NATIONAL Assessment Cent	Jcb description	Date &Time		Done by	
Control of the contro	SAS e-filing				
Ref No: Hafine Dow 4875/W	E-mail (within Shrs, Af	C 2hrs)			•
Veh No: 5m77487	i-Motor Claim For		80-001 31	4/20 69:53	,
D.O.A: Nyho-n:yl	i-Motor W/O (Withi				
OD / TP / Reporting Only	i-Photo Uploaded				1 1000
	Assessment/Survey I	Report			500 1886
TP Insurer:		/ Hand to Owner/Wks	P.		
Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:)
TP Particulars: Veh No:		INC()/Non-IN	IC().		
Owner / Driver: (Tel:)	
	Period: () Cover Type	: ()	
Confirmed by : (Dat	e: Ti	me:)	
Insured/Driver Liability: (%)	[Note-Est. Status (WO):	N: 0-20%; P: 21-7	9%. P: 80-1009	6]	
Year of Registration: ()		VO()			
Excess: (\$) Loading: \$1	1,000 ()/\$2,000 ()			-
General Remarks		YAN IN AND THE			1.
() Walk-In Customer : Customer's in	nformation strictly Confiden				
() Total Loss Case : to e-mail Insu		. 4			
	ice: YES () / NO (); Towing Co: (· ď)
		Dates Time	Completed	Done by	V
Remarks: - (INC hotline: 6788 6616)		Later Into	-1		-
T. Tr.	/ Courtesy Car ()		*		
2) QC Check / Post Repair Inspection	()		-		
3) Upload Resurvey Photo [Repair Cost>	23000] ()				
Injury:					P. P. P.
Date/Time Actions				eloanu	<u></u>
		· ·			
	1			× = =====	
•	Table 1		872 SPACE TO SPACE	Anit (S) A	Lint (3)
110202496	lny	oice Preparation Ch	ecklist	A K. W. W. K. A. L.	dd Bill
No. of the second secon	1) AI	R: Accident Reporting (53			4
laimant's Particulars :-	2) D/	: Damage Assessment (\$1 : Towing Fee	00); INC (\$80) \$40/\$4	5	
river/Owner:	4) FT	: Follow-Through Survey : Follow-Through Survey (Sesurvey) \$3	Will be seen a seen	
ontact No:	5) FT Fo	r claiming against INC Only	(wef 10 Jan 2005)		
amaged Portion:	6) TF	R: Re-inspection	\$16	-	-
amaged i ordon.	7) N 8) N	: Idao DA + SMRT Survey FUC Additional Services:-			
C Checked by (Engr-In-Charge):	01		nege S	5	
C. Checked by (Engr-In-Charge):	4.	6: Repair Co-ordination	51	0	
NAMES OF THE POST OF THE PARTY OF THE PARTY.	** Control of the Control of	17: Fost Repair Inspection	\$2	5	
CARRY IN THE SECOND ASSESSMENT FOR CAPACITY DOWNS AND THE SECOND CONTRACTOR AND ASSESSMENT OF THE SECOND CONTRACTOR ASSESS	12 0.000007.180000AY.800000001 A-	18: DV / Collect Excess Coo	dination	T	
South State State State Commence States INV Sec. No. 10 Sec. 1	T	18: DV / Collect Excess Coo (N11): TP (N:n INC) agai	nst INC \$2	·.	
Auditors' Comments::- at. 1: at. 2/3;	9) N	18: DV / Collect Excess Coo (N11): TP (Non INC) again 12: Idae Mobile	nst INC \$2		har J

a part of the

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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.
- Any false reporting may be referred to the Police for investigation.
- 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.

aforesaid,	
	ACCIDENT STATEMENT
Date Of Report	03/04/2020 09:34
Date Of Accident	02/04/2020 12:45
Exact Location Of Accident	CARROS CENTRE CARPARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJM7748T
Insured/Policyholder	
Name Of Registered Owner	CDM AUTOMOBILE
Co Reg No	5XXXX453M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91018449
Alternative Phone No	OFFICE-91018449
Vehicle Particulars	
Manufacturer	HONDA
Model	HONDA CITY LX 1.5 I-VTEC AUTO
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	5111108087-01
Cover Note Number	
Driver	
Name of Driver	SANJEET KUMAR S/O SELVARAJAH
NRIC No	SXXXX867F
Date Of Birth	06/08/1982
Occupation	INDOOR
Date Of Driving Pass	08/06/2010
Driving Experience	9 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81518464
Fax Number	

