

PLEASE ARRANGE TO SURVEY
VEHICLE AT 22 TAMPINES ST 92 (S
528876)

Jimmy Goh KI
CLAIM DEPARTMENT
DID : 66547618
FAX :

Date : 02/10/2020

To : **CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.**
ESTIMATION

Attn : **Motor Claim Department**

FAX :

Owner : YAP HOE KIAT

: AXA INSURANCE PTE LTD

Certificate No : GA519339/1

Accident Date : 01/10/2020

Vehicle No : SKQ-6497-R

Make & Model : TOYOTA PREVIA 2.4 (A) 7 SEATER

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
<u>List Item</u>			
1	REAR BUMPER	654.20	
1	REAR BUMPER BRACKET (LH)	118.90	
1	REAR BUMPER SIDE RETAINER LH (1)	108.80	
1	REAR BUMPER SIDE RETAINER LH (2)	86.70	
1	REAR BUMPER SPONGE	93.40	
1	REAR BUMPER REFLECTOR LH	92.80	
1	REAR BUMPER TOW COVER LH	80.90	
10	REAR BUMPER CLIPS	45.00	
1	TAILGATE	1,436.20	

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Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
1	TAILGATE WEATHERSTRIPE	419.30	
1	TAILGATE LOCK	435.20	
1	TAILGATE LOGO	74.40	
1	TAILGATE EMBLEM "TOYOTA"	73.60	
1	TAILGATE EMBLEM "PRVIA"	72.90	
1	TAILGATE EMBLEM "GL"	69.40	
1	REAR FENDER (LH)	RESTORE	
	Sub Total	3861.70	
	Discount 25% On Parts	(965.43)	
	<u>Special Nett Item</u>		

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Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
1	REAR WINDSCREEN SEALANT	60.00	
1	REVERSE SENSOR	200.00	
	Sub Total	260.00	
Labour & Misc			
	LABOUR TO FACILITATE REPAIR	700.00	
	TO DETACH & RENEW REVERSE SENSOR	40.00	
	TO REMOVE & INSTALL REAR WINDSCREEN GLASS	140.00	
	TO REMOVE & INSTALL ALL TAILGATE FITTING	100.00	
	TO APPLY ANTI RUST COATING ON AFFECTED AREAS	60.00	

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ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
	TO CHECK AND RECONNECT ALL NECESSARY WIRINGS	30.00	
	TO SPRAY PAINT ON AFFECTED AREAS	800.00	
	Sub Total	1870.00	

5,026.28

Remarks:

SUB TOTAL

GST 7.0 % 351.84

TOTAL 5,378.11

Surveyor's name: _____

Principal's name: YAP HOE KIAT

Survey Date & Time: _____

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	01/10/2020 16:17
Date Of Accident	01/10/2020 11:50
Exact Location Of Accident	ALONG THOMSON RD BEFORE 510 THOMSON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKQ6497R
Insured/Policyholder	
Name Of Registered Owner	YAP HOE KIAT
NRIC No	SXXXX673Z
Email Address	AYAP1969@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97219188
Alternative Phone No	OFFICE-97219188

Vehicle Particulars

Manufacturer	TOYOTA
Model	PREVIA 7 SEATER CVT
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA519339/1
Cover Note Number	16/12/2019-15/12/2020

Driver

Name of Driver	YAP HOE KIAT
NRIC No	SXXXX673Z
Date Of Birth	06/12/1969
Occupation	INDOOR
Date Of Driving Pass	03/08/1990
Driving Experience	30 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97219188
Fax Number	
Contact Number	OFFICE-97219188

Address	BLK 24 BEDOK NORTH DRIVE #15-30 SINGAPORE 465498
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	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	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?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : NG CHO HENG 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?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJP3179X
Vehicle Make/Model/Colour	KIA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	XIE HAI YAN
NRIC/Passport Number	SXXXX279D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

SKETCH PLAN

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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.



