

ASS. REC. BY:

REF:

CS/CTI20008029/Aqf3

TP- 111

ASSIGNMENT

From:

Date:

4-8-2020

Estimated Cost:

OD TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

SGW 6777Z

at Workshop m/s

SK Automobile

of

Insured:

Policy No.

DMCVSNA00044532000

Claims No.

SNM20D202707C02

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:

9

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:

SGW6777Z

Yr Regn:

2007 July

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

Truck / Trailer or

Make:

Toyota Axis

c.c 1496

Colour:

Grey.

A/C: Insured / Std / NI / NA

Sp. Reading

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

NZE1416038743

Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F: 185/70R14.

R: 185/70R14.

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

TOYO / YOKO or

Front

Rear

R/Bal.

06

mm

R/Bal.

06

mm

L/Bal.

06

mm

L/Bal.

06

mm

D.O.A.

D.O.I.

04/08/20.

Survey held at

SK.

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 Chm.

COE Expiry: 25/07/22.

06/08/20@12pm Informed Cecilia Low, we are pending estimate from repairer.

30/10/20@9.10am revised to Cecilia Low via Merimen.

MV: 14.5K

PV: 9.5K

Nett: SK.

LS \$5000, 9 days (Red \$13353.25, 73%)

Date/Time, File Pass to?

☐

Preli. Report

1) 30/10 Typist

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

9

Resurvey No. of Trip:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

\$ + RS, \$

Photos

Others

TOTAL

Report Format: MER-TP

Lump Sum / Net (\$ 5000)

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	03/08/2020 13:16
Date Of Accident	01/08/2020 15:20
Exact Location Of Accident	BLK 460 PASIR RIS DRIVE 4 CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGW6777Z
Insured/Policyholder	
Name Of Registered Owner	ORTHO GRAPHICS
Co Reg No	5XXXX782X
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91456022

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA AXIO 1.5
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5092764036-03
Cover Note Number	

Driver

Name of Driver	FOO AH TIANG
NRIC No	SXXXX163G
Date Of Birth	14/08/1954
Occupation	OUTDOOR
Date Of Driving Pass	18/10/1983
Driving Experience	36 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91456022
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 458 PASIR RIS DRIVE 4 #03-331
Postcode	510458
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	SIDE SWIPE
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	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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

PLEASE REFER TO SKETCH PLAN

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	GBB4399P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJC2045Z
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Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

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 a customer, compares to a **confirmation of policy liability** on the part of the relevant 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.

Ortho Graphics

CITY AUTO PTE LTD
Blk 8 Sin Ming Road
#01-58/60/62 Sin Ming Ind Est
Singapore 675643
Tel: 6453 4243 Fax: 6453 7944
(Claims Section)

.....
Authorised Signature

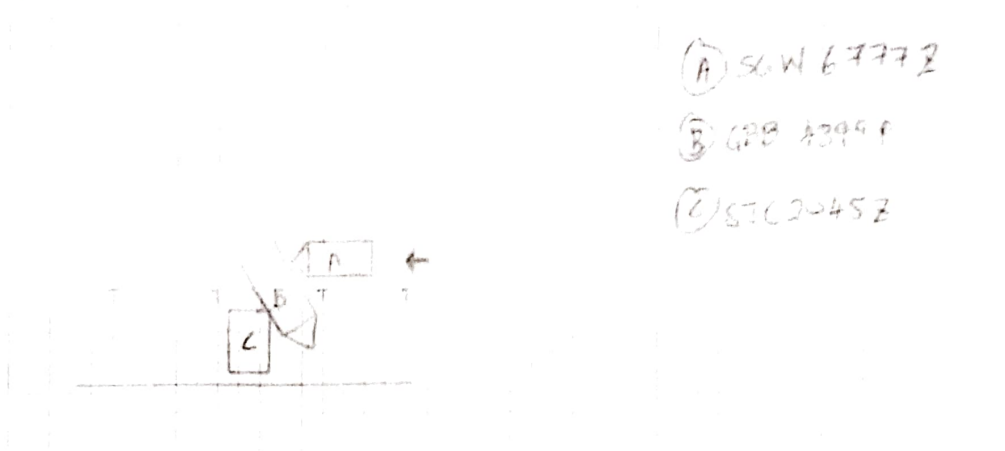
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 01/08/2020 at around 1520hrs, I was driving straight at the carpark, suddenly I felt an impact from my left. I alighted and saw vehicle B (GBB 4399P) had reverse out of the parking lot and collided into my car.

DECLARATION

(We declare the foregoing particulars are true in every respect.)

