ASS. REC. B. March	3/011	20010976/4423
	ASSIC	GNMENT
From: Date:		Veh No: SMD /3077 Yr Regn: 4/8  Type: M.Cár / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD ITP) WS / TP RES / OD RES / EVA / INV / MV		Truck / Trailer or CP7
To Inspect Vehicle No: SMD / 30 7	75	Make: Hondy CIty c.c 1497
at Workshop m/s Kah not		Colour Rhie AC: Insured / Std / NI / NA
of		Sp.Reading 40346 T/Radio: Insured / Std / NI / NA
Insured: SM H (1910		Eng/No:
Policy No.		C/No: MRHGM 6660KT000247
Claims No.		Gen. Cond Good / Fair / Poor / Burnt
Sum Insured: Excess:		Steering: horder / Jammed / Leaked / Burnt or
(Client's Record)		Brake: Roader / Jammed / Leaked / Burnt or
Make of Veh:		Modi: Nil (SIRim / STD A/Rim or
_		Tyre Size: F: 185/55~16
(Policy Condition)		R:
Remark: The veh had commenced its	N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.		TOYO / YOKO Or
Bal. or Market Value: 466.		Front Rear
IDAC Accident Rport: Consistent? : Yes or	No	R/Bal.
GIA / PR Seen: Consistent?: Yes or	No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs:	· No	D.O.A. 8/10/20 D.O.I. 19/10/20
Lum Sum: / % 3 Val.: Yes or	· No	Survey held at
1.41	738237	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS	ov	015 Rear
Ve	ehicle: IN / OUT	
Date: Person Contacted:		The U/C / Chassis frame / Body Structure affected due to collision.
Date: Person Contacted:  Date / Time Action / Instruction	1000 B 31	
Date: Person Contacted:  Date / Time Action / Instruction Dep 73  Action / Instruction Dep 73  Action / Instruction Dep 73	1000 B 31	
Date: Person Contacted:  Date / Time Action / Instruction Dep 73	SUS B 35 Merinen	
Date: Person Contacted:  Date / Time Action / Instruction Dep 73  All Confirmal fine for fy  26/10 Sent Preliby  Date/Time, File Pass to? : Preli. Report  1) : Final Report	SUS B 35 Merinen	
Date: Person Contacted:  Date / Time Action / Instruction Dep 73  (1/20 Confirmed finel by 26/10 Sent Pieli by  Date/Time, File Pass to? : Preli. Report  1) : Final Report  Date/Time, File Return to?	SUS B 35 Merinen	Days Of Repair: 5 Resurvey No. of Trip: 2 Survey Fee: Transportation: Site Insp (\$ )_S+RS_SI

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 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.

<ol><li>By the lodgement of this report to the insurers, yo aforesaid.</li></ol>	bu hereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	08/10/2020 13:43
Date Of Accident	08/10/2020 07:40
Exact Location Of Accident	UPPER CHANGI ROAD NORTH
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMD1307J
Insured/Policyholder	
Name Of Registered Owner	LIM CHOK PENG
NRIC No	SXXXX213H
Email Address	HWEEBN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90485495
Alternative Phone No	OTHERS-90485495
Vehicle Particulars	
Manufacturer	HONDA

CITY-1.5 (A) Model

Exact Purpose for which vehicle was being used at PERSONAL USE

time of accident

Are you claiming under your own insurance policy

NO for repair to your vehicle?

THIRD PARTY If No, Please state action to be taken

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company AVIVA LTD

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

Policy Number

Cover Note Number

Driver

LOW HWEE BIN Name of Driver NRIC No SXXXX336H 16/11/1973 Date Of Birth **INDOOR** Occupation

16/06/1993 Date Of Driving Pass **Driving Experience** 27 YEARS AND 3 MONTHS

**FEMALE** Gender

Mobile Number (LOCAL) +65-96933493

Fax Number

OTHERS-96933493 Contact Number

EMail Address HWEEBN@GMAIL.COM Address

BLK 43 SIMEI RISE

Postcode

528785

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

ed SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

√<u>1</u>6

General Information of the Accident

Type Of Accident

COLLISION - CHANGE/CROSS LANE

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 NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

**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 ATTACHED STATEMENT - THIRD PARTY DIRECT SETTLEMENT

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

SMH1191D

Vehicle Make/Model/Colour

HONDA

**Details Of Properties** 

Vehicle Category

PRIVATE HIRE

Name of Driver

MR CHIA

NRIC/Passport Number

Contact Number

98569026

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# Sketch Plan Pg. 1



#### SKETCH PLAN

## IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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) of:
    - 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.

