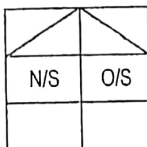


ASSIGNMENT

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: G884118J Yr Regn: 2009 / Feb
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Traller or

Make: Nissan Urven c.c. 2953
 Colour: Silver A/C: Insured / Std / NI / NA
 Sp.Reading: 376767 T/Radio: Insured / Std / NI / NA

Eng/No: _____
 C/No: JN1M64E25Z0792248

Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Order / Jammed / Leaked / Burnt or
 Brake: Order / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 195 R15
 R: 195 R15

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Ohtsu

Front	Rear
R/Bal. <u>06</u> mm	R/Bal. <u>06</u> mm
L/Bal. <u>06</u> mm	L/Bal. <u>06</u> mm
D.O.A. <u>22/7/20</u>	D.O.I. <u>07/07/20</u>

'Survey held at NHT
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Front n/s

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

Date / Time	Action / Instruction
	TP Great American. COE Expiry: 19/02/24.
	MV: 20K (Depreciation @ 5.71k x 3.5yrs = 20K.)
	PV: 9.8K
	Nett: 10.2K.

Date/Time, File Pass to? ☐ : Preli. Report
☐ : Final Report

1) Date/Time, File Return to?

2) 19/8/20-Typist

Report Format: TP

Lump Sum / L.P.J. LS \$3500

Days Of Repair: 4

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Insp (\$)
☐ : Wash and

Survey Fee:

Transportation:

3 + RS. \$

Photos

Other:

TOTAL

Great American
- LKK (ADRIAN)

MCHM20061846 Chew Motor Pte Ltd - HQ
ENTRY DATE & TIME 22/07/2020 16:11
SUBMITTED BY Chong Siok Ling

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	22/07/2020 16:11
Date Of Accident	22/07/2020 13:30
Exact Location Of Accident	CARPARK OF ONE DUSUN RESIDENCES
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB4118J
Insured/Policyholder	
Name Of Registered Owner	SUPER COOL AIR CONDITIONING SERVICES PTE LTD
Co Reg No	2XXXXX627W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96417345
Alternative Phone No	OFFICE-96417345

Vehicle Particulars

Manufacturer	NISSAN
Model	URVAN-3.0 5DR 5MT ABS A/B 2WD (M)

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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD20V01939/VCV/R00
Cover Note Number	

Driver

Name of Driver	ATWAL SHAMINDER SINGH
Passport No/FIN	GXXXX128T
Date Of Birth	05/05/1985
Occupation	OUTDOOR
Date Of Driving Pass	14/03/2015
Driving Experience	5 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92307282
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	21 BUKIT BATOK CRESCENT #09-79 WCEGA TOWER
Postcode	658065
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	COLLIDED INTO PARKED VEHICLE
Weather Conditions	AFTER RAINING
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

I was parked stationary at Car park of One Dusun residences and I inside the vehicle. Suddenly, I felt an impact. Veh "B" was in the midst of reversing parking his car into the car park lot and misjudged resulted collided onto front LH portion of my vehicle and caused damages. I alighted and both of us exchanged particular and veh "b" said claim against his insurance.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

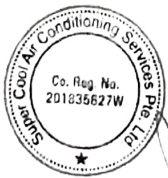
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP928M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to your insurer as soon as possible.
2. The report must be completed by the Policyholder and/or the Authorized Driver.
3. The report must be truthful and accurate as possible. Any willful misreporting or withholding of material information may allow insurers to repudiate policy liability.
4. The Insurer and the Reporting Centre Personnel shall not be held liable for an admission of policy liability on the part of the Insured or the Insurer.
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 while be made available upon application by interested parties.
7. On the lodging 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 (to 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 purposes, 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 (a) 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

I was parked stationary at Car park of one Dusun residences and I inside the vehicle.
Suddenly, I felt an impact. Veh "B" was in the midst of reversing parking his car into the car park
lot and misjudged resulted collided onto front LH portion of my vehicle and caused damages
I alighted and both of us exchanged particular and veh "b" said claim against his insurance.

DECLARATION

1/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.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 627W

Vehicle Details

Vehicle No.: GBB4118J
Vehicle to be Exported: No
Intended Deregistration Date: 22 Jul 2020
Vehicle Make: NISSAN
Vehicle Model: URVAN PANEL LWB 3.0 5DR
5MT ABS A/B 2WD

Primary Colour: Silver
Manufacturing Year: 2008
Engine No.: ZD30210196K
Chassis No.: JN1MG4E25Z0792248
Maximum Power Output: -
Open Market Value: \$30,592.00
Original Registration Date: 20 Feb 2009
First Registration Date: 20 Feb 2009
Transfer Count: 3
Actual ARF Paid: \$1,530.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 19 Feb 2024
COE Category: C - Goods Vehicle & Bus
COE Period(Years): 5
PQP Paid: \$13,688.00
COE Rebate Amount: \$9,797.00
Total Rebate Amount: \$9,797.00

Message


Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.


The information contained herein is correct as at 22 Jul 2020


OK

2015 Jaguar XF 2.0A Luxury at \$96.8k

Weekend Promol Interest Rate
@ 1.98%
Trust Motoring StarAd





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- Specialist in Japanese cars
- Easy loan approval
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Status

Search Selection	urvan	Any	Any	> 10 year(s) old	Any	Any	Any	Available
	<input type="checkbox"/> Nissan Urvan 3.0M Fuel Type: Diesel In House Loan Available, Fast Loan Approval.	\$26,888	N.A	30-Jul-2004	2,953 cc	-	Bus	Available
View Details View Photos View Video View Map								
	<input type="checkbox"/> Nissan Urvan 3.0M (COE till 06/2025) Fuel Type: Diesel Van Is Well Maintained By Workshop As It Is A Cargo Van For Workshop Use Only. Renewed 5 Year New COE. Good Condition Upholstery And Engine Condition.	\$23,888	\$4,890 /yr	15-Jun-2005	2,953 cc	-	Van	Available
View Details View Photos View Video View Map								
	<input type="checkbox"/> Nissan Urvan 3.0M (COE till 06/2023) Fuel Type: Diesel All Major Wear And Tear Replaced Making This A Good Vehicle Not To Be Missed. New Paintwork Painted On. Call And Arrange For Viewing With Our Friendly Salesman.	\$16,800	\$5,740 /yr	01-Jul-2008	2,953 cc	-	Van	Available
View Details View Photos View Video View Map								
	<input type="checkbox"/> Nissan Urvan 3.0A (COE till 08/2023) Fuel Type: Diesel Text/Call For Viewing. View To Believe. Bus Lifespan Till August 2028 Can Extend 5 More Years.	\$17,500	\$5,740 /yr	14-Aug-2008	2,953 cc	-	Bus	Available
View Details View Photos View Video View Map								

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