OFFICE-81518464

NOEMAIL

BLK 239 HOUGANG STREET 22 Address

#06-09

530239 Postcode

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 FIRE, EXPLOSION OR LIGHTNING

1

NO

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

NO Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

1 Number of Passengers (Including Driver)

Details of Police Action

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name WOODLANDS DIVISION HQ

ROAD: 1 WOODLANDS STREET 12, POSTCODE: 738622, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - L/20200402/7042.

Attachment(s)

YES Are accident photos available for attachment?

Was there any video captured by Car Camera? NO

Was there any audio recorded?

NO

NO

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:

UEN: 53363453M

> Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

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		3
CRIBE CIRCUMSTANCES OF THE AC	CIDENT	
refer to place report -	U2020 NO 2 12012.	
la plice il laid	1,00004001401	
8		
CLARATION UTO	ue in every respect	
e declare the foregoing particulars are tr	ue in every respect.	
e declare the foregoing particulars are tr	ue in every respect.	

Date & Time:

(If driver is not the policyholder) Date & Time:

Name: NRIC/FIN No.:

ACCIDENT STATEMENT

to your telepolities.	N		PIME: 12:	(MM:HH)(-W)
LOCAII	ON: 60 July Lyn Hug	1 (4170)	THIE	121
1.	DETAILS OF VEHICLE	1 16		
	a) VEHICLE NUMBER: JOM7	7487.	92	
	DINSURANCE COMPANY: " LTU			
	POLICY NUMBER: 5111108087		Commission of the last	
	D)POLICY TYPE: (COMPREHENSIVE		/ THIPD PAR	TY FIRE &THEFT
	B)MAKE & MODEL:	/ ITHIND I AKT	THINDIAG	THE WITTER IT
	TYPE:(SALOON / COUPE / MPV /	/AN/IOPPY/	MOTOPCYC	LE / OTHERS)
) VEHICLE CATEGORY: (PRIVATE /			
7) PURPOSE OF USING AT ACCIDEN		rorling	022)
	ARE YOU CLAIMING UNDER YOUR		711	21
	IF NO, PLEASE STATE (THIRD PARTY			
•		CLAIM / KERC	DRIING ONE	1
	NSURED / POLICY HOLDER		(64.41	E / FEMALE)
(NRIC/FIN/PASSPORT: \$33634	Tlas		01018449
		Ne.	CONTACT:_	91014111
	:)ADDRESS:			-
	CONTINUE TO 3.d IF DRIVER ALSO	POLICY HOLD	ED	
	RIVER	POLICI HOLL	VER.	
, Justinger	INAME: Samuel Cumarso	e al varaigh	(A)M)	E / FEMALE)
cluding aniver) +	NRIC/FIN/PASSPORT: 582486	26.	CONTACT:_	81518464.
	ADDRESS:	7.1-	CONTACT.	
	ADDRESS.			
	d) DATE OF BIRTH: (6 / 8 / 10	18~)(DD/MA	A /YYYY1	-
	OCCUPATION: (INDOOR / OUTD		411111	
	YEARS OF DRIVING EXPRERIENCE:			- 72
	AS DRIVER AN EMPLOYEE OF T		C COMBANY	2 (VES) (NO)
	NO, RELATIONSHIP OF THE D			1 (1637 110)
	WEATHER CONDITION: (CLEAR /			
	ROAD SURFACE: (DRY / WET / OJ			
6 W	AS ANYBODY INJURED WES IN	1		
7. g	REPORTED TO POLICE (VES / NO)	15		
	IF YES, PLEASE STATE WHICH POLICE			28
8 TH	IRD PARTY VEHICLE			
Λ) VEHICLE NUMBER:		MODEL:	
1 1 1 1				
luding driver)	DRIVER'S NAME:		CONTACT:_	
	IIRD PARTY VEHICLE		COMMON_	
	I) VEHICLE NUMBER:	ä	MODEL:	
of passenger _	DDIVED'S NAME:		CAVED ATRIATS TO A TO THE	
luding driver)	NRIC/FIN/PASSPORT:		CONTACT	
7 71	INTO/FIN/FASSFORI.		CONTACT.	
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email = (dm automobile @gma: + (or
fax =
VIDEO =





