	006977 RIFF3 1 2069 : 2023 fore
L CST	1 - 1 N 1 V 9 81 3 N 4
1 1/4>	CMC 1901C Yr Regn: 2008 1 DEC_
From: Date:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	- 1.17-Noror
OD TP WS / TP RES / OD RES / EVA / INV / MV	DIL TO CAROLLA MITS 1.6A CC 1598
To Inspect Vehicle No: SMG 1901C	Colour PLUE
at Workshop m/s F(X 9000	Sp.Reading 240% T/Radio: Insured / Std / NI / NA
of 5, 800 r Lets 51 #01-61	Sp.Reading Z(04/3
Insured: ALA	Eng/No: MR053256106126182
Policy No.	Gen. Cond: Good (Fail) Poor / Burnt
Claims No.	Steering: Morder / Jammed / Leaked / Burnt or
Sum Insured: Excess:	Steering: Morder / Jammed / Leaked / Burnt or
(Client's Record)	Modi: Nil /8/Rim / STD A/Rim or
Make of Veh:	-1 -1001
after 2pm	
(Policy Condition)	R: 1 - CHISH / PIR / SUMI /
Remark: The veh had commenced its N/S O/S	
repair at the time of inspection.	TOYO / YOKO or . ARIVO
2011	Front
	R/Bal. R/Bal. 6 mm
DAC ACCRUMATIONS	UBal. 6 mm
GIA / FIC COOK	D.O.A. 14 08 2019 D.O.I. 06/07/2020
Est Repairs: days Res.: Yes or No	Survey held at FIX Auro
Lum Sum: % 3 Val.: Yes or No	Des. of Damages: Frt   Rear   O/S   N/S   U/C   Rooftop or
CA / REV / REP. / 24 HRS	
Venicle: In/O	The U/C / Chassis frame / Body Structure affected due to collision
Date:Person Contacted:	
Date / Time Action / Instruction	
submi DAR report	
Subilii DAK Teport	•
	•
-	
. 1	
	The state of the s
· ·	n.
	4.
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 4
	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:
: Final Report	Days Of Repair:
Date/Time, File Return to? : Final Report	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:
Date/Time, File Return to?	Pays Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  See:  Survey Fee:  Transportation:  See:  See:  Survey Fee:  Transportation:  See:  See:  See:  See:  See:  See:  See:  Survey Fee:  Survey Fee
Date/Time, File Return to?  2) Add	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  S+RS_SI  Interview (\$ )  Photos
Date/Time, File Return to? : Final Report	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  S+RS_SI  Interview (\$ )  Photos  Trech. Invs (\$ )
Date/Time, File Return to?  2)  Add  Add	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  S+RS_SI  Interview (\$ )  Photos
Date/Time, File Return to?  2)  Represent: DAR	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  S+RS_SI  Interview (\$ )  Photos  Trech. Invs (\$ )

MISLE-17022 STA INSPECTION PTE LTD - Boon Lay ENTRY DATE & TIME 15.08/2019 15:49 SUBMITTED BY. Woodford Richard Vincent

#### 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 Date Of Accident

15/08/2019 16:49 14/08/2019 16:35

**Exact Location Of Accident** 

**UBI AVE 2** 

Country/State of Loss

SINGAPORE

#### \*\* DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMG1901C

Insured/Policyholder

Name Of Registered Owner

CHEW MIN HUAT

NRIC No

SXXXX206G

**Email Address** 

KCSK08@GMAIL.COM

Mobile Phone No

(LOCAL) +65-96314975

Alternative Phone No

OTHERS-96314975

Vehicle Particulars

Manufacturer

TOYOTA

Model

**ALTIS** 

Exact Purpose for which vehicle was being used at

time of accident

WORK PURPOSE

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE HIRE

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5107095684

Cover Note Number

Driver

Name of Driver

CHEW MIN HUAT

NRIC No

SXXXX206G

Date Of Birth

25/06/1954

Occupation

Date Of Driving Pass

OUTDOOR

19/12/1973

**Driving Experience** 

45 YEARS AND 7 MONTHS

Gender

MALE

Mobile Number

Fax Number

(LOCAL) +65-96314975

Contact Number

OTHERS-96314975

**EMail Address** 

KCSK08@GMAIL.COM

BLK 648B JURONG WEST STREET 61

#07-314

642648 driver an employee of the Insured's Company NO o. Relationship of the Driver with the Insured OWNER

hicle Registration Number of Driver's Own

ehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

Weather Conditions CLEAR DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

2 involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO

ambulance?

