

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/A1620005482/USF3

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:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐ : Preli. Report

1)

Date/Time, File Return to?

☐ : Final Report

2)

Report Format :

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

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐ Site Insp (\$☐ Interview (\$☐ Tech. Invs (\$☐ Weekend (\$

Survey Fee:

Transportation:

) \$ + RS. \$

) Photos

) Others

TOTAL

Veh No:

Yr Regn:

Type:

Truck / Trailer or

Make:

Colour

Sp Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

R/Bal.

L/Bal.

L/Bal.

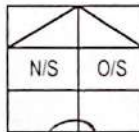
D.O.A.

D.O.I.

Survey held at

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

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



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	27/04/2020 10:56
Date Of Accident	24/04/2020 18:45
Exact Location Of Accident	UPPER PAYA LEBAR RD
Country/State Of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKQ4283D
Insured/Policyholder	
Name Of Registered Owner	TEO SENG CHYE
NRIC No	SXXXX708F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88233366
Alternative Phone No	OFFICE-88233366

Vehicle Particulars

Manufacturer	BMW
Model	Z4
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	GA408498
Cover Note Number	

Driver

Name of Driver	TEO LI ZHEN
NRIC No	SXXXX734Z
Date Of Birth	27/05/1985
Occupation	INDOOR
Date Of Driving Pass	29/04/2005
Driving Experience	14 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93860588
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	19B ROCHDALE ROAD
Postcode	535844
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	RAINING
Road Surface	WET

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?	YES
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: : TEO EN SHAN GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO POLICE DIVISIONAL HQ (F DIVISION)
Police Station Address	ROAD: 51 ANG MO KIO AVENUE 9 , POSTCODE: 569929 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2180000 - FAX NO: 64814246
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: F/20200425/7028.

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	SLN5134C
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	TAN YAN HUI
NRIC/Passport Number	
Contact Number	
Address	

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TEO LI ZHEN
Approximate Age
Injuries Sustain
Injured person in which vehicle? SKQ4283D
Were seat belts worn?
Was this injured conveyed to hospital by
ambulance?

Address
Postcode

DETAILS OF INJURED PERSON 2

Name TEO EN SHAN
Approximate Age
Injuries Sustain
Injured person in which vehicle? SKQ4283D
Were seat belts worn?
Was this injured conveyed to hospital by
ambulance?


Address
Postcode

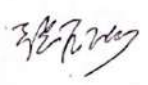
Sketch Plan Pg. 1


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 Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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.

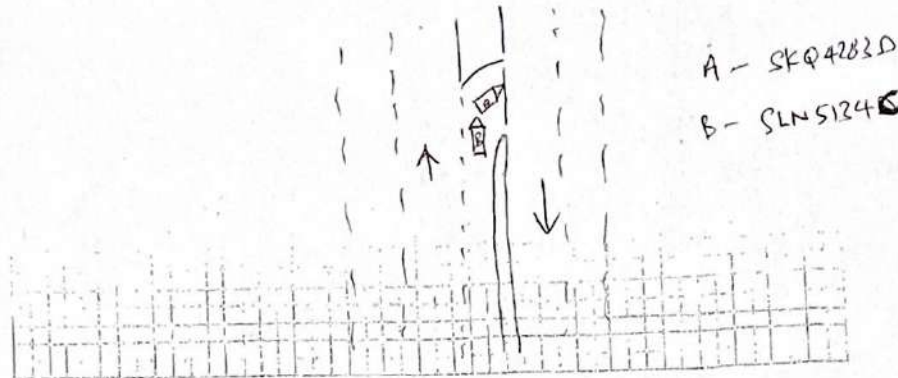

Policyholder's Signature
Date & Time:


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


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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LETTER TO POLICE REPORT,

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:

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



**SINGAPORE
POLICE FORCE**



F/20200425/7028

1 of 2

POLICE REPORT (NP299)

Report No. F/20200425/7028

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-2180000

Date/Time Report Made 25/04/2020 14:02	Vide Report No.	Station Diary No.
Name Of Informant TEO LI ZHEN	Address 19B ROCHDALE ROAD SINGAPORE 535844	
ID Type / ID No. NRIC NO / S8514734Z	Contact No. Home/Office:	Mobile: 93860588
Nationality SINGAPORE CITIZEN	Email Address engxianconstruction@gmail.com	
Occupation ACCOUNT MANAGER	Sex Female	Age 34
Institution/School Name	Date of Birth 27/05/1985	Race Chinese
Date/Time Of Incident 24/04/2020 18:45 - 24/04/2020 18:55	Location Of Incident UPPER PAYA LEBAR ROAD	

Brief details.

My car (SKQ4283D) was stationary about to U turn, then a Mini Cooper (SLN5134C) knocked the car from the back. Impact was huge, when the victim drove herself and her Brother back home 2 mins away, her Brother got off the car and fainted and landed on the back of his head. He was giddy before the fall.

