

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/SMD20010416/U43

### ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

SKF 6270K

at Workshop m/s

Teen work

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:

33K.

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

Vehicle: IN / OUT

Date:

Person Contacted:

Date / Time

Action / Instruction

Dep 12K.

Sol 1 yrs. Smithplus 27A 29908  
net 3092

Veh No:

SKF6270K

Yr Regn:

2/6/12

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

Truck / Trailer or

CA/

Make:

Honda stream

c.c

1799

Colour

Black

A/C: Insured / Std / NI / NA

Sp. Reading

132551

T/Radio: Insured / Std / NI / NA

Eng/No:

JHMRN6860CC200051

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195/65-215

R:

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

TOYO / YOKO or

Front

6

Rear

6

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

25/9/20

D.O.I.

29/9/20

Survey held at

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

Rear

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	28/09/2020 12:11
Date Of Accident	25/09/2020 19:35
Exact Location Of Accident	PIE TWDS BKE BEFORE DAIRY FARM
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF6270K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NIE MIN
NRIC No	SXXXX526C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96911666
Alternative Phone No	OTHERS-96911666

### Vehicle Particulars

Manufacturer	HONDA
Model	STREAM 1.8L AT
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	NIE MIN
NRIC No	SXXXX526C
Date Of Birth	18/03/1979
Occupation	INDOOR
Date Of Driving Pass	26/03/2012
Driving Experience	8 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	+65-96911666
Fax Number	
Contact Number	OTHERS-96911666
Email Address	NOEMAIL

Address	2E HONG SAN WALK #05-08 SINGAPORE 689051
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

Type Of Accident	CHAIN COLLISION
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?	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)	2
Passenger 1	NAME: : LIU TENG FEI
	GENDER: : MALE

#### 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	GBD4401E
Vehicle Make/Model/Colour	TOYOTA / DYNA 3.0 M
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YQ1170A
Vehicle Make/Model/Colour	MITSUBISHI / CANTER FEB21ER4SDEN
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan


### SKETCH PLAN


#### IMPORTANT NOTICE


- 1) Please report correctly on the details of the accident to speed up the claims process.
- 2) This form must be completed by the policy holder 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 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 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.
- 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 the [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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as 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) Investigations 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, statement, 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' lawyer/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 insurer and/or GIA to their third party service providers or agents (including their lawyer/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, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) For complying with requirements under my regulations, laws or court orders.

  
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

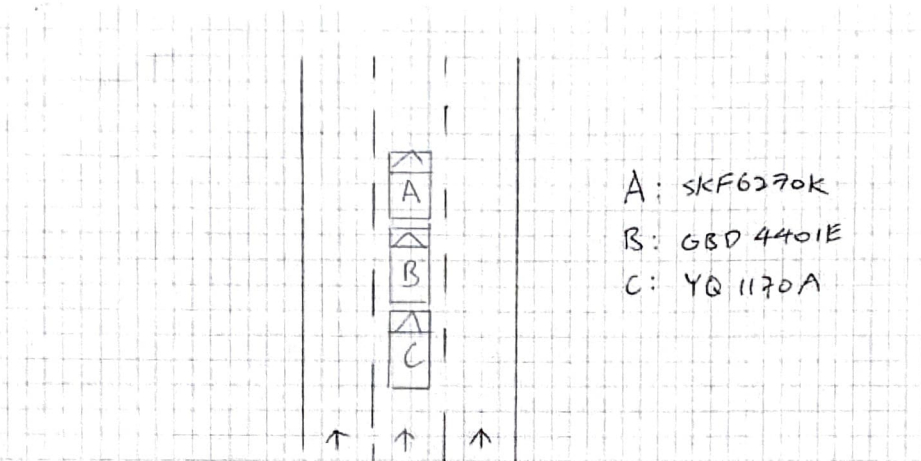
  
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: J. L. N.  
NRIC/FIN No.:



# Accident Sketch Plan

## SKETCH PLAN




## CRIBE CIRCUMSTANCES OF THE ACCIDENT


I was travelling along PIE towards BKE before Dairy farm exit on the middle lane. While my car was stationary waiting to move off, I look at my rear mirror and saw that vehicle B was already stationary as well. All of a sudden, I felt an huge impact from my vehicle rear portion. After I came down from my car I then realise that vehicle C collided onto vehicle B and the impact caused vehicle B to swerve in front and collided onto me.


\*\*\*\*\*for company vehicle only\*\*\*\*\*  
I \_\_\_\_\_ is the \_\_\_\_\_ of company \_\_\_\_\_ and im using the vehicle \_\_\_\_\_ for work /private purpose .

## 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: Buhaimi  
NRIC/FIN No.:

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1 vehicles

Honda Stream

Advanced Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
<b>Search Selection</b>	<b>Honda Stream</b>	Any	Any	2014	Any	Any	Any	Available	
			<i>Dep per yrs.</i>						
	<b>Honda Stream 1.8A RSZ Sunroof</b>		<b>\$51,800</b>	<b>\$12,940 /yr</b>	16-Jan-2014	1,799 cc	66,072 km	MPV	<b>Available</b>
New Arrival, 1 And Only Parf Honda Stream RSZ In The Market Low Mileage 66072Km Done With Agent Service Since Day 1. Paper 44K + Body 4.5K Around 49K Asking 51.8K! Guaranteed Accident Free. Come With 12 Months Warranty. Free With No Repairs Needed! Road Ta...									
Posted: 25-Sep-2020 Tags: 2014 Honda Stream, Honda Stream, Honda, Stream									

Save this search criteria, to get email alerts whenever a match is found.

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
For old advertisements, view <b>Expired ads</b>									

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## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	526C
<b>Vehicle Details</b>	
Vehicle No.:	SKF6270K
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Sep 2020
Vehicle Make:	HONDA
Vehicle Model:	STREAM 1.8L AT
Primary Colour:	Blue
Manufacturing Year:	2011
Engine No.:	R18A13880051
Chassis No.:	JHMRN6860CC200051
Maximum Power Output:	103.0 kW (138 bhp)
Open Market Value:	\$27,696.00
Original Registration Date:	21 Jun 2012
First Registration Date:	21 Jun 2012
Transfer Count:	1
Actual ARF Paid:	\$27,696.00 13848
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Jun 2022
PARF Rebate Amount:	\$15,232.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	20 Jun 2022
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$86,889.00
COE Rebate Amount:	\$14,676.00
Total Rebate Amount:	\$29,908.00

The information contained herein is correct as at 29 Sep 2020

OK