YES Was any other material or property damaged?

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

NO

Number of Passengers (Including Driver)

Passenger 1

: GOH JOON FOCK NAME: : MALE

GENDER:

**Details of Police Action** 

YES Was the accident reported to the police?

If Yes, Please state which Police Station

NANYANG N.P.C Police Station Name

ROAD: 2 JURONG WEST AVE 5, POSTCODE: 649482, COUNTRY:

Police Station Address SINGAPORE

TEL NO: 1800-7929999 - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED POLICE REPORT

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Was there any audio recorded?

NO

NO

BIDETAILS OF OTHER VEHICLE PROPERTY 1/18

Vehicle Registration Number

SGJ3945T

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

## Accident Sketch Plan

#### SELTIME PLAN

MOOSTENT NOTICE

- . See the second the second of the second to specular the dation of the second
- 2 that form must be completed by the Policyheldes and/or the Authorised beines
- E incretizate provides must be a truthful and asserte as possible day with increpresentation or not booking of requestations must be a truthful and asserted budget liability.
- The state and activities for it is four by insurante configurates it that up affects on all proof orbits on the part of the montained measurement.
- 3. New force recomme may be referred to the Police for investmention
- 5 The report well be form indeed by the an interest of the Gift flactors. Management contains a stabilities by the farmoust becomes the flactors of the report and for a fee be made available open symbolism by accepted safety.
- So the application of this report to the insurers, you benefit content to the authorized this report at the centre and to copies of the tegral being made available aforecast.
- 5 Consent under the Personal Cata Protection Act (PDPA)
  - independent acting aledge lagree and concert that
  - SO THERE TO PROTECT STATES THE CHECKER INSULANCE ASSOCIATION OF Sugapore ("GIA") may/are permitted to collect our section and may other personal determination of sugapore ("GIA") may/are permitted to collect our section and the form and may other personal information of and may other personal information. I and declare and transfer such associated by the content protection of the personal declaration of the personal personal declaration of the personal perso
    - percentage, marking and/or sessing with my claims including the settlement of the classes and any or essary surroughtors relating to the Campa.
    - in investigators the accident and/or my dainer.
    - will activing the wind or the wife my instructions or responding to any enquiries by me;
    - The incomposition my descriptions the mailing of correspondence, statements, invoices, reports or notices to me who described the same as well as on the exercise of employed mail packages), and/or
    - "It working with approache taw in administering, processing, handling and/or dealing with my claims (called lively the "Purposes")
    - 31 AR Inducer's who have reared vehicless imposed in this accident and the insurers' lawyers/law firms, may/are permitted to disless see disclose end/or process my Personal Information for one or more of the above Purposes, and
    - me Personal information may/fain be disclosed by any of the insurers and/or GIA to their third party service providers or approximation of the above Porpulars
    - It is factorial information with the de collected and used to compile claims history for the purpose of fraud detection, investigation and management is present and all fature claims.
    - es the information to collected under (d) above may be shared / disclosed:
      - if its all incomes profes any occur mind parties that assist in evaluating, investigating, controlling or managing fraud, regulators one enforcement and government agencies as reasonably regulated for the purposes stated, or
      - The for complying with requirements under any regulations, laws or court orders.

Analogo pictor's September

Dec & Sing to Jan 1997

Privates Sugnature
(If driver is not the policyholder)
Come & Turne:

Reporting Centre Personnel's Agnature

to the property of the best of the sectors of the s

NAK/FIN NO.