L/20200402/7042

1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Woodlands Division HQ 1 Woodlands Street 12 SINGAPORE 738622 Tel No:1800-4660000 Report No. L/20200402/7042

Date/Time Report Made 02/04/2020 18:47	Vide Re	port No.		Station Diary No.	
Name Of Informant SANJEET KUMAR S/O SELVARAJAH	Address APT BLK 239 HOUGANG STREET 22 #06-09 SINGAPORE 530239				
ID Type / ID No. NRIC NO / S8224867F	Contact No. Home/Office: Mobile: 81518464				
Nationality SINGAPORE CITIZEN	Email Address sanjeet0608@gmail.com				
Occupation	Sex	Age	Date of Birth	Race	
Sales and related associate professional nec	Male	37	06/08/1982	Indian	
Institution/School Name	Language English				
Date/Time Of Incident 02/04/2020 12:45 - 02/04/2020 14:00	Location Of Incident 60 JALAN LAM HUAT #01-24 CARROS CENTRE SINGAPORE 737869				

Brief details.

I was trying to find a car park lot when my car air-con suddenly went off and there was smoke coming from the bonnet. As the smoke was getting more dense, i decided to stop the car and unwind the windows. At this point of time, i noticed that there was a fire that was starting from the passenger seat beside me, just below the dashboard. I immediately switched off the engine and tried to put out the fire using my floor mat but to no avail. that's when i went in search of a fire extinguisher. by this time, i had inhaled a considerable amount of smoke, the fire then grew bigger and i was no longer able to go near

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this
Not applicable	report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 02/04/2020 18:47
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20200402/7042

the vehicle. Luckily the fire activated the sprinklers in the building and passerby were also trying to put the fire out, when the fire was growing, i called up SCDF and requested for their help, they came within 10 mins and the fire was eventually put out. The interior of my car SJM7748T, a Honda City, was completely charred and with it, my wife's passport and mine were burned as well.

Victim	CANUSET WILLIAM OVO OFFI	ADA IAII					
Person Name	SANJEET KUMAR S/O SELVARAJAH						
ID Type	NRIC NO	ID No	S8224867F				
Gender	Male	Age	37				
Race	Indian	Language	English				
Occupation	Sales and related associate professional nec	Address Type					
Address	APT BLK 239 HOUGANG STREET 22 #06-09 SINGAPORE 530239	Mobile No	81518464				
Is Informant A Victim?	Yes						

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this
Not applicable	report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 02/04/2020 18:47
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

eBao Tech										Genera	alClaim
Hello, NAC_PAYA_UBI_800	0601						• Change	Language	Chan	ge Password	Log Out
My Desktop	Poli	cy Query									
Notice of Loss	Policy I	No.	511110	8087-01		Date o	of Accident	0	2/04/2020 1	12:45	
	Vehicle	No.(For Motor)	SJM774	8T		Certifi	cate Number				
						Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5111108087- 01	5111108087- 01-000003	CDM AUTOMOBILE	53363453M	GFM	Third Party, Fire & Theft	SJM7748T	SJM7748T	14/09/2019	13/09/2020
	-				C	ontinue					

