22/03/2002 ASS. REC. BY: REF: (S/MSG)	Special Instruction:
Surveyor: Huac An Assignm	ENT (Office)
From (Person); Jovyn Tung Mi Ling of M	S19 Date/Time: 4.3.20 9.4494
Estimated Cost:	Bill to:
OD TP WS/TP RESIOD RESIEVA/INV/MV/	CS
To Inspect Vehicle No: S41 82291	Insured: SJN 1651R
at Workshop m/s NN YIN MHO	Tel: 9639 1555
of BK & Primit r @ Kgki Bulpt Ava	115-23
Policy No: 20311263	Claim No:
Sum Insured:	Excess:
Make of Veh: (Client's Record)	D.O.A. 15. 3 · 2000
1. n ²	
CA / REV / REP. / REV 24HRS	H.O.D. Endorsement:
Date/Time: 1912 10.154.M Person Contacted:	Vehicle IN DUT
Date/Time Action/Instruction () Estimate	IP.
SG1 82297 - NA/INC 140	13/7/r3 D.0A - 13/12/2018
SJA 1651 R- (S3 FWD 19	101255/ Gcf352 2UA - 12/07/2019
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SS. REC. BY: H ANN REF: MST	-9	ý	
- The second sec	ASSIGNMENT		1
. Date:	עפאל Veh No:	SGL 8229:	Jyr Regn: 28/109/
TOTII.	Type: M.Ca)	M.Cycle / Bus / Van / Lor	rry / Taxi / Prime Mover /
stimated Cost:		Trailer or	
on inspect Vehicle No. SG1 8229 J	Make:	Tojola u	my c.c /99
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it Workshop m/s Xin Yin Ruh		712903h~	T/Radio: Insured / Std / NI / NA
is 1816 8 pramiar Q Calos Bulkt 471		510100	
nsured:	Eng/No:	Ro R -	53BK 410700183
Policy No.	C/No:	Good (Fair) Poor / Burnt	
Claims No.)	
Sum Insured: Excess:		rder / Jammed / Leaked /	4
(Client's Record)		rder I Jammed / Leaked /	
Make of Veh:	Modi: Nil	/S/Rim// STD A/Rim or	
	Tyre Size:	¥:	215/60/n/b
(Policy Condition)		R:	
Remark: The veh had commenced its	N/S O/S BS / DUN / E	EXNOVA / GY / FS / LIZA	/ MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	V Y TOY0/Y0	KO or	
Bal. or Market Value:	Front	mi	Rear
IDAC Accident Rport: Consistent?: Yes or	No R/Bal.	5 / mm	R/Bal. 4 r
GIA / PR Seen: Consistent? : Yes or	No L/Bal.	5 mm	L/Bal. 4/
Est. Repairs: days Res.: Yes o	r No D.O.A.	15/3/20	D.O.I. 17/3/20
Lum Sum: % 3 Val.: Yes o	r No Survey held	at /	in you are.
ON A PEN A DED A 24 HPS MAN	Des. of Dan	nages: Frt / Rear / O/S	/ N/S / U/C / Rooftop or
CA / REV / REP. / 24 TRO	/ehicle: IN./ OUT		
Date:Person Contacted:	The U/C	; / Chassis frame / Boo	dy Structure affected due to colli
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...CLAIM SUBFOLDER...(New Assignment)

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Case	Notified -	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	1,1,0

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SGL8229J				Dat	e of Loss:	15/03/202	20 13:00 - :59 ths and 16 Davs F	rom LTA Rea	Date (Man Yr)1
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SJA1651R									
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i								Ling - 6643	1307]
LKK Auto Co	nsultan	ts Pte Ltd (HQ) - Tel: 6256	5-3561 [Ir	nm.Advi	ce due 1	8/03/20201		***************************************
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View Sent Message

This mail is associated with:

*SGL8229J (621837) [SJA1651R]

CHIA LEE HUAT Mar 15 2020 1:00PM [NG BOON HEON] Xin Yin Auto

Resend View Recipients Print Message Delete Message Forward

From

LKK Auto Consultants Pte Ltd (LKK_HQ), sent on 18/03/2020 09:38 AM.

o SGSGJTML

Subject TP SURVEY SGL 8229J

Dear Jowyn,

Please be informed that we have inspected the vehicle SGL 8229J on 17/3/2020

We are pending estimate from repairer.

Best Regards, Veron Chen

DOCUMENTS SUMMARY

There are no documents.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	- Washington Opinionis manageri Kombo legiter manageri kan
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	799Z
Vehicle No.:	SGL8229J
Vehicle to be Exported:	No
Intended Deregistration Date:	17 Mar 2020
Vehicle Make:	TOYOTA
Vehicle Model:	CAMRY 2.0 AUTO ABS AIRBAG
Primary Colour:	Beige
Manufacturing Year:	2006
Engine No.:	1AZE008826
Chassis No.:	MR053BK4107001835
Maximum Power Output:	108.0 kW (144 bhp)
Open Market Value:	\$28,129.00
Original Registration Date:	28 Sep 2006
First Registration Date:	28,Sep 2006
Transfer Count:	3
Actual ARF Paid: Intended PARF Rebate Details	\$30,942.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	31 May 2026
COE Category:	E - Open Category
COE Period(Years):	10
PQP Paid:	\$46,048.00
COE Rebate Amount:	\$28,569.00
Total Rebate Amount:	\$28,569.00

The information contained herein is correct as at 17 Mar 2020

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MOTOR DIRECTORY

execution

Switch to S

Benefit from

first-class

Home > Used Cars > Toyota Camry 2.0A (COE till 05/2026)

TOYOTA CAMRY 2.0A (COE TILL 05/2026)