	Accident Sketch Plan
AN	ASMA 1901C WEI BSGJ3945T
RIBE CIRCUMSTANCES OF THE	





Police Station Of Origin:

Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE

649482

Tel No: 1800-7929999

Report No. T/20190814/2178

REPORT O	OF A TRAFFI	CACCIDENT	Tigi. Deport No.:	Station Diary No.:
Date/Time Report Made: 14/08/2019 20:39			Vide Report No.:	525
Name of	nt's Partic f Informant: VIN HUAT	ulars	Address: APT BLK 648B JURONG WE SINGAPORE 642648	ST STREET 61 #07-314
ID Type / ID No.: NRIC NO / S0146206G		06G	Contact No.: Home/Office:	Mobile: 96314975
National			Email:	
Sex: Age: Date of Birth: Male 65 25/06/1954		Date of Birth:	Type of Informant: Driver	Institution / School Name:
Race: Chinese Occupation: PRIVATE HIRE DRIVER			Language:	Institution / School Name.
		RIVER	Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident  Type of		Drink Drive: No	Date/Time of Accident: 14/08/2019 16:35	Type of Location: Straight Road	
Location: Along Road 1 UBI AVENUE  AZ Building e Weather:	2	Road Surface:		Road Speed Limit:	
Clear	W	Dry			
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate	
One Way					

Vehicle No.	Type	33.54.6 <b>7</b>	Make	Model	Color	Condition	No of Passenge
	Car	» ( A » ( 3 / A )	ATGYPTA	COROLLA	Green	Slightly Damaged	0
SMG1901C	Car	SINGAP	ORE 649482 00-7929999	COROLLA ALTIS 1.6 AUTO	Blue	Slightly Damaged	1

Details of Vehicle Insurance
Excity Date
Details of Vehicle Insurance  Vehicle No. Insurance Company Insurance No. Effective Expiry Date





2 of 3

Report No. T/20190814/2178

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

## CONTINUATION OF REPORT

		The second second second second			STATE OF STA	EBERT TO THE TOTAL TO THE T
and the second	Wale Incurance	Insurance	No	ΠE	ffective	Expiry Date
The same of the sa		direction of the second	5684 2		8/01/2019	27/01/2020
SMG1901C	Insurance Company NTUC Income Insurance Co-Operative Limited			ing Contract		
Any Pedestria	rson Involved an Involved: No	Use of Pede	strian (	Crossi	ng: NA	and the second second second
No. of Pedest Driver	rians Injured: NIL	nige the colors of the expension of the colors of the colo	D No.	120.00	S0146206	G
Name	CHEW MIN HUAT		Contac	t No.	96314975	
Related Vehic	ehicle SMG1901C (Car)		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Hospital/Clinic NIL						
Data Trootme	ent NIL	Date Disch		NIL		
Date Heating	Date Treatment   NIL   Degree		injury	NIL		

No. of Days granted Medical Leave

On 14/08/2019 at about 1635hrs, I was driving my car (Blue Toyota Corolla Altis, SMG1901C) along Ubi Avenue 2. As my vehicle passed A-Z Building, another car (Light green Toyota Corolla Altis, SGJ3 45T) turned out from the exit of the building and hit my car on the rear-left bumper. The driver of the car did not stop his vehicle, but overtook me and drove off quickly.

NIL

Degree of Injury

I tailed the car till we reached Ubi Crescent, where traffic was heavy hence his car was unable to advance. I parked my car behind his vehicle and alighted. I walked to his car and gestured for him to come out of his car. I then walked back to my car to access the damages, only to realize that the driver had drove off with his car again. My passenger (Goh Joon Fock, S6832418A, HP: 82228202) managed to take down the vehicle number of the car.

I wish to state that the driver is a male Malay subject in his 30s. The incident was recorded in my in-car camera.





Report No. T/20190814/2178

Police Station Of Origin: 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

Signature Of Interpreter:

Officer In Charge Of Case:

Sr Staff Sgt NEO ZHI YUAN Contact No.: 65476079

Sinvangre Pallee Face!