Policy No.	5111108087-01	Policyholder Name	CDM AUTO	MOBILE	Policyholder NRIC	53363453M	
Certificate No.	5111108087-01-000003	110000000			interes.		
Address	10 UBI CRESCENT #06-18 UBI	TECHPARK SIN	GAPORE 40	8564			
Product Name	FLEET MASTER INSURANCE	Plan			Group Policy Flag	N	
Policy issue Date	17/09/2019	Effective Date	14/09/201	9 00:00	Expiry Date	13/09/2020 23:5	9
Excess Type	Per Accident	All Claims Excess					
Third Party Excess	1500	Own damage Excess	0		Windscreen Excess	0	
Additional Excess	0	OS Premium	0				
Outside Singapore OD Excess	0	Outside Singapore TP Excess	1500			Young/Ir	nexperience Driver Excess
Agent	DICKSON INSURANCE AGENCY	Agent Tel.	63447667		GST Flag	Y	
Co- insurance Flag	No						
Open Policy Info							
FUNCY TIND							
Certificate							
Certificate Info	older Mailing Address						
Certificate Info Policy	nolder Mailing Address	Addre	ss 2	#06-18 UBI TECHPA	ARK	Address 3	SINGAPORE 408564
Certificate Info Policyh Address 1		-00046346	ss 2 ss Type	#06-18 UBI TECHP		Address 3 Post Code	SINGAPORE 408564 408564
Certificate Info		Addre	ss Type d Policy	Over the state of			8-0808-040
Certificate Info Policy Address 1 Address 4 Unit No.	10 UBI CRESCENT	Addre Relate Numb	ss Type d Policy	Singapore address			8-0808-040
Certificate Info Policy Address 1 Address 4 Unit No.	10 UBI CRESCENT 06-18 d Object: 5111108087-01-000	Addre Relate Numb	ss Type d Policy	Singapore address			8-08/8-040
Certificate Info PolicyP Address 1 Address 4 Unit No. Insure	10 UBI CRESCENT 06-18 d Object: 5111108087-01-000	Addre Relate Numb	ss Type d Policy er	Singapore address			8-08/8-040
Certificate Info Policyh Address 1 Address 4 Unit No. Insure Endors Sequen	10 UBI CRESCENT 06-18 d Object: 5111108087-01-000	Addre Relate Numb	ss Type d Policy er	Singapore address 5109414730-01		Post Code	408564

Jaim Handling					
ccident MT/1090580	597000000	7/818/6/2	District of	NEWS 2000 (2000) 110	
folicy No.	5111108087-01	Vehicle No.	S)M7748T	GST Registration No.	
ertificate No.	5111106087-01-000003				
olscyholder Name	CDM AUTOMOBILE			Policyholder NRIC	53363453M
Product Code	FLEET MASTER INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
onsact No. (Mobile)	91018449	Contact No.(Office)	0	Contact No.(Home)	0
mail Address		Special Remark		eCode	Nr. 🗸
PK	® No ○ Yes	TCA	® No ○Yes	eCode Reason	
ICD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes
♥ Accident Details					
aport Date	03/04/2020 09:51	Accident Report Within 24 hrs	Ves	Accident Type	Fire, explosion or lightning
ate of Accident	02/04/2020	Time of Accident hh:mm	12:45	Country of Accident	Singapore
eporting Centre		Grange Force		ICM No.	
coident Location	CARROS CENTRE CARPARK				
▼ Total Excess Applicable					
xcess Type	Per Accident	Windscreen Excess	0.00		
220000000000	202	TP Standard Excess	. 500.00		
D Standard Excess	0.00		1,500.00		
IED OD Excess	0.00	YIED TP Excess		Driver is Covered?	
idditional Excess	0				
otal OO Excess Applicable	0.00	Total TP Excess Applicable			
♥ Benefits					
♥ GST Registered Informa	MATERIAL TO THE RESERVE TO THE RESER		Gazapiero voca i e su es		
ST Registered	No		GST Registration Date	14.	
ST Registration No. foolification History	AND THE PERSON NAMED IN	35 System changed GST Status Verified fro	GST Status Venfied	Yes	
odification matory	03/04/2020 09:92	as system changes that status verified no	in au so rea		
Policyholder Mailing Ad		9,09,000,000	County County County	gagenesa	221212121111111111111111111111111111111
ddress i	10 UBI CRESCENT	Address 2	#06-18 UBI TECHPARK	Address 3	SINGAPORE 408564
Address 4		Address Type	Singapore address	Post Code	408564
Init No.	06-18	Related Policy Number	5109414730-01		
9 OI Driver Info					
Driver Name	Unnamed Driver	* Driver Type	Unnamed Driver		
Innamed driver Name	SANJEET KUMAR S/O SELVARAJ	Driver NR3C	SXXXX867F	Driver DOS	06/06/1982
egister Date of Driver License	08/06/2010	Onver Age	37	Driving Experience	9
Contact No. (Mobile)	81518464	Contact No.(Office)	0	Contact No.(Home)	0
iddress 1	BLK 239	Address 2	HOUGANG STREET 22	Address 3	SINGAPORE 530239
ddress 4		Address Type	Singapore address	Post Code	530239
Jinit No.	06-09				
Does he own a Singapore	O Yes ® No	Driver Vehicle No.		Driver Insurer Company	
Registered car?	National Control of the Control of t				
eclaration					
breathalyser or Blood Test	No.	. Annieronia	() Yes ® No		
Reading?	0 mg	Any injury?	0.000		
fodification History					
Land State Brown					
Claim 001 New					
Daim Type *	OD-MX	Insured Name	CDM AUTOMOBILE	Insured NRIC	53363453M
Contact No. (Mobile)		Contact No.(Home)		Contact No. (Office)	NIL
mail Address		OI Vehicle Number	53M7748T	TP Vehicle Number	
Dalmant Type Claimant Type *	Please Select 🔍	Type of Benefit *	Please Select 💟	Mov 0.00 (170 (200 (0.0))	
Jaimant Name *	Prease select Y				
	12	The state of the s			
Jaimant Address					
Daim Description	SJM7748T ON 2 Apr 2020	AND THE PROPERTY OF THE PARTY O		Name of Preferred Workshop	
referred Workshop Contact to.		Insured Liability *	Not at Fault		
equire Finalisation	Yes	Preferend Regain Option	income to assign workshop	✓ GIA report	Received
ate Registered	03/04/2020 09:53	Claim Close Date		Date Received	03/04/2020 00:00
eport Taken By	Jackson				
Print AK letter	New Street and				
- July av Miles					
			Save Submit		
Attachment					
Towns or to					
9					
Accident No.	MT/1090580	Claim No.	001		
ast Doc. Received	● Yes ○ No	Upload Date	03/04/2020 09:54		
		20000 TOTAL		Confidential Urge	ncy * Descriptio
	Pach *	B	Category *	Confidential Urge	ncy * Descriptio
		Browse			
	Charles and the second	Browse	Dear Please Select	V No V Normal	
		Burn de	Clear Please Select	Normal	~
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		Browse		V NO ∨ Normal	- V
			Clear Please Select		A 201-3