Subjects Involved			
Victim			
Person Name	TEO LI ZHEN		
ID Type	NRIC NO	ID No	S8514734Z

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 25/04/2020 14:02
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



F/20200425/7028

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20200425/7028

Gender	Female	Age	34
Race	Chinese	Language	English
Occupation	ACCOUNT MANAGER	Address Type	
Address	19B ROCHDALE ROAD SINGAPORE 535844	Mobile No	93860588
Is Informant A Victim?	Yes		
Person Name	Teo En Shan	ID No	S9017544J
ID Type	NRIC NO	Age	30
Gender	Male	Language	English
Race	Chinese	Address	19b Rochdale road SINGAPORE 535844
Occupation	Other civil engineering and related technicians	Relation To Informant	Brother
Mobile No	93862355		
Person Name	TEO LI ZHEN (Informant)		

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this
report has been authenticated by
SingPass. No signature is required.

Date/Time:

25/04/2020 14:02

Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	708F
Vehicle Details	
Vehicle No.:	SKQ4283D
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Apr 2020
Vehicle Make:	B.M.W.
Vehicle Model:	Z4 SDRIVE20I ROADSTER 2DR DSC HID NAV
Primary Colour:	White
Manufacturing Year:	2013
Engine No.:	B5020673N20B20A
Chassis No.:	WBALL32090J082305
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$45,679.00
Original Registration Date:	28 Nov 2014
First Registration Date:	28 Nov 2014
Transfer Count:	1
Actual ARF Paid:	\$50,951.00 25475
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Nov 2024
PARF Rebate Amount:	\$35,665.00
Intended COE Rebate Details	
COE Expiry Date:	27 Nov 2024
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$72,201.00
COE Rebate Amount:	\$32,940.00
Total Rebate Amount:	\$68,605.00

The information contained herein is correct as at 30 Apr 2020

OK

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BMW Z4

Advanced Search Submit

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	BMW Z4	Any	Any	Any	Any	Any	Any	Available

**BMW Z4 sDrive20i M-Sport****\$239,000**

N.A

N.A.

1,998 cc

-

Sports

Available

Original Registration Date: 05-Jun-2019

Imported Used Vehicle. Comes with new 10-yr COE.

VAC READY! 1 BID GTED COE! BMW Z4 Roadster Is A Timeless Classic With A Modern Twist. Custom Build With M Sport Package! New...

Cars & Yachts Pte Ltd

Posted: 17-Mar-2020 Tags: BMW Z4, BMW, Z4

**BMW Z4 sDrive23i (COE till 04/2029)****\$64,800**

\$7,200 /yr

28-Aug-2009

2,497 cc

109,000 km

Sports

Available

100% Guaranteed Accident Free, Extremely Well Maintained, All Wear And Tear Parts Replaced Receipts Proof, 90% Loan At 3.18%, Gu...

Posted: 15-Mar-2020 Tags: 2009 BMW Z4, BMW Z4, BMW, Z4

**BMW Z4 sDrive35i (COE till 04/2029)****\$100,000**

\$11,100 /yr

22-Jun-2009

2,979 cc

37,000 km

Sports

Available

Just Serviced By Agent, Genuine Super Low Mileage, Superb Condition. Good For COE Renewal. Car Available For Viewing.

F1 Auto Cars Pte Ltd

Posted: 15-Mar-2020 Tags: 2009 BMW Z4, BMW Z4, BMW, Z4

**BMW Z4 3.0SI Cabriolet (COE till 11/2028)****\$75,800**

\$8,900 /yr

05-Nov-2008

2,996 cc

180,000 km

Sports

Available

AA Trust Certified Quality Pre-Owned Vehicle! Superb BMW Z4 3 Litre SI Edition Convertible! Used Parallel Import! Registered 5 Nov 200...

AA Trust Automotive

Posted: 14-Mar-2020 Tags: 2008 BMW Z4, BMW Z4, BMW, Z4

**Sat Motors (Workshop) - Audio System - In Car Entertainment**

SAT MOTORS offers one-stop motoring solutions such as spray painting, general servicing and maintenance, repair services, air-con servicing, etc.

More info about this shop

**BMW Z4 sDrive35is M-Sport**

-

N.A

04-Aug-2014

2,979 cc

-

Sports

Available

Highest Spec And Fastest Z4 Among All Models. Low Mileage Done, Regularly Serviced And Well Maintained. Showroom Condition.

Posted: 02-Mar-2020 Tags: 2014 BMW Z4, BMW Z4, BMW, Z4

**BMW Z4 sDrive35is****\$88,888**

\$23,700 /yr

06-Dec-2012

2,979 cc

58,800 km

Sports

Available

Lovely Drive And The Sound Is Awesome, Especially The Spooling Part.

Posted: 25-Feb-2020 Tags: 2012 BMW Z4, BMW Z4, BMW, Z4

Compare