

ASS. REC. BY:

REF:

CS/AIG20007140/Avf3

**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.

N/S	O/S

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

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SM58085 Yr Regn: 2018 / MayType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or \_\_\_\_\_

Make: Toyota Camry c.c 2494Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 29636 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: MP03BAK5004012750Gen. 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: 215/55 R17R: 215/55 R17BS: TOY / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or \_\_\_\_\_

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. 7/7/20 D.O.I. 09/07/20Survey held at Yi HeayDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop orFront o/s

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

Date / Time Action / Instruction

TP ALB.

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2) 27/7/20-TypistReport Format: MerimenLump Sum / t.e.t. (\$) 3,300Days Of Repair: 4Resurvey No. of Trip: 1

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

## 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	07/07/2020 16:26
Date Of Accident	07/07/2020 11:30
Exact Location Of Accident	BLK 762A PASIR RIS ST 71 (MSCP LOT 90)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM5808S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN KOK CHENG
NRIC No	SXXXX261B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96625303
Alternative Phone No	OFFICE-96625303

### Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY

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	GA467155
Cover Note Number	

### Driver

Name of Driver	TAN KOK CHENG
NRIC No	SXXXX261B
Date Of Birth	19/02/1954
Occupation	INDOOR
Date Of Driving Pass	18/07/1974
Driving Experience	45 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96625303
Fax Number	
Contact Number	OFFICE-96625303
Email Address	NOEMAIL

Address	BLK 762 PASIR RIS ST 71 #13-228
Postcode	510762
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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	2
Was any body injured in the Accident?	NO
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)	1

#### 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

ON 07/07/2020 AT ABOUT 11.30AM, WHEN I PROCEEDING TO MSCP TO COLLECT MY VEHICLE (SJM5808S), I NOTICED THAT MY VEHICLE WAS HIT BADLY AT FRONT RIGHT PORTION. AT SAME TIME, THERE IS A NOTE THAT CLIP AT WINDSCREEN WIPER THAT THE OWNER OF (SKS7447T) ADMITTED SHE HIT ON MY VEHICLE. THAT'S ALL.

#### 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

Vehicle Registration Number	SKS7447T
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	AISHA
NRIC/Passport Number	
Contact Number	90227501
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



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 renew/reject 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 Roadside Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will not 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 the 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/are be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including the 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.

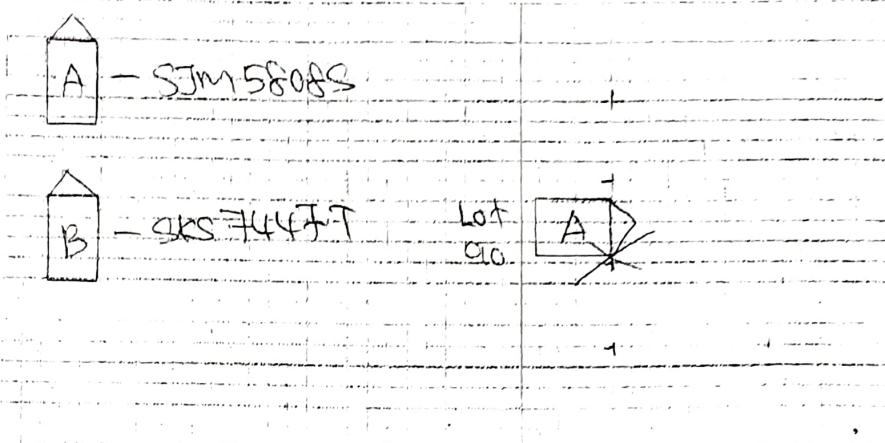
Policyholder's Signature  
Date & Time:

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

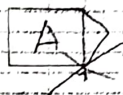
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

### SKETCH PLAN

MSCP



Lot  
910



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 7/7/2020 @ about 11:30am. When I proceeding to MSCP to collect my vehicle S7W 5808S, I noticed that my vehicle was hit badly at front right portion.

At same time, there is a note that clip at windshield wiper, that the owner of SKS 7447T admitted she hit on my vehicle.

That's all.

### DECLARATION

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

Policyholder's Signature  
Date & Time:

Date &amp; Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

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Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

LETTER OF UNDERTAKING

I/We. TAN KOK CHENG, the owner of vehicle no. SJK608

My/Our Insurance is under M/s AXA Insurance Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop, Yi Heng Motor Workshop.

Signed and Acknowledge by:

  
.....  
Signature & signature of policyholder

.....  
Company stamp

07/07/20  
.....  
Date

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	261B
Vehicle Details	
Vehicle No.:	SJM5808S
Vehicle to be Exported:	Yes
Intended Deregistration Date:	08 Jul 2020
Vehicle Make:	TOYOTA
Vehicle Model:	CAMRY 2.5 AUTO
Primary Colour:	Silver
Manufacturing Year:	2018
Engine No.:	2AR1944096
Chassis No.:	MR053AK5004012750
Maximum Power Output:	133.0 kW (178 bhp)
Open Market Value:	\$29,723.00
Original Registration Date:	23 May 2018
First Registration Date:	23 May 2018
Transfer Count:	0
Actual ARF Paid:	\$33,613.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 May 2028
PARF Rebate Amount:	\$25,209.00
Intended COE Rebate Details	
COE Expiry Date:	22 May 2028
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$38,039.00
COE Rebate Amount:	\$29,598.00
Total Rebate Amount:	\$54,807.00

The information contained herein is correct as at 08 Jul 2020

OK