

(08/11/13) wef

ASS. REC. BY: Moyca

REF:

CS/TP 19005859/Urd3

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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SLA7879M

Yr Regn:

6.16

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

Truck / Trailer or

CA/

Make:

Honda Vezel Hybrid c.c

1496

Colour:

white

A/C: Insured / Std / NI / NA

Sp. Reading

65209

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

RU3 1125001

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: 225/55ZR17

R:

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

TOYO / YOKO or

Front

R/Bal.

5

mm

Rear

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

15/12/19

D.O.I.

2/4/19

Survey held at

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

N/S Rear

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

Date / Time

Action / Instruction

5/4/19

4/5 @ 2200

(Ref 3083-40,

589)

RECEIVED 05 APR 2019

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

5/4 - typist

Report Format :

TP

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

2200/2

)

Days Of Repair:

4

Resurvey No. of Trip:

1

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

TOTAL

140

50

50

36

80

356

Ref. No :	CS/TP19005859/Und3n2		Res. Date: 3/4/19	Date Received:
Veh. No :	SLA7879m		SP:	WKSP: [Signature]
C/No :				
Action/Instruction:				
1.File	2.Submit Photo?	YES / NO		
3.Indicate Res. Date On Photo Page?	YES / NO			Message:
If No, due to	a) No authorisation b) Days of repair			
others:				
Final Re-inspection or Progress Photos				[Signature]
				Inspected By:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	8105G
Vehicle Details	
Vehicle No.:	SLA7879M
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Apr 2019
Vehicle Make:	HONDA
Vehicle Model:	VEZEL HYBRID 1.5X A
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	LEB5075017
Chassis No.:	RU31125001
Maximum Power Output:	112.0 kW (150 bhp)
Open Market Value:	\$24,011.00
Original Registration Date:	10 Jun 2016
First Registration Date:	10 Jun 2016
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	09 Jun 2026
PARF Rebate Amount:	\$3,750.00
Intended COE Rebate Details	
COE Expiry Date:	09 Jun 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$56,000.00
COE Rebate Amount:	\$40,226.00
Total Rebate Amount:	\$43,976.00

The information contained herein is correct as at 03 Apr 2019

OK

MSME19026071 / SME Motor 1st Ltd - Kaki Bukit
ENTRY DATE & TIME: 25/02/2019 16:15
SUBMITTED BY: Chia Pei Ying

Your NCD will be affected due to late reporting
Actual e-Filing Submission Date & Time: 25/02/2019 16:19

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 25/02/2019 16:15
Date Of Accident 15/02/2019 17:00
Exact Location Of Accident STILL ROAD
Country/State Of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLA7879M
Insured/Policyholder
Name Of Registered Owner LING HUIFENG SIMON
NRIC No S7828105G
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-91003628
Alternative Phone No OFFICE-91003628
Vehicle Particulars
Manufacturer HONDA
Model VEZEL

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 THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number GA195853

Cover Note Number

Driver

Name of Driver LING HUIFENG SIMON
NRIC No S7828105G
Date Of Birth 23/09/1978
Occupation INDOOR
Date Of Driving Pass 30/03/1998
Driving Experience 20 YEARS AND 10 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-91003628
Fax Number
Contact Number OFFICE-91003628
Email Address NOEMAIL

26/02 2019 TUE 10:20 FAX

002/009

Address 75 EVERITT ROAD
 Postcode 426618
 Was driver an employee of the insured's Company NO
 If NO, Relationship of the Driver with the Insured OWNER
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE
 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? NO
 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) 2
 Passenger 1 NAME: : JACLYN KONG
 GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name JOO CHIAT NEIGHBOURHOOD POLICE POST
 Police Station Address ROAD: 267 ONAN ROAD, POSTCODE: 424773, COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-3458899 - FAX NO: 64474181
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20190215/2191.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? NO
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GZ9768P
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode

26/02 2019 TUE 10:20 FAX

003/009

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

26/02 2019 TUE 10:20 FAX

0004/009

Sketch Plan Pg. 1

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 Authorized 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 rescind 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.

