ASS. REC. BY: Tome REF: CS CT1 2000	9401 Rights 1 8878
	GNMENT
	Veh No: SKV SISYK Yr Regn: 2015 / Stf Type: (A.Cet / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: SKU SISY K	Make: NISAN SYLPHY (16CV) c.c 1598
at Workshop m/s MoVA	Colour GREY A/C: Insured / Std / NI / NA
of 1008, BUKIT MEROTH LN 3 HOI-OY	Sp.Reading 76862 T/Radio; Insured / Std / NI / NA
Insured: CTI	Eng/No:
Policy No.	CNO: MUT BBAB (720024544.
Claims No.	Gen, Cond; Good / Fall / Poor / Burnt
Sum Insured: Excess:	Steering: In order / Jainmed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / 8/Rim / STD A/Rim or
mino of Total	
	CALL CONTROL OF THE C
(Policy Condition) Remark: The veh had commenced its N/S O/S	R: RSIDUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/
Remark: The veh had commenced its repair at the time of inspection.	
	TOYO / YOKO or
Bal. or Market Value:	Front
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm U/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 01/09/200 D.O.I. 04/09/2000
Lum Sum: % · 3 Val.: Yes or No	Survey held at MoM (BA)
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
	Ε
	·
L/S \$5350.00 REPAIR 8 DAYS (RED: \$	33323.13, 38%)
Dale/Time, File Pass to? : Prell. Report	Days Of Repair: 8
: Final Report	Resurvey No. of Trip: 2 Survey Fee:
Date/Time, File Return to?	Transportation:
2) 01/10/20 TYPIST Add F	ee: : Site Insp (\$) _s+Rssi
	: Interview (\$)) Photos
Repid Former:	: Tech. Invs (\$) Others
Lennin Sinn / L.B.A: (\$ \$5350.00)	: Weel and (\$
Letter center is a posso.or	
•	TOTAL



Main Office:

Mova Building No. 22, Jalan Klarig, Singapore 159419 Tel. (65) 6476 3333 Fax. (65) 6271 5891 www.mova.com.sg

Workshop Dept:

Block 1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Estimate

02/09/2020

CHINA TAIPING INSURANCE (S) PTE LTD

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909.

Attention :- XA017

ma 17

Wo

SUL Polic Clair Sur (C Mak

> (F Rei

> > ID GI E:

> > > CA I REV I REP. I 24 HRS

Veh#

:- 1

:- SKV5154K

Veh Model :- NISSAN SYLPHY 1.6

Estimate# :- CK420953

Claim #

Page #

:- TP/CK138891

OS KEAR

ACC. Date :- 01/09/20

Terms

:- C.O.D Days

Remarks :- MFG 22 SEP 205 (205)

No.	Description		Qty	U.Price	Amounts S
	NET ITEMS ;	***************************************		***************************************	***************
1.	BOOTLID bt	39	1 PC	1,263.00	1,263.0
2.	BOOTLID LOGO No.		1 PC	59.70	59.7
3.	BOOTLID EMBLEM - SYLPHY MA	9	1 PC	89.00	89.0
4.	BOOTLID EMBLEM - PURE DRIVE (LIGHT BLUE) *		1 PC	83.00	83.0
5.	BOOTLID CHROME MOULDING TOP \$		1 PC	185.00	185.0
6.	BOOTLID CHROME MOULDING BOTTOM .			158.00	158.00
7.	BOOTLID LAMP LH X	1		155.00	155.00
8.	BOOTLID HINGE LH X		PC	69.00	69.00
9.	BOOTLID HINGE,RH ⊀			69.00	69.00
10.	BOOTLID LOCK 51			78.00	78.00
11.	BOOTLID RUBBER M	i		89.00	89.00
12.	TAILLAMP LH SCA	1			379.00
	TAILLAMP PANEL LH			379.00	240.00
13.	TAILLAMP CLIPS ALL	1		240.00	16.00
14.	DEAD BUMDED A	2		8.00	690.00
15.	REAR BUMPER REFLECTOR LH MUS	1		690.00	
16.	REAR BUMPER REFLECTOR RH 🗡	1		65.00	65.00
17.	[12]	1		65.00	65.00
18.	REAR BUMPER CLIPS *** REAR BUMPER SIDE RETAINER LH ***	10		5.00	50.00
19.	REAR BUMPER SIDE RETAINER EH	1		36.00	36.00
20.	REAR BUMPER SPONGE CTR X	1		36.00	36.00
21.	REAR BUMPER SPONGE CTR X	1		45.00	45.00
22.	REAR BUMPER SPONGE RH 🗡	1		85.00	85.00
23.	REAR BUMPER IMPACT DAMPER LH (METAL)	1		85.00	85.00
24.	END PANEL TOP GARNISH &	1		55.00	55.00
25.	END PANEL 10P GARNISH 62 P	1		98.00	98.00
26.	REAR FENDER INNER TRIM LH	1		468.00	468.00
27. 28.	REAR FENDER INNER TRIM RH # AL /	1		471.00	471.00
29.	SPARE TYRE TOP BOARD X	1	3/4/2007	471.00	471.00
30.	SPARE TYRE SPONGE & de /	1	1000000	411.00	411.00
31.	FLOOR PANEL - REPAIR	1		162.00	162.00
32.	REAR FENDER LH - REPAIR	1			
33.	REAR FENDER RH - REPAIR	1			
(1770)		1	PC		
	NET TOTAL S\$ REChassis Lu-Repair				6,225.70
	10% DISCOUNT S\$				-622.57
					5,603.13
1.	SPECIAL NET ITEMS: REAR NUMBER PLATE \$ 500	82			۲
2.	REVERSE SENSOR and	1	PC PC	40.00 2 280.00 2	280.00
	SPECIAL NET TOTAL S\$				320.00
	LABOUR :				
	TO INSPECT REAR LIGHTING MECHANISM			3	30 50.00
	TO INSTALL REVERSE SENSOR & DIAGNOSE FUNCTION				30 5000 60 8000
	TO TRANSFER REVERSE CAMERA & RESETTING				2000

