ASS. REC. BY: Rasul | REF: CS/CT1200083 86/Rtf3 | 680J

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SMD 4210J

at Workshop m/s ACCORD AUTO

of 1009, BUKIT MERAH LN 3 #01-80

Insured: CT1

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: 65K

IDAC Accident Rport: _____ 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: SMD 4210J Yr Regn: 2018 Aug

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: HYUNDAI ELANTRA AD 1.6 c.c 1591

Colour RED A/C: Insured / Std / NI / NA

Sp.Reading 31592 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHD841CMJU715015

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl : Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 195/65R15

R: _____

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	12/08/2020	D.O.I.	13/08/2020

Survey held at ACCORD AUTO

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

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

Date / Time	Action / Instruction

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Preli. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

Report Format : _____

Lump Sum / I.B.I: ($ _____)

Survey Fee:	
Transportation:	
__S + RS.__SI	
Photos	
Others	
TOTAL	

MOR120068333 / ETHOZ Protect Pte Ltd - Bukit Batok
ENTRY DATE & TIME: 12/08/2020 17:00
SUBMITTED BY: Rakes Anand

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	12/08/2020 17:00
Date Of Accident	12/08/2020 09:00
Exact Location Of Accident	LOYANG AVE > CHANGI VILLAGE (NEAR BUS STOP B13)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD4210J
Insured/Policyholder	
Name Of Registered Owner	NG CHOONG SIONG
NRIC No	SXXXX680J
Email Address	FREDAMYNG@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-92266975
Alternative Phone No	OFFICE-92266975
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	ELANTRA AD 1.6 GLS AT (AMS)
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MTPV01011084
Cover Note Number	18/08/2019-17/08/2020
Driver	
Name of Driver	NG CHOONG SIONG
NRIC No	SXXXX680J
Date Of Birth	06/05/1969
Occupation	INDOOR
Date Of Driving Pass	13/01/1994
Driving Experience	26 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92266975
Fax Number	
Contact Number	OFFICE-92266975
EMail Address	FREDAMYNG@HOTMAIL.COM

Address	BLK 22 BUKIT BATOK ST 52 #11-02
Postcode	659245
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	COLLISION - HEAD TO REAR
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	4
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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?	YES
If Yes,Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	**ROAD**: 1 PASIR RIS DRIVE 4 , **POSTCODE:** 519457 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO**: 1800-5852999 - **FAX NO**: 65855261
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD WITH TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YM5423R
Vehicle Make/Model/Colour	MITSUBISHI
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SAIREE BIN SINWAN
NRIC/Passport Number	SXXXX607F
Contact Number	87557806
Address	
Postcode	
Insurance Company Name	

e Of Damage

Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	FBL2809J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	SHEIKH SULAIMAN BANAFEK
NRIC/Passport Number	SXXXX762I
Contact Number	91449495
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	FBL4111A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	SHEIKH SULAIMAN BANAFEK
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBL2809J
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	MOTORCYCLIST
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBL4111A
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

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 governmental 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.

