Auto Pte Ltd » Fiat Doblo 1.3JTD

## Fiat Doblo 1.3JTD

Overview

Financial

Accessories

Similar

Research

Photos

Map

<b>Price</b>	<b>\$10,900</b>	<b>Lifespan</b>	26-May-2031
<b>Depreciation</b> ⓘ	\$5,040 /yr View models with similar depre	<b>Reg Date</b>	27-May-2011 (2yrs 1mth 28days COE left)
<b>Mileage</b>	186,000 km (23.7k /yr)	<b>Manufactured</b> ⓘ	2011
<b>Road Tax</b> ⓘ	N.A.	<b>Transmission</b>	Manual
<b>Dereg Value</b> ⓘ	\$6,279 as of today (change)	<b>OMV</b> ⓘ	\$18,648
<b>COE</b> ⓘ	\$29,011	<b>ARF</b> ⓘ	\$933
<b>Engine Cap</b>	1,248 cc	<b>No. of Owners</b> ⓘ	1
<b>Curb Weight</b> ⓘ	1,380 kg		
<b>Type of Vehicle</b>	Van		

## Features

View specs of the Fiat Professional Doblo Cargo (2014)

## Description

Most Affordable Commercial Van! Newer Model Fiat Doblo At Low Depreciation. Smooth And Comfortable Drive. Vehicle Is In Original And Great Working Condition. Great For Small Business, Delivery Business With 2 Years Left.

## Category

-

## Status

Available

## Resources



## Car Valuation - Free

Find out the market value of your existing car for free. Get started



## Vehicle Evaluation

Afraid of lemons? Request to have this car evaluated professionally. Find out more



Location Map

Shortlist

Compare

Add note

Report Error

More Actions

## Seller Information

## Company

Reeve Auto Pte Ltd

» dealer's pricelist

» 1 vehs sold | 2 vehs available

## Address

49 Jalan Pemimpin #06-07

Search cars nearby this location

## Location

APS Industrial Building

## Office No

63387880

## Contact Person(s)

Charles

978581

Gary

948831

Posted on: 24-Mar-2019 | Last Updated on: 24-Mar-2019

Up! Compare

» more Financial info

https://www.sgcarmart.com/used\_cars/info.php?ID=812730&amp;DL=3517

## 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 Authorised 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 Report	16/03/2019 10:16
Date Of Accident	14/03/2019 16:45
Exact Location Of Accident	ALONG JOO KOON CIRCLE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB7995Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MEGA CONSTRUCTION & TRADING (S) PTE LTD
Co Reg No	200801509N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94561975
Alternative Phone No	OFFICE-94561975

### Vehicle Particulars

Manufacturer	FIAT
Model	DOBLO 1.3MJTD
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
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100480708-02
Cover Note Number	27/10/2018-31/08/2019

### Driver

Name of Driver	PADMANABAN S/O VELLAPA
NRIC No	S8534994E
Date Of Birth	21/10/1985
Occupation	INDOOR
Date Of Driving Pass	12/06/2014
Driving Experience	4 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94561975
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	6A JOO KOON CIRCLE
Postcode	629038
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NPC
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO THE POLICE REPORT

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH TP
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC401R
Vehicle Make/Model/Colour	B
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

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 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. 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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.



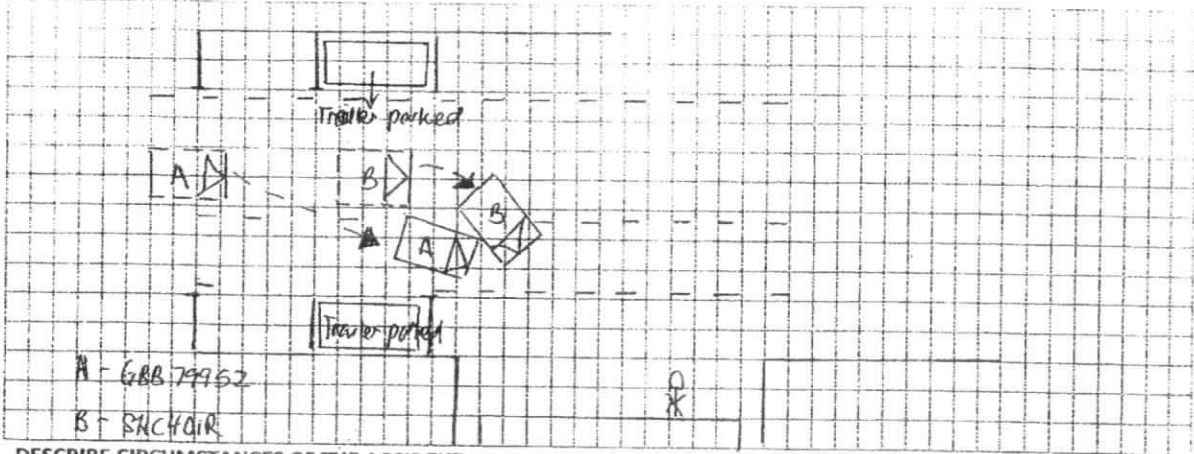
Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: Kenneth  
NRIC/IN No.:

# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


PLEASE REFER TO THE POLICE REPORT


<b>Important:</b> You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a <b>FOURTEEN (14) DAYS CLAUSE</b> WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.	<input checked="" type="checkbox"/>	- Reporting Only
	<input type="checkbox"/>	- Claim OD
	<input type="checkbox"/>	- Claim TP
	<input type="checkbox"/>	- Claim OD/ TP at other workshop

## DECLARATION

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

  
 Policyholder's Signature  
 Date & Time

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

  
 Reporting Centre Personnel's Signature  
 Name: Kenneth  
 Nric/Fin No.



**SINGAPORE  
POLICE FORCE**



T/20190315/2072

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

1 of 3

Report No. T/20190315/2072

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/03/2019 13:17		Vide Report No.:	Station Diary No.: 107
<b>Informant's Particulars</b>			
Name of Informant: PADMANABAN S/O VELLAPA		Address: APT BLK 183A RIVERVALE CRESCENT #07-265 SINGAPORE 541183	
ID Type / ID No.: NRIC NO / S8534994E		Contact No.: Home/Office: Mobile: 94561975	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 33	Date of Birth: 21/10/1985	Type of Informant: Driver
Race: Indian		Language:	Institution / School Name:
Occupation: MANAGER		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 14/03/2019 16:45	Type of Location: Straight Road
Location: Along Road 1 JOO KOON CIRCLE				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: Yes	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GBB7995Z	Van				Slightly Damaged	0
SHC401R	Car				Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20190315/2072

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

2 of 3

Report No. T/20190315/2072

## CONTINUATION OF REPORT

Driver			
Name	PADMANABAN S/O VELLAPA	ID No.	S8534994E
Related Vehicle	NIL	Contact No.	94561975
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the above mentioned date time and location, I was driving my van along Joo Koon Circle behind a taxi. At the last minute, the taxi turn right to enter a factory carpark. However the driver made a very abrupt turn and it caused me to brake hard but I did not managed to stop in time and thus I turn my van to the right to try and avoid the collision. I still end up colliding onto the right side of the taxi. My left side passenger door and the taxi driver's side door were both dented. The taxi driver was conveyed to the hospital and Traffic Police was at scene ref number: J/20190314/0087. I have an in car camera which the TP officers took for investigation purposes.

**LKK Auto Consultants Pte Ltd**


51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

**PRE-REPAIR INSPECTION REPORT**

MS FIRST CAPITAL INSURANCE LTD		Ref: CS3/FCI19005453/Ecd3e2	
36 ROBINSON ROAD		Date: 22-04-2019	
#16-01 CITY HOUSESINGAPORE 068877			
Code: FCI2			
<b>1. Policy Particulars :- (THIRD PARTY CLAIM)</b>			
Insured Veh.	SHC 401R	Veh. Inspected	GBB 7995Z
Policy No.		Coverage (\$)	0.00
Claim No.	D19002036MFSH	Excess (\$)	0.00
Assign From	MERINA CHIA	Assign Date	27/03/2019
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	FIAT DOBLO	c.c	1248
Engine No.	HIDDEN	Year of Reg.	2010
Chassis No.	ZFA22300005621519	Colour	GREEN
Odometer	220180 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	YOKOHAMA	6 mm
L/H Front Tyre	195/65 R15	YOKOHAMA	6 mm
R/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm
L/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION.			
<b>5. General Information</b>			
Accident Date	14/03/2019	Inspect Date / Time	27/03/2019 ( 12:55 PM )
Survey held at	Y. C. AUTO SERVICE BLK 9 PIONEER ROAD NORTH #01-56 SINGAPORE 628461		
<b>5a. Remarks</b>			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D)MARKET VALUE:\$7,500.00			

Report Ref No. CS3/FCI19005453/Ecd3e2

**Inspected By**

CHEN TSUE YEE

Automotive Assessor



K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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