MARIAN IN LOUT



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Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Estimate

02/09/2020

CHINA TAIPING INSURANCE (S) PTE LTD 3 Anson Road #16-00 Springleaf Tower

Singapore 079909.

Attention :- XA017

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Rei

ID

E

Veh# SKV5154K

NISSAN SYLPHY 1.6 Veh Model :-

CK420953 Estimate# :-

Claim #

Page #

ACC. Date :-01/09/20

C.O.D Days Terms

Remarks

Description No.

Qty

138891

U.Price Amounts S\$

TO CUT OFF END PANEL, TO REPAIR ON REAR FENDER LH & RH & SPARE TYRE PANEL. TO REPLACE DAMAGED ITEMS. REALIGN CONNECTION

TO REMOVE & REFIT REAR COMPARTMENT FITTING

TO APPLY BODY JOINT SEALANT ON REPAIRED AREAS

TO RUST PROOF ON REPAIRED AREAS

TO SPRAY PAINT IN REPAIRED AREAS

LABOUR TOTAL S\$

(000 1,200.00

2,750.00

E. & O.E

Jacelyn

NON-TAX AMOUNT S

AMOUNT S\$

8,673.13

GST @ 7 %

607.12

AMOUNT DUE S\$

9,280.25

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD

LKK Auto Consultants hence notify

- the Repairer of the following: To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Ho 900100 68

8 days 4/5 04/09/2000 Dog30 Rosury after regain

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.

KAGGIDENT STATEMENT

01/09/2020 17:21 Date Of Report 01/09/2020 16:00 Date Of Accident

CTE ON THE WAY TO ORCHARD RD NEAR MOULMEIN **Exact Location Of Accident**

SINGAPORE Country/State of Loss

#DETAILS OF OWN VEHICLE#

SKV5154K Vehicle Registration Number

Insured/Policyholder

THAM LAI KUEN Name Of Registered Owner SXXXX887B NRIC No

Email Address THAMLAIKUEN@GMAIL.COM

Mobile Phone No (LOCAL) +65-98556742 Alternative Phone No OTHERS-NOPHONE

Vehicle Particulars

Manufacturer NISSAN

SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR Model

Exact Purpose for which vehicle was being used at

time of accident

m:

limati

DITE

o Insp

t Work

of I

Insured

Policy

Claims Sum I

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Rem:

Bal.

GIA

Est Lun Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

PRIVATE CAR Vehicle Category

Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company

FEMALE

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

Policy Number 5073831209

Cover Note Number

Gender

Name of Driver THAM LAI KUEN

NRIC No SXXXX887B Date Of Birth 27/10/1963 Occupation INDOOR

Date Of Driving Pass 03/10/1989

Driving Experience 30 YEARS AND 10 MONTHS

> Mobile Number (LOCAL) +65-98556742

> Fax Number

Contact Number OTHERS-NOPHONE

IDAC **EMail Address** THAMLAIKUEN@GMAIL.COM

8 RIVER VALLEY GROVE Address #12-02 238406 Postcode 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 CHAIN COLLISION Type Of Accident CLEAR Weather Conditions DRY Road Surface Other Information Was any foreign vehicle involved in this accident? NO Number of vehicles (including own vehicle) 3 involved in the accident NO Was any body injured in the Accident? Was any injured conveyed to hospital by NO ambulance? Was any other material or property damaged? YES I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. Number of Passengers (Including Driver) 1 **Details of Police Action** NO Was the accident reported to the police? If Yes, Please state which Police Station NO Was notice of intended Prosecution given? If Yes, against whom? Circumstances of Accident Attachment(s) YES Are accident photos available for attachment? YES Was there any video captured by Car Camera? SUBMITTED VIDEO FOOTAGE TO INSURANCE DIRECTLY Remarks/ Reasons: Was there any audio recorded? NO DETAILS OF OTHER VEHICLE PROPERTY:1:1 Vehicle Registration Number SLF3889J

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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GIA

Est.

