

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/11120008642/USF3

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SLL 44432
at Workshop m/s Singhai
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: 558
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

LTA 36767
Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Date / Time Action / Instruction

Veh No: SLL 44432 Yr Regn: 217
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or CA /
Make: citroen C4 c.c 1560
Colour Grey A/C: Insured / Std / NI / NA
Sp. Reading 148780 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: VF73DBH2TGJ 81380
Gen. 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: _____ R: 215/60R16
BS / DUN / EXNOVA / GY / FS / LIZA / MD / OHTSU / PIR / SUMI /
TOYO / YOKO or
Front 6 Rear 6
R/Bal. _____ mm R/Bal. _____ mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. 15/8/20 D.O.I. 19/8/20
Survey held at _____
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
N/S det.
The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)

____ S + RS ____ SI

☐ : Interview (\$ _____)

Photos

☐ : Tech. Invs (\$ _____)

Others

☐ : Weekend (\$ _____)

)

Report Format :

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

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	15/08/2020 10:07
Date Of Accident	15/08/2020 01:30
Exact Location Of Accident	11 JALAN CHULEK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL4443Z
Insured/Policyholder	
Name Of Registered Owner	KWEK CHIU LIN
NRIC No	SXXXX077D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90668770
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	CITROEN
Model	C4-1.6 PICASSO (A)
Exact Purpose for which vehicle was being used at time of accident	PARKED AND STATIONARY
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5116186376
Cover Note Number	
Driver	
Name of Driver	KWEK CHIU LIN
NRIC No	SXXXX077D
Date Of Birth	16/11/1960
Occupation	INDOOR
Date Of Driving Pass	17/07/1978
Driving Experience	42 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90668770
Fax Number	
Contact Number	OFFICE-NOPHONE
Email Address	NOEMAIL

Address 11 JALAN CHULEK
Postcode 557454
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 -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLIDED INTO PARKED VEHICLE
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? NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
Number of Passengers (Including Driver) 0

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

REFER TO SKETCH PLAN

Attachment(s)

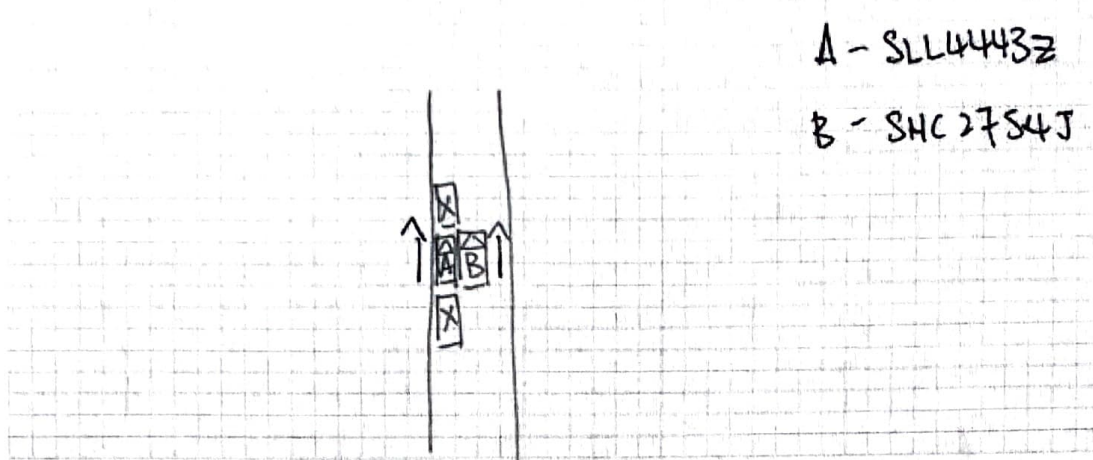
Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC2754J
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category TAXI
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 15/8/2020 at around 1:30^{pm} to 6am @ 11 Jalan dwilek
 S' 557454, My vehicle was parked and stationary and
 discovered it was damaged and there was a note left.
 So we decided to report the accident.