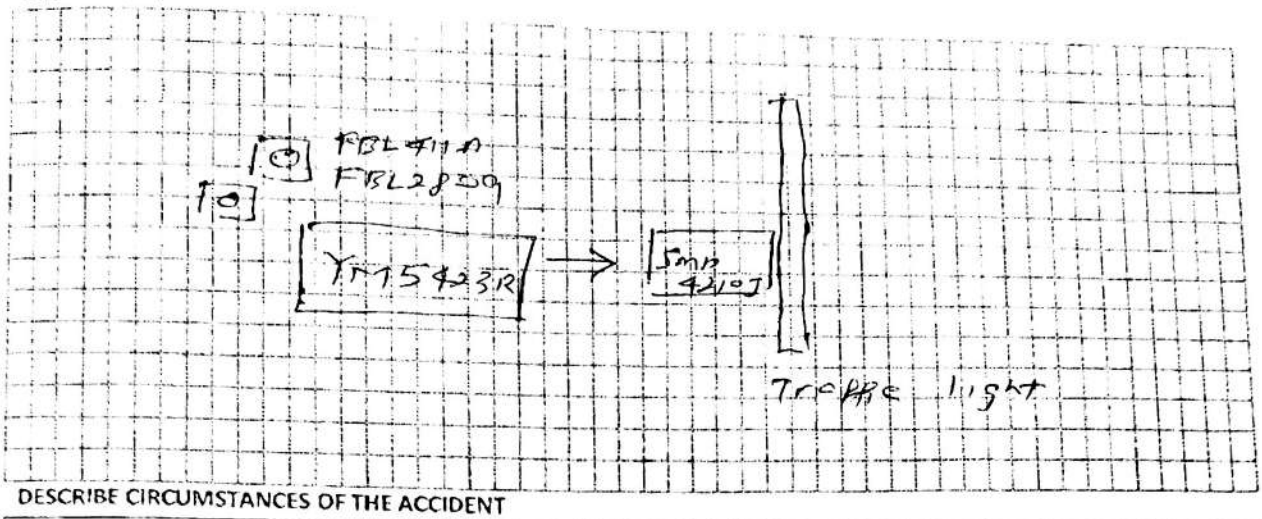
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/8/2020 about 8:58am, I (SMP4210J) was travelling on Loyang Ave near to Bus Stop 13 and Loyang Park Connector toward Changi Village with no passenger on board. I was driving on the furthest right lane. When approaching the traffic junction, I saw the traffic light turned yellow I then slow down and stopped in front of the stop line. Suddenly, I felt a bang behind me. I immediately went down to check. I then noticed that a lorry (YM5423R) hit my rear. I also noticed that there were 2 motorcycle (FBL411A and FBL289J) involved in the accident which were behind the lorry and saw one of the motorcycle were bleeding

Important:		
You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.		- Reporting Only
		- Claim OD
		- Claim TP
	✓	- Claim ~~OD~~ TP at other workshop

DECLARATION

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

Policyholder's signature
Date & Time

Driver's Signature
(if driver not the policyholder)
Date & Time

Reporting Centre Personnel's Signature
Name: Rajeswaran Arun
Nric/Fin No.

SINGAPORE POLICE FORCE

T/20200812/2053

Report No. T/20200812/2053

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
12/08/2020 13:15	G/20200812/0062	43

Informant's Particulars

Name of Informant: NG CHOONG SIONG			Address: 22 BUKIT BATOK STREET 52 #11-02 SINGAPORE 659245	
ID Type / ID No.: NRIC NO / S6915680J			Contact No.: Home/Office: Mobile: 92266975	
Nationality: SINGAPORE CITIZEN			Email: fredamyng@hotmail.com	
Sex: Male	Age: 51	Date of Birth: 06/05/1969	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: MANAGER			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/08/2020 08:55	Type of Location: Straight Road
Location: Along Road 1 LOYANG AVENUE Loyang Ave near to Bus stop B13 and Loyang Park connector towards Changi Village				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBL2809J	Motorcycle					0
FBL4111A	Motorcycle					0
SMD4210J	Car	HYUNDAI	ELANTRA AD 1.6 GLS AT (AMS)	Red	Slightly Damaged	0
YM5423R	Lorry	MITSUBISHI		White		0

SINGAPORE POLICE FORCE

T/20200812/2053

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457
Tel No: 1800-5852999

Report No. T/20200812/2053

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMD4210J	TENET SOMPO INSURANCE PTE. LTD.	D19MTPV01011084	18/08/2019	17/08/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	Sheikh Sulaiman Banafek	ID No.	S7816762I
Related Vehicle	FBL2809J (Motorcycle)	Contact No.	91449495
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	NG CHOONG SIONG	ID No.	S6915680J
Related Vehicle	SMD4210J (Car)	Contact No.	92266975
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Sairee Bin Sinwan	ID No.	S7933607F
Related Vehicle	YM5423R (Lorry)	Contact No.	87557806
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

SINGAPORE POLICE FORCE

T/20200812/2053

Report No. T/20200812/2053

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

CONTINUATION OF REPORT

Brief Details.

On 12/08/2020 at about 8.58am, I (SMD4210J) was travelling on Loyang Ave near to Bus stop B13 and Loyang Park connector towards Changi Village with no passenger on board. I was driving on the furthest right lane. When approaching the traffic junction, I saw the traffic light turned yellow. I then slowed down and stopped in front of the stop line. Suddenly, I felt a bang behind me. I immediately went down to make a checked. I then noticed that a lorry (YM5423R) hit my rear. I also noticed there were 2 motorcycle (FBL4111A and FBL2809J) involved in the accident which were behind the lorry and saw one of the motorcyclist were bleeding. I observed that the lorry driver is not injured however, the 2 motorcyclist were injured. The lorry driver then started to shout at me asking why I stopped. I then went in to my car as I do not want to escalate the matter. After the lorry driver cool down, I then walked around and check on the motorcyclist.