=: DETAILS OF OTHER VEHICLE PROPERTY 2:3

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

GBE4306S

COMMERCIAL VEHICLE SWA PENG CHAI SXXXX150A 93689988

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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)
 - 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:
 - 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.

Huis Culture Policyholder's Signature

Date & Time: 1 Sept 2020

1735hr

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Contre Versonnel's Signature

Name:

NRIC/FIN No .:

GIARMC SketchPlanform_V3

SKETCH PLAN	-> towards Orchard Rd					
+++++++++	TITITITITITITITITITITITITITITITITITITI					
}						
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	SLF3889 SKV554K - traffic jam					
	GBE 4306-7					
	12-06-4506C					
DESCRIBE CIRCUMSTANCES OF THE	ACCIDENT					
LICENSE PLATE: SKV5154K	ACCIDENT DATE & TIME: 1 SEPT 2020 / 4 P.M.					
CONTACT NUMBER: 9855674						
	AY TO ORCHARD RD) NEAR MOULMEIN					
There was a tra	ffic jam on the centre lane of CTE. My					
car was stational	ry. Then, I heard a scieech, my car					
ierked forward.	I saw the Mercedes, SLF 3889 J					
behind my car.	The lorry, GBE 4306S, was on the					
side.	rar was stationary. Then, I heard a screech, my car jerked forward. I saw the Mercedes, SLF 3889 J behind my car. The lorry, GBE 43065, was on the					
PICK :						
NOTE: PLEASE NOTE THAT YO	OUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN					
OWN DAMAGE CLAIM UNDER YO	OUR OWN POLICY, PLEASE CHECK YOUR POLICY FOR MORE INFORMATION					
Please state:						
() Claim Own Policy (/) C	laim Third Party () Claim OD/TP at other workshop () Reporting Only					
DECLARATION I/We declare the foregoing particulars ar	atria la aveni recent					
. ()	e true in every respect.					
thaintailtean	111					
Policyholder's Signature	Driver's Signature Reporting Centre Personnel's Signature					
	Name:					
GIARMS SHELLPRING OVER V3	Date & Time: NRIC/FIN No.:					

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type: Owner ID:	Singapore NRIC
rate of a finish as the resistance of the second of the se	
Vehicle No.:	EURERANIA SKV5154K
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Sep 2020
Vehicle Make:	NISSAN
Vehicle Model:	SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR
Primary Colour:	
Manufacturing Year:	Grey 2015
Engine No.:	
Chassis No.:	HR 16972782B
Maximum Power Output:	MNTBBAB17Z0024544
Open Market Value:	85.0 kW (113 bhp) \$16.439.00
Original Registration Date:	\$16,439.00 22 Sep 2015
First Registration Date:	22 Sep 2015 22 Sep 2015
Transfer Count:	22 Sep 2015
Actual ARF Paid:	\$16,439,00
ettivationis en eta	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	21 Sep 2025
PARF Rebate Amount:	\$12,329.00
	farmus strongales samuserapus etipus enepus industria enungas proportiones proportiones en superioris de la compositione de la
COE Expiry Date:	21 Sep 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period (Years):	10
QP Paid: COE Rebate Amount:	\$57,089.00
	\$28,766.00
Total Rebate Amount:	\$41,095.00 Sep 2020

OK

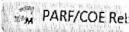




Merimen e-Claims



Used 2015 Nissan Sylphy 1.6A fo X



carmart.com/used_cars/info.php?ID=917485&DL=2077

Nissan Sylphy 1.6A



Financial

Accessories

Similar

Research

Photos

Map













Price

\$52,800

Depreciation (?)

\$8,660 /yr

View models with similar depre

Reg Date

31-Oct-2015

(5yrs 1mth 23days COE left)

Mileage

62,425 km (12.9k /yr)

Manufactured (3)

2015

Road Tax (1)

\$742 /yr

Transmission

Auto

Dereg Value

\$41,827 as of today (change)

OMV

\$16,439

COE

\$57,301

ARF

\$16,439

Engine Cap

1,598 cc

Power

85.0 kW (113 bhp)

Curb Weight

1,205 kg

No. of Owners

Type of Vehicle

Mid-Sized Sedan

Features

Powerful 1.6L 4 Cylinder Inline DOHC Engine Producing 113 Bhp Coupled With An Advanced X-Tronic CVT Auto Transmission. View specs of the Nissan Sylphy (2013-2016)