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Assessor: Mobile:

YES / NO

ASSIGNMENT (IDAC)

By CSO- Nature of Accident	<u>lī</u>			By Assessor- 1) Vehicle Information
1) Vehicle hit Vehicle:	2) Vehicle hit ??			Veh No: STM 77487 Yr Regn: 15 Jan 2009
a) Motorcar ()	a) Pedestrian	()	Type: M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV
b) M/cycle ()	b) Animal	()	/ Truck / Trailer or
c) Bicycle ()				Make & Model: Handa City 1.5 Lx c.c 1497
3) Vehicle hit Road Side Objects:				Colour Transmission Type: Quto/Manual
a) Govm.Property ()	b) Road Work Object	()	Eng/No: Sp.Reading:
(Eg: signboard, barrier, tree etc)	c) Private Property	()	C/No: MRHGM 26709 P-020240
4) Vehicle drop into drain		()	Gen. Cond: Good / Fair / Poor / Euro
5) Damage due to Act of God:				Steering: Inorder / Jammed / Leaked Burnt or
a) Fallen Object ()	b) Flood	()	Brake: Inorder / Jammed / Leaked / Burnt or
c) Other,				Modi: Nil STRim STD A/Rim or
6) Parked & Found Damaged:				Tyre Size: F: (85)60814
a) Vandalism ()	b) Hit by Moving Object	()	R:
7) Theft Case				BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
a) Stolen ()	b) Damage found	()	TOYO / YOKO OF HABILEAD
8.5	when recovered.			<u>Front</u> Rear
8) Fire				R/Bal. 4 mm R/Bal. 5 mm
a) Whilst driving ()	b) Parked	()	L/Bal mm L/Bal mm
9) Accident date more than 24hrs	5	()	Parallel Import: Yes / No Towed-In: Yes / No
CONSTRUCTION OF THE PROPERTY O				Repair Type: LS / I.B.I Towing Required: (es) / No
Remarks for internal information			HAMI	No of Repair Days: Vehicle in Idac; (Yes) / No
its ted later	The second secon)		D.O.L 2/4/2020 Time: 6.25pm
9 (10 (~)				By Assessor- 2) Comments
				1) Damages not due to recent accident.
				2) Damages do not seem hit onto:
Remarks to appear in Works Ord	der & Assessment report	t		a.Vehicle() b.Motorcycle() c.Bicycle() d.Pedestrian()
1) Potential Total Loss ()			e.Animal() f.Govm Object() g.Road Work Object()
2) SRS Light on ()		+ 3000 1000	h.Private Property () i.Drain () j.Road Kerb/Grass Verge ()
3) ABS Light on ()			Vehicle does not seem damaged as a result of:
T		- 21		a.Fallen Object () b.Flood () c.Vandalism () d.Fire ()
				e.Moving Object () f.Stolen () g.Stolen & Recovered ()
		-10		Time Started: Time completed:
			816-	1) CSO
1 (4-1) 63	15 44 = m) - (61) +- = 0			April 11 (49) 41 40 4