[Signature]
Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: CITY AUTO PTE LTD
NRIC/FIN No: Bk 8 Sin Ming Road
#01-53/52 Sin Ming Ind Est
Singapore 575635
Tel: 6453 4444 Fax: 6453 7944
(M) 9755 8888

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Business
Owner ID: 782X

Vehicle Details

Vehicle No.: SGW6777Z
Vehicle to be Exported: No
Intended Deregistration Date: 03 Aug 2020
Vehicle Make: TOYOTA
Vehicle Model: COROLLA AXIO 1.5X A
Primary Colour: Grey
Manufacturing Year: 2007
Engine No.: 1NZC641372
Chassis No.: NZE1416038743
Maximum Power Output: 81.0 kW (108 bhp)
Open Market Value: \$11,473.00
Original Registration Date: 26 Jul 2007
First Registration Date: 26 Jul 2007
Transfer Count: 2
Actual ARF Paid: \$12,621.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 25 Jul 2022
COE Category: A - Car (1600cc & below)
COE Period(Years): 5
PQP Paid: \$24,100.00
COE Rebate Amount: \$9,523.00
Total Rebate Amount: \$9,523.00

Message

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

The information contained herein is correct as at 03 Aug 2020

OK

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Auto | Price Range | Depreciation | > 10 years | Vehicle Type

Used Car Comparison

Comparing 4 Vehicles

Toyota Corolla Axio 1.5A X (COE till 03/2022)



Close All

Auto till 10/2022

Back to search result

Toyota Corolla Axio 1.5A X (COE till 05/2022)



Auto till 10/2022

Toyota Corolla Axio 1.5A X (COE till 11/2022)



Auto till 10/2022

Toyota Corolla Axio 1.5A X (COE till 02/2023)



Auto till 10/2022

CAR DETAILS

Price	\$13,300	\$13,800	\$18,800	\$18,800
Instalment	N.A.	N.A.	N.A.	N.A.
Registration Date	02-Mar-2007	16-May-2007	23-Nov-2007	29-Feb-2008
Manufactured	2006	2006	2007	2007
Mileage	-	-	136,155 km	120,000 km
Transmission	Auto	Auto	Auto	Auto
Engine Cap	1,496 cc	1,496 cc	1,496 cc	1,496 cc
Road Tax	\$887 /yr	\$887 /yr	\$887 /yr	\$818 /yr
Power	81.0 kW (108 bhp)	81.0 kW (108 bhp)	81.0 kW (108 bhp)	81.0 kW (108 bhp)
Curb Weight	1,130 kg	1,130 kg	1,130 kg	1,130 kg
Features	1.5L Super Fuel Efficient Yet Reliable DOHC 16V VVT-I Engine, Smooth CVT Auto Transmission With Eco Mode, ABS, SRS Airbags, Climatic Aircon Controls.	Airbags, ABS.	1.5L Super Fuel Efficient Yet Reliable DOHC 16V VVT-I Engine, Smooth CVT Auto Transmission With Eco Mode, ABS, SRS Airbags, Climatic Aircon Controls.	-
Accessories	Leather Seats, Upgraded Sports Rims, Pioneer Audio Player, Reverse Sensors, Auto Retractable Side Mirrors And Indicators.	Sports Rims, Leather Seats, Original Toyota Player, Reverse Sensors, LCD Monitor.	Leather Seats, Auto Retractable Side Mirrors And Indicators, Sport's Rims, Pioneer Cd Player, Fog Lights.	-
Description	1 Year Warranty, 100% Loan Available, 1 Year In House Warranty Official Certificate, 1 Year Free Servicing And Maintenance, Accident Free, STA Or VICOM Evaluation Are Welcome, All Refurbished Works Done "Under One Roof", Bank And In House Loan Available At Competitive Interest Rate, Free Grooming, Warranty Not By Third Party Workshop, Kindly Call For Viewing Appointment.		Relatively Low Mileage Clocked At 11.3K Km A Year. Engine And Gearbox Well Maintained With Regular Servicing. Well Preserved Interior And Paintwork Still In Good Condition. Ideal For Short Term Drive And Cheaper Than Rental. Low Cost And Easy To Maintain With Low Fuel Consumption. Bank And In House Loan Available. Trade In Welcome. Call Us Now Before This Is Gone.	Just Arrived! Well! Previous Owner! In Available. Price Or Visit Our Showr
COE	\$24,715	\$25,333	\$20,997	\$21,061
OMV	\$11,657	\$13,535	\$12,270	\$13,311
ARF	\$12,823	\$14,889	\$13,497	\$14,643
Depreciation	\$8,470 /yr	\$7,770 /yr	\$8,180 /yr	\$7,390 /yr
No. of Owners	6	2	4	4
Type of Vehicle	Sedan	Sedan	Sedan	Sedan
Category	COE Car	COE Car	COE Car	COE Car, Low Mile
Availability	Available	Available	Available	Available
Remarks				