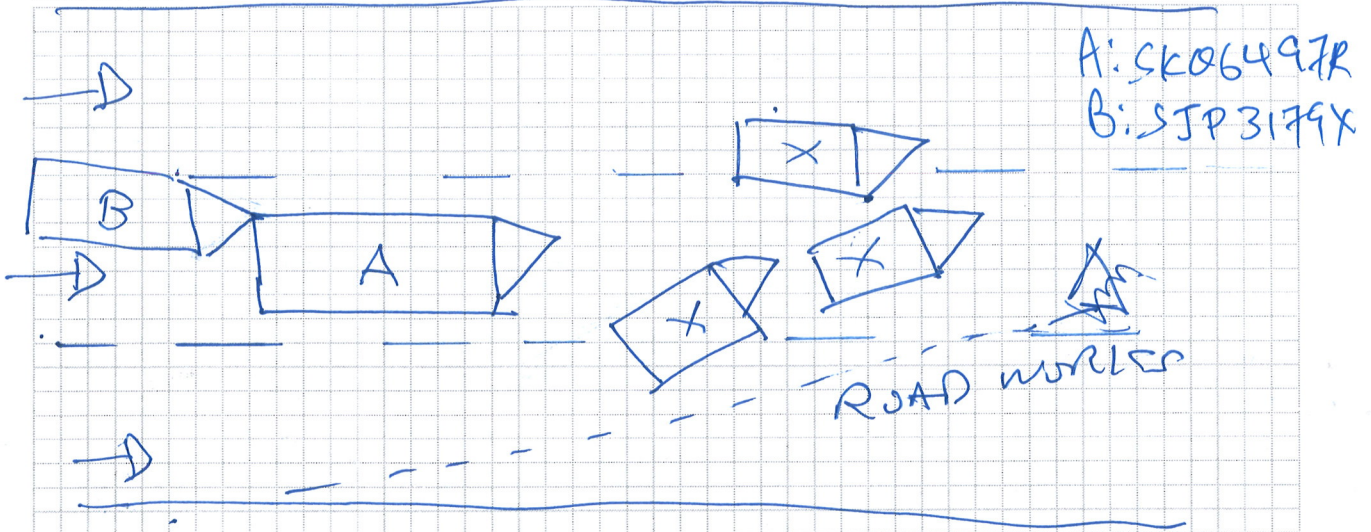
Policyholder's Signature
Date & Time:

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



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving my car (SK06497R) along Thomson Road at around 11:50am. Made a brake due to congestion in front. There was a road work. Subsequently vehicle STP3179X smash into the back of my vehicle on the left back. We stopped vehicle to exchange particulars. My wife and I may seek medical consultation as we having ~~some~~ backaches.

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Reporting Only
Claim OD
<input checked="" type="checkbox"/> Claim TP
<input type="checkbox"/> 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 is not the policyholder)
Date & Time:

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

15 OCT 2020 4:44pm

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6941673Z



Name

YAP HOE KIAT
(YE HAOJIE)

葉浩結

Race

CHINESE

Date of birth

06-12-1969

Country/Place of birth

SINGAPORE

Sex

M

S6941673Z

FOR ACCIDENT CLAIM
USE ONLY

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S6941673Z
Name:

YAP HOE KIAT
(YE HAOJIE)

Birth Date: 06 Dec 1969

Issue Date: 04 Jul 2003



000626545E



5565931

NRIC No. S6941673Z

Date of issue

24-02-2016

Press

1 BEDOK NORTH DRIVE
5-30
SINGAPORE 465498

FOR ACCIDENT CLAIM
USE ONLY

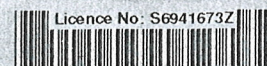
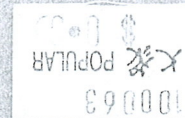
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3

Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

03 Aug 1990



Licence No: S6941673Z

NP 428A

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

673Z

Vehicle Details

Vehicle No.:

SKQ6497R

Vehicle to be Exported:

Yes

Intended Deregistration Date:

07 Oct 2020

Vehicle Make:

TOYOTA

Vehicle Model:

PREVIA 7 SEATER CVT

Primary Colour:

Grey

Manufacturing Year:

2014

Engine No.:

2AZJ125070

Chassis No.:

JTEGD54M90A047028

Maximum Power Output:

125.0 kW (167 bhp)

Open Market Value:

\$37,090.00

Original Registration Date:

16 Dec 2014

First Registration Date:

16 Dec 2014

Transfer Count:

0

Actual ARF Paid:

\$43,926.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

15 Dec 2024

PARF Rebate Amount:

\$30,748.00

Intended COE Rebate Details

COE Expiry Date:

15 Dec 2024

COE Category:

B - Car above 1600cc or 97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$74,389.00

COE Rebate Amount:

\$31,155.00

Total Rebate Amount:

\$61,903.00

The information contained herein is correct as at 01 Oct 2020

OK