olicyholder's Signature ate & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

# Sketch Plan Pg. 2

SMD13072	
SKETCH PLAN	
	The state of the s
Lipper Changi A Road North	A-SMD13075 B-SMH11910
, ()	B-SMHII9ID
DESCRIBE CIRCUMSTANCES OF THE	
On 8 Oct 2020, at a East towards PIE. After I realised the vehicle	the junction I felt an impact from my right reas
nair right parking	) terres and the second
1	
4	
ECLARATION	
We declare the foregoing particulars are t	rue in every respect.
13 	W. Car
olicyholder's Signature ute & 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

Vehicle Owner Particulars	C'NDIC
Owner ID Type:	Singapore NRIC
Owner ID:	213H
Vehicle Details	CN4D42071
/ehicle No.:	SMD1307J
Vehicle to be Exported:	No
ntended Deregistration Date:	19 Oct 2020
Vehicle Make:	HONDA
Vehicle Model:	CITY 1.5 SV CVT
Primary Colour:	Blue
Manufacturing Year:	2018
Engine No.:	L15Z16201870
Chassis No.:	MRHGM6660KT000247
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$17,043.00
Original Registration Date:	02 Aug 2018
First Registration Date:	02 Aug 2018
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$17,043.00 \$57
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 Aug 2028
PARF Rebate Amount:	\$12,782.00
Intended COE Rebate Details	
COE Expiry Date:	01 Aug 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$32,699.00
COE Rebate Amount:	\$25,455.00
Total Rebate Amount:	\$38,237.00

The information contained herein is correct as at 19 Oct 2020

ОК

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\$58 until it's SOLD!

Audi Q7 2.0 In Mint Condition.



70k Mileage, Original White Colour Direct Owner StarAd

**PRIME MOTOR & LEASING** ICHENG YONG CREDIT ENTERPRISES PTE LTD GROUP OF COMPANIES With over 200 units of vehicles to choose from, ranging from all European to Japanese Makes

V

Post an Ad

Browse by Category

city

Ways of Selling

Model

Απγ

Depreciation

Reg Date

Eng Cap

Mileage

Sort by Date Posted

Advanced Search

Veh Type

Submit (

Status Available

✓ 20 results/page ✓

Search Selection

3 vehicles

city

Make

Advertiser Login

14-Aug-2018

1,497 cc

Available

Honda City 1.5A V

\$66,800

\$7,520 /yr

39,600 km

Sedan

Low Bank Interest Rate And Very Easy In House Loan Available! Balance 3 Times Free Agent Servicing With 5 Years On-going Warranty!...

Dickson Automobile

Posted: 02-Oct-2020 Tags: 2018 Honda City, Honda City, Honda, City



Honda City 1.5A V (OPC)

\$54,800

\$6,440 /yr

16-Jan-2018

1.497 cc

8,654 km

Sedan

Super Low Mileage! Full Agent Maintained With On-Going Warranty Till 08/2023! 2 More Free Servicing From Agent, Low Bank Interest...

Dickson Automobile

Posted: 01-Oct-2020 Tags: 2018 Honda City, Honda City, Honda, City



Honda City 1.5A SV

\$70,800

\$8,220 /vr

12-Jun-2018

1,497 cc

21,000 km

Sedan

Available

CONSIGNMENT

Available

First Owner Unit! Low Mileage! 3 Year Warranty! Interest Rate 2.48% Only! Secured And Well Maintained By Fussy Owner. Immaculate...

Car Search

Posted: 18-Sep-2020 Tags: 2018 Honda City, Honda City, Honda, City

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

Model

Reg Date

Eng Cap

Mileage

Status

20 v results/page

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# 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

: CHINA TAIPING INSURANCE (S'PORE) PTE

For 24-hours Roadside Assistance, Call 98203838

Document No.

: SQT20003258

Page

Amount

QUOTATION

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

3 ANSON ROAD #16-00

: 8. Oct 2020 : WZC008

SPRINGLEAF TOWER SINGAPORE 079909

Customer No. Svc Advisor **Engine No** 

: YOU PO SOON

Registration No Chassis No

Owner's Name

Ins Policy No.