3) Entire Operation Completed Time:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

· · · · · ID T · · · ·	Business	
Owner ID Type:	453M	
Owner ID: Vehicle Details	453M	
Vehicle No.:	SJM7748T	
Vehicle to be Exported:	No	
ntended Deregistration Date:	03 Apr 2020	
Vehicle Make:	HONDA	
Vehicle Model:	HONDA CITY LX 1.5 I-VTEC AUTO	
Primary Colour:	Grey	
Manufacturing Year:	2008	
Engine No.:	L15A71801864	
Chassis No.:	MRHGM26709P020240	
Maximum Power Output:	88.0 kW (118 bhp)	
Open Market Value:	\$19,965.00	
Original Registration Date:	15 Jan 2009	
First Registration Date:	15 Jan 2009	
Transfer Count:	3	
Actual ARF Paid: Intended PARF Rebate Details	\$19,965.00	
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:		
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	14 Jan 2024	
COE Category:	A - Car (1600cc & below)	
COE Period(Years):	5	
PQP Paid:	\$13,024.00	
COE Rebate Amount:	\$9,845.00	
Total Rebate Amount: Message	\$9,845.00 cannot be further renewed. The vehicle must be de-registered upon	

COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier. The information contained herein is correct as at 02 Apr 2020

OK Robate \$ 9,845 Neet Volum \$ 12,159

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HOT DEAL! Honda Stream 1.8A New Syear Coe.



Cheapest in Market! Full Loan Mthly at \$800++, Best Mpv Modelt

1st Daytona Motor Still Ad



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14 vehicles

Honda City

Honda City 1.5A VTEC (COE till

Model

Price

Depreciation

Reg Date

Eng Cap

Mileage

Veh Type

Status

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Honda City

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Advertiser Login

Απγ

\$26,888

Any

> 10 year(s) old 25-Apr-2009

1,497 cc

139,981 km

Sedan

Available

PREMIUM AD

\$6,620 /yr New Paint Coat! You May Bring Own Mechanic To Inspect Car, No Waste Trip Guarantee. Price Stated Are Final With No Hidden Cost

Assured. Bank Loan At 3.25% Admin Fee At \$500, Vehicle Is Nicely Done Up In Showroom Condition. Purchase Comes With 6 Months C...

Sincere Motoring Pte Ltd

Posted: 01-Apr-2020 Tags: 2009 Honda City, Honda City, Honda, City



Honda City 1.5A VTEC (COE till \$28,888 06/2024)

\$6,800 /yr

01-Jul-2009

1.497 cc

Sedan

Available

Car In Good Working Condition. And Super Low Mileage As It Previously Was Off-peak Car (OPC), Converted To Normal Plate After COE Due Date. First Come First Serve.

DIRECT OWNER

Posted: 26-Mar-2020 Tags: 2009 Honda City, Honda City, Honda, City



Honda City 1.5A (COE till 05/2026)

\$37,800

\$6,130 /yr

02-Jun-2006

1,497 cc

120,000 km

Sedan

Sedan

Available

Just Arrived. New Leather, New Paint Work, Well Maintained By Previous Owner! Full Loan With High Trade In Available. Price Negotiable. Call Now Or Visit Our Showroom Today.