Not applicable

TP/HRT/

Authentication Stamp

CONTINUATION OF REPORT

Informant is not able to provide sketch plan Sketch Plan

IMPORTANT: Please attach a copy of your vehicle the certificate with you now, please fax a copy to 65	's Insurance Certificate to this report. If you don't have 5474885 stating the report number as reference.
Signature Of Officer Recording The Report:  J / Sgt 2 JASPER TEIW KAI JIE	Signature Of Informant:

Date/Time:

14/08/2019 20:39

Classification Of Case:

# > Back to OneMotoring

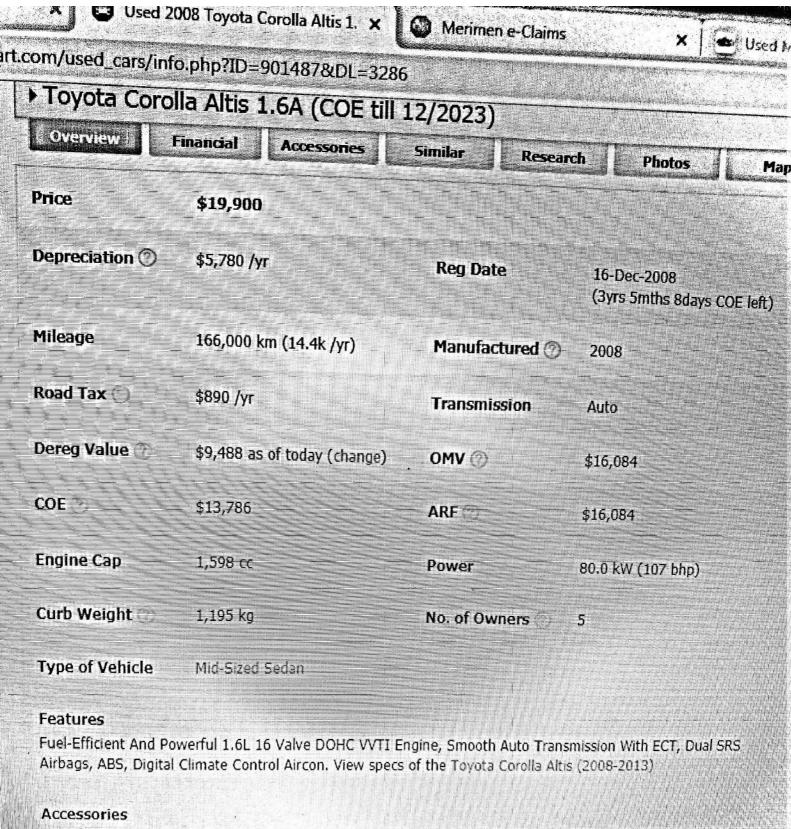
# Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC		
Owner ID:	206G		
Vehicle No.:	SMG1901C		
Vehicle to be Exported:	No		
Intended Deregistration Date:	07 Jul 2020		
Vehicle Make:	TOYOTA		
Vehicle Model:	COROLLA ALTIS 16 AUTO		
Primary Colour:	Blue		
Manufacturing Year:	2008		
Engine No.:	3ZZ4819907		
Chassis No.:	MR053ZEE106126182		
Maximum Power Output:	80.0 kW (107 bhp)		
Open Market Value:	\$16,084.00		
Original Registration Date:	11 Dec 2008		
First Registration Date:	11 Dec 2008		
Transfer Count:	4		
Actual ARF Paid:	\$16.084.00		
Bistyastica Bulski (2015) (1016) (1016) (1016) (1016)			
PARF Eligibility:	Forfeited		
PARF Eligibility Expiry Date:			
PARF Rebate Amount:	\$0.00		
m filosoficial major filosoficial disposition in the contraction of th			
COE Expiry Date:	10 Dec 2023		
- COE Category:	A - Car (1600cc & below)		
COE Period(Years):	5		
PQP Paid:	\$13,786.00		
COE Rebate Amount:	\$9,442.00		
Total Rebate Amount:	\$9,442.00		

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 07 Jul 2020

OK



Multi Function Steering Wheel, Leather Seats, Sports Rims, Factory Fitted Audio System, Retractable Side Mirrors With Indicators, Reverse Sensors.