: SMD1307J

: MRHGM6660KT000247

Date | Time

: L15Z16201870 : 8. Oct 2020 2:32:00 PM

0% GST

17.50

31.50

250.00

450.00

267.50

481.50

Model

Customer

; CITY 1.5SV CVT 2019 (EURO 6)

Date

Surveyor Name **Survey Date** 

: LIM CHOK PENG

Authorisation Date :

Date of Accident

: 8/10/2020

ltem	Description		Qty	Unit Price	Disc %		Amount	incld GST
	TP DIRECT SETTLEMENT (J/NO: )				- м назаченией ISON	ASOLO NO PARA USA DO DA P		
	OWNER: LIM CHOK PENG							
	OWNER INSURER: AVIVA							
	ACC DATE: 8/10/2020							
	SURVEYED BY:							
	DATE:							
	REF NO:							
	TP INSURER: C/TAIPING							
	TP VEH: SMH1191D							
04631-T9A-T00ZZ	PANELR.SIDE SILL	9	1	1174.80	5	1116.06	X 78.12	1194.18
67510-T9A-T00ZZ	PANEL COMPR.RR.DOOR		1	712.50	5		47.38	724.25
67825-T9A-T01	TAPER.RR.DOOR SASH CENTER ✓	3	1	15.40	5		1.02	15.65
42700-T9A-T72	DISK, ALUMINIUM WHEEL 16X6J SU		1	454.00	5		30.19	461.49
71501-T9A-T20ZZ	FACE, RR. BUMPER 2		1	463.70	5		30.84	471.35
71593-T9A-J00	SPACER R.RR.BUMPER SIDE Ne.		1	11.50 -	5	10.92	_0.76	11.68
91505-TM8-003	CLIP,BUMPER NU		4	2.30 /	5	8.74	0.61	9.35
					Sum Item	2699.03	<u>188.92</u>	2,887.95
BO-WHEEL ALIGN X4	WHEEL ALIGNMENT X4	11	1	180.00	<b>/</b>	180.00	12.60	192.60
DO-MILLE ALIGH X4	WILLE ALIGNMENT AS		ž.		t. Service	180.00	12.60	192.60
BOSUN	SUNDRIES	nu	1	50.00	20.	50.00	3.50	53.50
BML02I	INSPECT RR LIGHTING MECHANISMS. PERFORM WATER	11	1	150.00	×	150.00	10.50	160.50
BA02R	REMOVE & INSTALL REVERSE SENSORS-4 PCS (	N)	1	180.00 /	30.	180.00	12.60	192.60
BOJSE	BODY JOINT SEALANT.	11	1	100.00	A	100.00	7.00	107.00
вовс	Transport (1994) - 1994	้นา	1	100.00	•	100.00	7.00	107.00
	STORY WOOS	- 1						

### Printed on 8/10/2020 3:41:07 PM

BP00R

BC012R

APPLY BODY UNDERSIDE COATING (N).

RESET VEHICLE SMART ENTRY SYSTEM

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.



# KAH MOTOR CO. SDN. BHD.

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: SQT20003258

Page

2

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3 ANSON ROAD #16-00

SPRINGLEAF TOWER SINGAPORE 079909

Customer No.

: 8. Oct 2020 : WZC008

Svc Advisor

: YOU PO SOON

Registration No Chassis No

: SMD1307J

: MRHGM6660KT000247

**Engine No** Date | Time

Date

: L15Z16201870

Model

Customer

: CITY 1.5SV CVT 2019 (EURO 6)

**Surveyor Name** 

: 8. Oct 2020 2:32:00 PM

Owner's Name

: LIM CHOK PENG

Survey Date

Authorisation Date

Ins Policy No.

Date of Accident : 8/10/2020

Item	Description	Qty	Unit Price Di	sc % Amount	0% GST Amount	Amount incld GST
BMI03D	REMOVE & INSTALL REAR COMPARTMENT LININGS	1	450.00 2	\$50.00	31.50	481.50
BKDR22R	REMOVE & TRANSFER ITEMS TO NEW RR R DR. ADJUST	1	500.00 V 1	<b>×</b> 500.00	35.00	535.00
BKSP12R	CUT OFF & RENEW R SILL PANEL. STRAIGHTEN ALLS	$Y_1$	3300.00 / 3	O O 3300.00	231.00	3531.00
BP05R	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS (5P) $5^{\circ}$	<sup>S.</sup> 1	2800.00 18:	WAS 21-02	196.00	2996.00
	\(\omega \cup 0		Sum	Labor <u>8330.00</u>	<u>583.10</u>	<u>8,913.10</u>
Name of the last o						

Survey By

Date & Time

Total Amount 11,209.03

784.62

11,993.65

Excess

Status

Signature

Total (Inclusive of GST)

11,993.65

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display samaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No itegar modification(s) is allowed.
- Supplementary item(s) must be recurveyed and

Acknowledged by Repairer

### Printed on 8/10/2020 3:41:07 PM

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

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