Shortly after, the ambulance came and made a check on 2 motorcyclist. I took some photos of the scene and the vehicles. I exchanged particulars with the lorry driver and the motorcyclist. Traffic police came and interviewed and took down particulars for all parties. Subsequently the motorcyclist from FBL4111A was conveyed by ambulance. Traffic police then took my in car camera SD card, then issued me with an acknowledged slip vide report: G/20200812/0062. Traffic police then left the scene.
The particulars as follow:
The lorry driver: Sairee Bin Sinwan, S7933607F, 87557806.
The motorcycle of FBL2809J: Sheikh Sulaiman Banafek, S7816762I, 91449495
I did not exchanged particulars with the motorcyclist of FBL4111A as he was in the ambulance.

My vehicle suffered damaged on my rear portion were scratched and dented. I wishes to state that I have in car camera pointing installed. I was unsure if there is any CCTV around the vicinity. I am not injured.

SINGAPORE POLICE FORCE

T/20200812/2053

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20200812/2053

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Sgt 2 JOHNNY TAN KOK JOO	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 12/08/2020 13:15
Officer In Charge Of Case: TP / GIT / Sgt 2 DAVID YAP Contact No.: 96192349	Classification Of Case:

Authentication Stamp
NP168

- Syakir
- 65476736
- accident record.

SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No: 6/20200812/0062

I, SSgt Fahan
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of TP Hq
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 One SD Card ~~+64Gb~~ 16GB.
2
3
4
5
6
7
8
9
10

from Ng Choong Siong S6915680J, SMD4210J
(Name, NRIC or Passport No. / Rank and No.)

of
(Address / Police Station / NPC / NPP)

on 12/08/2020 (Date) at 1015hrs (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

(Signature)

Ng Choong Siong S6915680J
(Name, NRIC or Passport No. / Rank and No.)

Received by:

Signature

Fahan
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks:

NP 323 (2/16)

to OneMotoring

e PARF/COE Rebate for Registered Vehicle

icle Owner Particulars

ner ID Type:	Singapore NRIC
wner ID:	680J

ehicle Details

Vehicle No.:	SMD4210J
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Aug 2020
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA AD 1.6 GLS AT (AMS)
Primary Colour:	Red
Manufacturing Year:	2018
Engine No.:	G4FGJU219148
Chassis No.:	KMHD841CMJU715015
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	$10,853.00
Original Registration Date:	18 Aug 2018
First Registration Date:	18 Aug 2018
Transfer Count:	0
Actual ARF Paid:	$10,853.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Aug 2028
PARF Rebate Amount:	$8,139.00

Intended COE Rebate Details

COE Expiry Date:	17 Aug 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	$33,798.00
COE Rebate Amount:	$27,074.00
Total Rebate Amount:	**$35,213.00**

The information contained herein is correct as at 13 Aug 2020

OK

Merimen e-Claims

Used 2018 Hyundai Elantra 1.6A

art.com/used_cars/info.php?ID=917110&DL=2305

Hyundai Elantra 1.6A GLS S

Overview | Financial | Accessories | Similar | Research | Photos

Price	**$65,800**		
Depreciation	$7,420 /yr View models with similar depre	**Reg Date**	21-Aug-2018 (8yrs 7days COE left)
Mileage	38,000 km (19.2k /yr)	**Manufactured**	2018
Road Tax	$738 /yr	**Transmission**	Auto
Dereg Value	$36,163 as of today (change)	**OMV**	$12,477
COE	$33,404	**ARF**	$12,477
Engine Cap	1,591 cc	**Power**	93.8 kW (125 bhp)
Curb Weight	1,345 kg	**No. of Owners**	1
Type of Vehicle	Mid-Sized Sedan		

Features

1.6L 4 Cylinder 16 Valve DOHC Dual CVVT Engine, 125Bhp, 6 Speed Auto Transmission, ABS, SRS, Multi Function Steering, Front/Rear Disc Brakes. View specs of the Hyundai Elantra (2016-2018)

Accessories

Leather Seat, 17 Inch Sports Rims, Factory Fitted Audio System With USB/AUX Port, Rear Aircon, Reverse Camera, Solar Film, Traction Control.

D