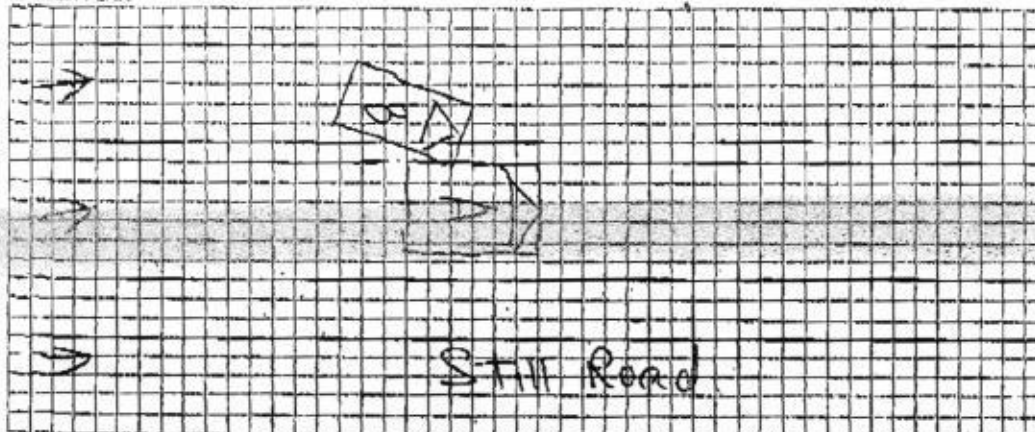

 Policyholder's Signature
 Date & Time: 25/2/19, 3pm


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 25/2/19, 3pm

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

DECLARATION

(We declare the foregoing particulars are true in every respect.)

Policyholder's Signature

Date & Time: 25/2/19, 3pm

GRANIC SketchPlanForm_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 25/2/19, 3pm

Reporting Centre Personnel's Signature

Name:

NRIC/PIN No.:



**SINGAPORE
POLICE FORCE**



T/20190215/2191

1 of 3

Police Station Of Origin:
Joo Chiat NPP
267 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

Report No. T/20190215/2191

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/02/2019 20:49		Vide Report No.:		Station Diary No.: 47	
Informant's Particulars					
Name of Informant: LING HUI FENG, SIMON			Address: 75 EVERITT ROAD SINGAPORE 428618		
ID Type / ID No.: NRIC NO / S7828105G			Contact No.: Home/Office: Mobile: 91003628		
Nationality: SINGAPORE CITIZEN			Email: simon.ling23@gmail.com		
Sex: Male	Age: 40	Date of Birth: 23/09/1978	Type of Informant: Vehicle Owner		
Race: Chinese			Language:		Institution / School Name:
Occupation: Sales and marketing 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: 15/02/2019 17:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 STILL ROAD STILL ROAD SOUTH Middle lane, before the cross junction of Still Road and Marine Parade Road.				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Dual Carriage Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GZ9768P	Van					0
SLA7879M	Car				Slightly Damaged	1

Details of Person Involved

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

**SINGAPORE
POLICE FORCE**

T/20190215/2191

Police Station Of Origin:

Joo Chiat NPP

267 Onan Road SINGAPORE 424773

Tel No: 1800-3459999

2 of 3

Report No. T/20190215/2191

CONTINUATION OF REPORT

Vehicle Owner			
Name	LING HUI FENG, SIMON	ID No.	S7828105G
Related Vehicle	NIL	Contact No.	91003628
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	NIL	Degree of Injury	NIL

Brief Details.

On 15/02/2019 at about 1700hrs, I was driving along Still Road towards Still Road South in the middle lane. Before the cross junction, the van GZ9768P suddenly swerve in from the left lane, this made me to go to the right lane slightly to avoid hitting it. However there was an impact, the driver of the van had stopped directly behind me, he then proceed to go to the right lane to drive off.