Posted: 05-Mar-2020 Tags: 2005 Honda City, Honda City, Honda, City



Honda City 1.5M VTEC (New 5yr COE)

01-Apr-2010

1.497 cc

SOLD

Well Maintained Low Mileage By Previous Owner, Call Now For Viewing.

Posted: 05-Mar-2020 Tags: 2010 Honda City, Honda City, Honda, City



Is your COE expiring? Let us help you renew it!

Getting your COE renewed is easy, fast and affordable. We'll help you renew your COE and get a loan for it. Get the cheapest loan in town and an approval in 2 days without effort! Enquire today.



Honda City 1.5A VTEC (COE till 02/2029)

N.A

24-Feb-2009

1,497 cc

Sedan

SOLD

Consignment Code: A686 Flexible And Attractive Loan Available. Trade In Available For Your Car! No Hidden Costs. For Further Information Or If You Have Any Questions Please Do Not Hesitate To Contact Us.

CONSIGNMENT

Posted: 03-Mar-2020 Tags: 2009 Honda City, Honda City, Honda, City



Honda City 1.5A LX VTEC (COE

N.A

08-Feb-2010

1.497 cc

Sedan

SOLD

till 02/2025) Lowest Price In Market, No More Worries About Transfer Of Ownership, Immediate Transfer Can Be Done When You Collect The Vehicle! Full Loan Available! PHV Loan Available! In House Loan And Bank Loan Available! Monthly \$700 Onward, Call Or WhatsApp For Viewing...

Posted: 28-Feb-2020 Tags: 2010 Honda City, Honda City, Honda, City

Honda City 1.5A VTEC (COE till

10-Jun-2009

1,497 cc

Sedan

SOLD

PREMIUW AD

Compare

100%

Nice And Clean Interior, Engine And Gearbox No Issue At All. Genuine And Transparent. Viewing By

LKK Paya Ubi

From:

Clarence Richard Anthony <clarence.anthony@income.com.sg>

Sent:

Monday, 6 April 2020 3:18 PM

To:

'rspu@lkkauto.com'

Cc:

ODsupport

Subject:

FW: Vehicle number SJM 7748T Claim number MT/1090580-001

Attachments:

SJM7748T_02042020.PDF

Importance:

High

Hi Jackson

There is no need to do DA.

We will appointing FTA to survey the car at your Centre

Regards

Clarence Anthony

Manager
Operations, Motor and Personal Lines
T+65 6430 7877
www.income.com.sg





From: LKK Paya Ubi [mailto:rspu@lkkauto.com]

Sent: 6 April, 2020 3:10 PM

To: ODsupport <ODsupport@income.com.sg>

Cc: Theresa Vimala D/O Balagangadharan <thrsvim.bala@income.com.sg>; Desmond Foo Guo Hui <desmond.foogh@income.com.sg>; Clarence Richard Anthony <clarence.anthony@income.com.sg>

Subject: FW: Vehicle number SJM 7748T Claim number MT/1090580-001

Importance: High

[CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you can confirm the sender and know the content is safe.]

Hi

Please assist accordingly.

Best Regards,

Jackson Ho Admin

National Assessment Centre Services (LKK Group)

Phone: 6841-0055 | email: <u>rspu@lkkauto.com</u> | fax: 6841-6315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: LKK Paya Ubi [mailto:rspu@lkkauto.com]

Sent: Friday, 3 April 2020 10:01 AM

To: 'ODsupport' < ODsupport@income.com.sg>

Cc: Theresa Vimala (thrsvim.bala@income.com.sg) <thrsvim.bala@income.com.sg>

Subject: Vehicle number SJM 7748T Claim number MT/1090580-001

Importance: High

Dear Hazalysa,

Claiming own damage. Please revert the file to submit damage assessment.

Attached is the GIA Report has been submitted.

Best Regards,

Jackson Ho Admin

National Assessment Centre Services (LKK Group)

Phone: 6841-0055 | email: rspu@lkkauto.com | fax: 6841-6315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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