

ASS. REC. BY:

REF:

CS/CT120010971/RIVd3

643H

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SCJ 1928Dat Workshop m/s KAH MOTORof 225, ALGERIA LNInsured: CTI

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: 41K

IDAC Accident Report: _____ 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SCJ 1928D Yr Regn: 2014 / NOV

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

Truck / Trailer or

Make: HONDA CITY 1.5 SV CVT c.c. 1497Colour: MAROON A/C: Insured / Std / NI / NASp. Reading: 078574 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MRHGM6660EP000125

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: 185/55R16

R: _____

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

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 08/10/2020 D.O.I. 19/10/2020Survey held at KAH MOTOR

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

2nd O/S

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

Date / Time Action / Instruction

Repair limit 11K

Date/Time, File Pass to?

☐

: Prel. Report

☐

: Final Report

Date/Time, File Return to?

2) 3/11/20-Typist

Days Of Repair: 5Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)Rep. Format: MerimenLump Sum / I.E.H. (\$ 3946.54)



QUOTATION

KAH MOTOR CO. SDN. BHD.

(A Member of the Oriental Holdings Berhad)

Service and Body Repair

Tel: +65 6841 3838

Website: www.honda.com.sg

For 24-hours Roadside Assistance, Call 98203838

GST Reg No.: M200050223
Company Ref. No.: S60FC1380G

Customer	: CHINA TAIPING INSURANCE (S'PORE) PTE	Document No.	: SQT20003273	Page	1
	3 ANSON ROAD #16-00	Date	: 9. Oct 2020		
	SPRINGLEAF TOWER	Customer No.	: WZC008		
	SINGAPORE 079909	Svc Advisor	: IVAN TEO BOON KIAT		
Registration No	: SCJ1928D	Engine No	: L15Z11414235		
Chassis No	: MRHGM6660EP000125	Date Time	: 9. Oct 2020 3:29:51 PM		
Model	: CITY 1.5SV CVT 2014 (EURO 4)	Surveyor Name	:		
Owner's Name	: TEY MUI LEE @ TAY MUI LEE	Survey Date	:		
Ins Policy No.	:	Authorisation Date	:		
Date of Accident	: 8/10/2020				

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
	TP DIRECT SETTLEMENT (J/NO:)						
	OWNER: TAY MUI LEE						
	OWNER INSURER: TOKIO MARINE						
	ACC DATE: 08/10/2020						
	SURVEYED BY:						
	DATE:						
	REF NO:						
	TP INSURER: CHINA TAIPING						
	TP VEH: SKZ2324K						
71501-T9A-T00ZZ	FACERR.BUMPER <i>de</i>	1	463.70	5	440.51	30.84	471.35
33505-T9A-T01	REFLECTOR ASSYR.RR. ?	1	16.60	5	15.77	1.10	16.87
33555-T9A-T01	REFLECTOR ASSYL.RR. X	1	16.60	5	15.77	1.10	16.87
71593-T9A-J00	SPACER R.RR.BUMPER SIDE <i>re</i>	1	11.50	5	10.92	0.76	11.68
71598-T9A-J00	SPACERL.RR.BUMPER SIDE X	1	11.50	5	10.92	0.76	11.68
91505-TM8-003	CLIP,BUMPER <i>re</i>	4	2.30	5	8.74	0.61	9.35
66100-T9A-T50ZZ	PANEL COMPRR. ?	1	364.50	5	346.27	24.24	370.51
84640-T9A-T01ZA	LINING ASSYRR.PANEL X	1	66.60	5	63.27	4.43	67.70
33550-T9A-T01	TAILLIGHT ASSYK R <i>g</i> - ?	1	205.70	5	195.41	13.68	209.09
04636-T9A-T00ZZ	PANEL SETR.RR.OUTSIDE <i>repair</i>	1	1276.90	5	1213.05	84.91	1297.96
NMRS-4P-TM3040L	4PCS ACT RR.SENSOR ?	1	320.00		320.00	22.40	342.40
Sum Item					2640.63	184.83	2,825.46
BOSUN	SUNDRIES	1	100.00 30		100.00	7.00	107.00
BA02R	REMOVE & RENEW REVERSE SENSORS-4 PCS (N)	1	280.00		280.00	19.60	299.60
BML02I	INSPECT RR LIGHTING MECHANISMS. PERFORM WATER	1	280.00		280.00	19.60	299.60
BKBU02R	REMOVE & RENEW RR BUMPER INCLUDING FITTINGS ON	1	3250.00 1300		3250.00	227.50	3477.50
BP03R	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS. (3P)	1	2080.00 1560		2080.00	145.60	2225.60

Printed on 9/10/2020 3:48:28 PM

This is a computer generated invoice. No signature is required.

Part prices are subjected to change without notice.

The above estimated cost of repair do not include any unforeseen damages.

GST Amount is calculated from individual line(s).

An amount of \$53.50 (incl GST) will be applicable for the request of the above quotation for estimates above \$2,000.00.

However, if the repairs are subsequently done at Kah Motor Co. Sdn. Bhd, it will be refunded.