DECLARATION

I/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.:



Sketch Plan

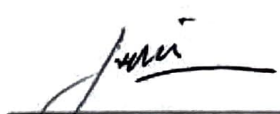
SKETCH PLAN

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 wilful misrepresentation or withholding of material facts may allow insurance companies to regulate 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)

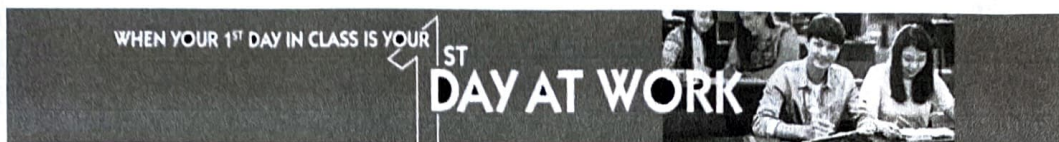
I understand, acknowledge, agree and consent that:

- (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 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.


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.:



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Sell it yourself! Advertise it at just
\$58 until it's SOLD!

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2010, Mini Cooper S Cabriolet, \$68000.



Fresh Coat And Recent Major Servicing, Low Mileage And Good Condition.
Direct Owner StarAd







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4 vehicles

Citroen C4

Advanced Search

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Citroen C4	Any	Any	2017	Any	Any	Any	Available
	Citroen C4 Picasso Diesel 1.6A BlueHDI	\$59,800	\$8,380 /yr	22-Mar-2017	1,560 cc	74,000 km	MPV	Available
Fuel Type: Diesel (Euro 5 Engine and Above) 1 Year Warranty Provided From Reputable Workshop! High Loan Provided! Our Vehicle Inspected By Professional Team For Highest Quality! Owning A Car Is So Much Easier With Us! View To Believe! Call Our Friendly Sales Representative. Car Empire Automobiles Pte Ltd Posted: 17-Aug-2020 Tags: 2017 Citroen C4, Citroen C4, Citroen, C4								
	Citroen Grand C4 Picasso Diesel 1.6A BlueHDI	\$67,555	\$8,660 /yr	18-Aug-2017	1,560 cc	98,000 km	MPV	Available
Fuel Type: Diesel (Euro 5 Engine and Above) 1 Owner! Full Servicing Records With C&C, 5 Years C&C Warranty, 7 Seaters MPV With Full Luxurious Specs And Panoramic View Glass Roof, In Pristine Conditions, 100% In House And Bank Loan Available. Trade In Welcome. SMS/WhatsApp/Call For Appointment And Vie... Posted: 31-Jul-2020 Tags: 2017 Citroen Grand, Citroen Grand, Citroen, Grand								
	Citroen C4 1.2A PureTech	\$51,000	\$6,710 /yr	02-Aug-2017	1,199 cc	60,000 km	SUV	Available
1 Owner AD Unit, Warranty And Servicing Still Available, Car Always Park Under Shelter, Owner Reluctant Sale Due To WFH Until Next Year, Only Use To Drive From Home To Work, Low Interest High Loan Available, Viewing Strictly By Appointment Only. Posted: 30-Jul-2020 Tags: 2017 Citroen C4, Citroen C4, Citroen, C4								
	Citroen Grand C4 Picasso Diesel 1.6A BlueHDI	\$69,888	\$8,550 /yr	13-Dec-2017	1,560 cc	125,000 km	MPV	Available
Fuel Type: Diesel (Euro 5 Engine and Above) 1 Owner! Fully Serviced And Maintained By The Authorised Distributor C&C France! Well Maintained By Owner Since Day 1. Roomy Interior And Spacious Legroom! A Deal Not To Be Missed! All Original! 100% Accident Free! Grab It Before It's Gone! Trade-In Welcome... Posted: 21-Jul-2020 Tags: 2017 Citroen Grand, Citroen Grand, Citroen, Grand								

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	077D
Vehicle Details	
Vehicle No.:	SLL4443Z
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Aug 2020
Vehicle Make:	CITROEN
Vehicle Model:	C4 PICASSO 1.6 BLUEHDI EAT6
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No.:	10JBHD3065235
Chassis No.:	VF73DBHZTGJ813080
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$21,387.00
Original Registration Date:	27 Feb 2017
First Registration Date:	27 Feb 2017
Transfer Count:	0
Actual ARF Paid:	\$6,942.00 3471
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 Feb 2027
PARF Rebate Amount:	\$5,206.00
Intended COE Rebate Details	
COE Expiry Date:	26 Feb 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$48,401.00
COE Rebate Amount:	\$31,561.00
Total Rebate Amount:	\$36,767.00

The information contained herein is correct as at 19 Aug 2020

OK