

Surveyor Steve

REF: CS/AWA20005609/Ey f3

PRS

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:

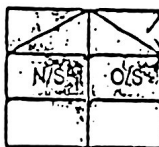
Excess:

(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

Veh No:

SLK 7247T

Yr Regn:

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

Truck / Tractor or

Make:

Toyota Vios

c.c. 1497

Colour

Blue

AC: Insured / Std / Nil / NA

Sp. Reading

121954

T/Radio: Insured / Std / Nil / NA

Eng/No:

CiNo:

MR 053HY 424198383

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / SRM / STD A/RM or

Tyre Size:

F:

175/65R14

R:

11

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

TOYO / YOKO or

Falken

Front

Rear

R/Bal.

4 mm

R/Bal.

4 mm

L/Bal.

4 mm

L/Bal.

4 mm

D.O.A.

11/5/20

D.O.I.

11/5/20

Survey held at

Jementah Motor

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

Front RH

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐

: Proll. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Insp (\$

☐

: Weekend (\$

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

\$ + RS. \$

Plaque:

Others:

..

TOTAL

Report Format :

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



**SINGAPORE
POLICE FORCE**



F/20200505/7035

1 of 1

POLICE REPORT (NP299)

Report No. F/20200505/7035

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 05/05/2020 14:51	Vide Report No.	Station Diary No.
Name Of Informant TAN AH WAH	Address 1 HIGHLAND TERRACE SINGAPORE 549073	
ID Type / ID No. NRIC NO / S0942475Z	Contact No. Home/Office: Mobile: 97306098	
Nationality SINGAPORE CITIZEN	Email Address chyelyetan@gmail.com	
Occupation Retiree	Sex Male	Age 87
Institution/School Name	Date of Birth 30/10/1932	Race Chinese
Date/Time Of Incident 01/05/2020 19:00	Location Of Incident 1 HIGHLAND TERRACE SINGAPORE 549073	

Brief details.

On 1 may2020 at around 7.30pm, my neighbours, Aron, witnessed a silver/white colour van hitting the front right side of my car (SGK7247T) that was parked infront of my house 1 Highland terrace s549073. According to Aron, he took off after the incident. Aron told me about the accident and give me the van vehicle number (GBJ 9641P) that he saw. Aron also gave me him contactable number: 82336347.

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: 05/05/2020 14:51
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

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:
NRIC/FIN No.:

KETCH PLAN

No 1
Highland
Terrace
A

A: SHE 7247T

B: GBJ 9641P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 1/5/2020 at around 3pm I parked my car SHE 7247T in front of my house, no 1 Highland Terrace, after grocery shopping. I went to my house. Then at the same day around 1930hrs, I was informed by my neighbour Mr. Aron that my car was hit by a van GBJ 9641P. and the van drove off.

DECLARATION

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

[Signature]

[Signature]