HONDA

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Company Ref. No.: S60FC1380G

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SPRINGLEAF TOWER
SINGAPORE 079909
Registration No : SCJ1928D
Chassis No : MRHGM6660EP000125
Model : CITY 1.5SV CVT 2014 (EURO 4)
Owner's Name : TEY MUI LEE @ TAY MUI LEE
Ins Policy No. :
Date of Accident : 8/10/2020

Document No. : SQT20003273
Date : 9. Oct 2020
Customer No. : WZC008
Svc Advisor : IVAN TEO BOON KIAT
Engine No : L15Z11414235
Date | Time : 9. Oct 2020 3:29:51 PM
Surveyor Name :
Survey Date :
Authorisation Date :

Page 2

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
Sum Labor					5990.00	419.30	6,409.30

Survey By

Date & Time

Excess

Status

Signature

Rafael - 14p 90010068

19/10/2020 @ 11/10

5 days

for

Resy before paint

Total Amount 8,630.63 604.13 9,234.76

Total (Inclusive of GST) 9,234.76

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:

Printed on 9/10/2020 3:48:28 PM

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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	09/10/2020 14:59
Date Of Accident	08/10/2020 08:10
Exact Location Of Accident	ALEXANDRA HOSPITAL ENTRANCE SERVICE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCJ1928D
Insured/Policyholder	
Name Of Registered Owner	TAY MUI LEE
NRIC No	SXXXX643H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91520831
Alternative Phone No	OFFICE-91520831

Vehicle Particulars

Manufacturer	HONDA
Model	CITY-1.5 (A)
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	ONG SU LING
NRIC No	SXXXX314D
Date Of Birth	11/01/1990
Occupation	INDOOR
Date Of Driving Pass	02/12/2010
Driving Experience	9 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91520831
Fax Number	
Contact Number	
Email Address	NOEMAIL

BLK 21 QUEEN'S CLOSE #09-139

Address 140021
Postcode
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured RELATIVE
Vehicle Registration Number of Driver's Own Vehicle -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
Weather Conditions RAINING
Road Surface WET

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) 3
Passenger 1
NAME: : TAY KIAT SIONG JONATHAN
GENDER: : MALE
Passenger 2
NAME: : OBADIAH TAY
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 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 11

Vehicle Registration Number SKZ2324K
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category VEH B
Name of Driver PRIVATE CAR
NRIC/Passport Number HENG KAY YANG
Contact Number SXXXX961H
Address 93399655
Postcode

China


Sketch Plan Pg. 1

Vehicle Number: _____


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**.
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5. **Any false reporting may be referred to the Police for investigation.**
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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:



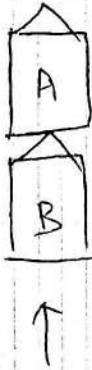
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Vehicle Number: _____

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While entering Alexandra Hospital, we were travelling at a very slow speed (10-20 km/h) on a rainy day when the car in front brake and we followed. Then the car behind hit my vehicle's rear portion.

DECLARATION

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

Terry Miller

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.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:

Singapore NRIC

Owner ID:

643H

Vehicle No.:

SCJ1928D

Vehicle to be Exported:

No

Intended Deregistration Date:

19 Oct 2020

Vehicle Make:

HONDA

Vehicle Model:

CITY 1.5 SV CVT

Primary Colour:

Red

Manufacturing Year:

2014

Engine No.:

L15Z11414235

Chassis No.:

MRHGM6660EP000125

Maximum Power Output:

88.0 kW (118 bhp)

Open Market Value:

\$16,539.00

Original Registration Date:

18 Nov 2014

First Registration Date:

18 Nov 2014

Transfer Count:

0

Actual ARF Paid:

\$6,539.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

17 Nov 2024

PARF Rebate Amount:

\$4,577.00

Intended COE Rebate Details

COE Expiry Date:

17 Nov 2024

COE Category:

A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$62,000.00

COE Rebate Amount:

\$25,292.00

Total Rebate Amount:

\$29,869.00

The information contained herein is correct as at 19 Oct 2020

OK

Red

art.com/used_cars/info.php?ID=927006&DL=3630

► Honda City 1.5A SV

Overview

Financial

Accessories

Similar

Research

Photos

Map

Price \$41,888

Depreciation ⓘ \$9,510 /yr
View models with similar depre

Reg Date 10-Nov-2014
(4yrs 21days COE left)

Mileage 86,225 km (14.5k /yr)

Manufactured ⓘ 2014

Road Tax ⓘ \$684 /yr

Transmission Auto

Dereg Value ⓘ \$30,511 as of today (change)

OMV ⓘ \$16,534

COE ⓘ \$63,880

ARF ⓘ \$6,534

Engine Cap 1,497 cc

Power 88.0 kW (118 bhp)

Curb Weight ⓘ 1,096 kg

No. of Owners ⓘ 2

Type of Vehicle Mid-Sized Sedan

Features

View specs of the Honda City (2014-2020)

Description

Just Arrived, Most Popular Honda City And Economy. Sporty White, New 16" Sport Rim And Tyre. Original Paint. \$0 Drive Away, Loan Guaranteed Approved, All Exbankruptcy And Bad Credit Welcome. High Trade In. Don't Miss It, Act Fast, Call Now For More Detail.

Ca