OVERVIEW

GALLERY

DESMOND

Price \$35,800

Share

25-May-2006 **Registration Date**

6yrs 2mths 7days **COE** Remaining

Manufactured 2006 Mileage

119,379 km

No. of Owners **Transmission**

Auto

3

Engine Capacity

1,998 cc \$46,048

COE OMV **Paper Value**

Type

\$28,545 \$28,499

Luxury Sedan

Depreciation

\$5,780 / year

Trading in financial instruments car risks and may not be suitable for yo

Car Make / Car Mode	el	
Category	v	Car Type
Transmission	V	Engine Cap
Min Price	v	Max Price
Min Depreciation	V	Max Depre
From Reg Year	▼	To Reg Yea

Good Condition, Regular Serviced, Low Mileage, Low Depreciation. Low Fuel Consumption, Leather Seats, Sports Rims, Reverse Sensors And Camera, No Repairs Needed, Bank Or In House Loan Available.

Features: 2.0l 4 Cylinders 16 Valves Dohc Vvti Engine Automatic Transmission Srs Airbags Abs Multi Function

Accessories: Sports Rims, Factory Fitted Audio System, Reverse Sensors, Leather Seats, Auto Headlight, Retractable Side Mirrors And Indicators.

More info on Toyota Camry(2001-2006) |

For full set of photos and payment break-down, http://www.sgcarmart...=893160&DL=1350

Status: Available | Category: COE Car

Date Posted: 12-Mar-2020 | Date Updated: 13-Mar-2020

SELLER INFORMATION

VEHICLE TOOLS

Get expert assessment on the condi of this car with STA Evaluation

COE Results

Loan Cak

Post an Ad

Road Tax

Carpark Rates

Car Insur

Desmond Auto Trading

210 Turf Club Road Lot A46 (map)



64631556



ROY

JACKY

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RELATED DISCUSSION

+ View All "Camry" Discussion

NEDATED DISCOSSION			, , , , , , , , , , , , , , , , , , , ,
 Topic Title	ONE THE SHEET STORE AS THE SHEET	Replies	Last Action
8th Gen Toyota Camry (XV70)		415	14-Mar-2020
Toyota Camry		750	18-Feb-2020
Anyone bought latest Camry Hybrid? Review ho bo?		64	02-Oct-2019
JDM Camry From PI or Thai Camry from BM		49	02-Jun-2019
2.5 camry hybrid vs 2.5 mazda 6		94	28-Jan-2019

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Home Needs	IT Produc

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 witholding 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	16/03/2020 15:48
Date Of Accident	15/03/2020 13:20
Exact Location Of Accident	ANG MO KIO AVE 3 TRAFFIC JUNCTION
Country/State of Loss	SINGAPORE

DETAILS	OF	OWN	VEHIC	LE
---------	----	-----	--------------	----

Vehicle Registration Number SGL8229J

Insured/Policyholder

Name Of Registered Owner CHIA LEE HUAT NRIC No SXXXX799Z **Email Address NOEMAIL**

Mobile Phone No (LOCAL) +65-98190056 Alternative Phone No. OTHERS-98190056

Vehicle Particulars

Manufacturer **TOYOTA**

Model **CAMRY 2.0 AUTO ABS AIRBAG**

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 NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage THIRD PARTY

Fleet Policy NO

Policy Number 5073564972-04

Cover Note Number

Driver

Name of Driver CHIA LEE HUAT NRIC No SXXXX799Z Date Of Birth 19/03/1961 Occupation **INDOOR**

Date Of Driving Pass 30/10/1981

Driving Experience 38 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98190056

Fax Number

Contact Number OTHERS-98190056

EMail Address NOEMAIL Address

BLK 909 #13-108 HOUGANG STREET 91

Postcode

530909

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 - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident? 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)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: CHUA BEE GEOK

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED:

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

SJA1651R

Vehicle Make/Model/Colour

TOYOTA / COROLLA ALTIS 1.6 AUTO

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
- 2 This Form must be correlated by the Policyholder and/or the Authorized Driver
- 3 information provided must be as trigitful and accurate as essential. Any willuf mescapresentation or withholding of material facts may allow insurance companies to regulate policy liability.
- 4 The issue and assignment of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any laine reporting man 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) fixe 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 (POPA)

Funderstand, acknowledge, agree and consent that

- (a) My insurer, my workshop and the General insurance Association of Singapore ("GIA") may/ark 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' (anyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
 - 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 imquiries by me.
 - I'v) 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/arc 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 lawyens/law firms), which may be staid 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.
- (w) 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, line 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

1/2

Date & Time:

Driver's Signature

(Midriver is not the policyholder)

Unio & Time

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DAG KAKERUKA (VAC) DA KAKERUKA ARRA #WA UZ Hingapere #15933

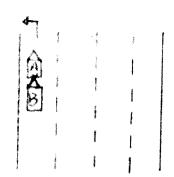
19、60学典 1966年1月1日 1967年1967日 1967年1967日

Reporting Centre Personnel's Signature Name: -

NRICATIN NO

Accident Sketch Plan

SKETCH PLAN



A:56L 8229T

B : SJAILSI R

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older's Signature	Oriver's Signature	Reporting Centre Personnel's Signature
Tierre.	(If driver is not the policyholder)	Name:







Kasturi D/o Devasahayam has successfully logged out.
Your last login date and time was 07 Feb 2020, 13:33:31.
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For security reasons, please CLEAR YOUR CACHE after each session.

Session Transaction History

5/No.lk Asset Type
1 Vehicle

Asset ID SKZ689X

Asset Owner ID

Transaction Type

18.19 Enquire Veh Owner Info (Others) by Law Firm

Trans: 7,49