I gave chase and our car stopped at the cross junction of Marine Parade Road and Still Road, I got off from my car asking him to stop trying to get particulars, however he scolded me to fuck off as there isn't much damage and just drove off towards Still Road South and enter the expressway, which I did not give chase. I made a check on the damages, and found that the rear left bumper had scratches. The van has company logo which belongs to Eagle I Security Service Pte Ltd (contact no: 62567477), I would like to state that we had not exchanged particulars.



**SINGAPORE
POLICE FORCE**



T/20190215/2191

Police Station Of Origin:

Joo Chiat NPP

267 Onan Road SINGAPORE 424773

Tel No: 1800-3459999

3 of 3

Report No. T/20190215/2191

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Sgt 2 LIEW JIA MING

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

SI KALESWARI PALANI

Contact No.: 65476902

Signature Of Informant:

Date/Time:

15/02/2019 20:49

Classification Of Case:

Authentication Stamp

NP168

Date: _____



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

Affiliated to Federation Internationale Des Experts En Automobile

BLUWEL AUTOMOTIVE SERVICE PTE LTD

Ref : CS/TP19005859/Uvd3n2

BLK 1 KAKI BUKIT AVE 6
#01-28/51/53/55(MAIN OFFICE)SINGAPORE
417883

Date : 08-04-2019



ON BEHALF OF LING HUIFENG SIMON

Code : TP149

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	Veh. Inspected	SLA 7879M
Policy No.	Coverage (\$)	0.00
Claim No.	Excess (\$)	0.00
Assign From	Assign Date	02/04/2019

2. Vehicle Particulars & Condition

Make & Model	HONDA VEZEL HYBRID (A)	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	RU31125001	Colour	WHITE
Odometer	65209	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	225/55 ZR17	DUNLOP	5 mm
L/H Front Tyre	225/55 ZR17	DUNLOP	5 mm
R/H Rear Tyre	225/55 ZR17	DUNLOP	5 mm
L/H Rear Tyre	225/55 ZR17	DUNLOP	5 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S REAR PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	15/02/2019	Inspection Date	02/04/2019
Survey held at	BLUWEL AUTOMOTIVE SERVICE PTE LTD BLK 1 KAKI BUKIT AVE 6 #01-28/51/53/55(MAIN OFFICE) SINGAPORE 417883		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
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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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLA 7879M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	DEFORMED / TORN	863.00	863.00
1	REAR BUMPER SIDE LH	DEFORMED / TORN	225.30	225.30
1	REAR BUMPER SIDE RETAINER LH	NOT NECESSARY	38.50	-
1	SET REAR BUMPER CLIPS	NECESSARY	39.00	39.00
1	REAR BUMPER REFLECTOR LH	NOT NECESSARY	151.00	-
1	REAR FENDER LH	TO REPAIR SEE LABOUR	891.00	-
1	REAR FENDER OUTER PROTECTOR LH	TORN	248.30	248.30
1	REAR MUDFLAP LH	CUT	159.00	159.00
1	REAR TAILLAMP LH	NOT NECESSARY	468.30	-
	LESS 20% DISCOUNT		-	-306.92
			3,083.40	1,227.68
LABOUR				
	TO CHECK WIRING.		50.00	30.00
	TO DISMANTLE & REFIX REAR REVERSE SENSOR.		80.00	50.00
	TO CONDUCT WHEEL ALIGNMENT.		120.00	100.00
	TO DISMANTLE & REFIX SEAT,CUSHION UPHOLSTERY FOR FACILITATE REPAIR FENDER.		120.00	100.00
	TO SPRAY RUST PROOFING ON ACCIDENT AREA.		50.00	20.00
	LABOUR FOR PANEL BEATING & REPLACING PARTS.INCLUSIVE OF THE REPAIR OF REAR FENDER LH.		800.00	600.00
	TO PUTTY & SPRAY PAINTING.		980.00	650.00
			2,200.00	1,550.00
GRAND TOTAL			5,283.40	2,777.68
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,200.00

Report Ref No. CS/TP19005859/Uvd3n2

CHUA KANG SENG

Licensed Appraiser

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