

ASS. REC. BY: Rafael

REF:

CS/CT120011269/R19f3

616A

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SMM1296Jat Workshop m/s Accord m/sof 1009, BUKIT MEKOH LN3 #01-80Insured: CTIPolicy No. DMPCSNA00107572001Claims No. SNM20D203877C02

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: 113K

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 3 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: SMM1296JYr Regn: 2015 / 86P

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

Truck / Trailer or

Make: LAND ROVER DISCOVERY SP. 2.0 c.c. 1999Colour ORANGE A/C: Insured / Std / NI / NASp. Reading 098641 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: SALCA2960PH542221

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Order / Jammed / Leaked / Burnt orBrake: Order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 235/60R18

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. 14/10/2020D.O.I. 28/10/2020Survey held at ACCORD AUTODes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

29/10/20@11.44am revised to Alfred Toh via Merimen.

28/01/21@12.35pm Rasul finalised with Celia LS \$5800, 3 days (Red \$8856.44, 60%)

Date/Time, File Pass to?

29/01 Typist

Date/Time, File Return to?

2)

Rep. Form: MER-TPLump Sum / Fee: 5800Days Of Repair: 3Resurvey No. of Trip: 2Add Fee: ☐ Site Insp (\$)☐ Interview (\$)☐ Tech. Invs (\$)☐ Weekend (\$)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

TOTAL

BLOCK 1009 BUKIT MERAH LANE 3
#01-80 SINGAPORE 159723
TEL:62715133/62717433 FAX:62745715

DOA: 14.10.2020

Pg1

[illegible]

[illegible]

BLOCK 1009 BUKIT MERAH LANE 3
#01-80 SINGAPORE 159723
TEL:62715133/ 62717433 FAX:62745715

Pg 3

DOA: 14.10.2020

[illegible]

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	14/10/2020 16:54
Date Of Accident	14/10/2020 13:40
Exact Location Of Accident	JURONG WEST AVENUE 1 TRAFFIC LIGHT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM1296J
Insured/Policyholder	
Name Of Registered Owner	NG RI HUA
NRIC No	SXXXX616A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90107030
Alternative Phone No	OTHERS-90107030
Vehicle Particulars	
Manufacturer	LAND ROVER
Model	DISCOVERY S14 SPORT
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5118523144
Cover Note Number	
Driver	
Name of Driver	NG RI HUA
NRIC No	SXXXX616A
Date Of Birth	04/11/1984
Occupation	INDOOR
Date Of Driving Pass	17/10/2007
Driving Experience	12 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90107030
Fax Number	
Contact Number	OTHERS-90107030
Email Address	NOEMAIL

Address	BLK 405 JURONG WEST STREET 42 #10-613
Postcode	640405
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?	YES
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)	5

Passenger 1

NAME:	: KIEW YEAN CHING
GENDER:	: FEMALE

Passenger 2

NAME:	: ANDERS NG YI MING
GENDER:	: MALE

Passenger 3

NAME:	: AURORA NG SHI WEI
GENDER:	: FEMALE

Passenger 4

NAME:	: TAN AH KHIM
GENDER:	: FEMALE

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

PLEASE 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:

Vehicle Registration Number	SLF6189B
Vehicle Make/Model/Colour	JAGUAR XE
Details Of Properties	

Vehicle Category

PRIVATE CAR

Name of Driver

ONG THIAM HUAT

NRIC/Passport Number

SXXXX879I

Contact Number

92305589

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name

NG RI HUA

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

SMM1296J

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan

SKETCH PLAN

Veh A: SMW 1296 J
Veh B: SLF 6189 B

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. 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 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.

"I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS."

Policyholder's Signature
Date & Time: 14/10/2020
BSH

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

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

Sketch Plan #2

SKETCH PLAN

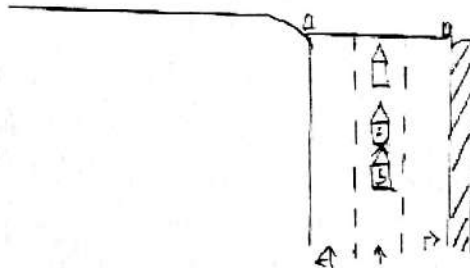
Veh A: SWM 1296J

Veh B: SLF 6189B

Jurong Central

Jurong Green
Community Club

Jurong West St A2



Jurong West Ave 1

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While i stationary at the traffic junction wait for traffic light turn green.
Suddenly Vehicle B bang into my rear of vehicle

DECLARATION

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

Policyholder's Signature

Date & Time: 14/10/2020

15:45

Driver's Signature

(if driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	616A
Vehicle No.:	SMM1296J
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Oct 2020
Vehicle Make:	LAND ROVER
Vehicle Model:	DISCOVERY SPORT 2.0 SI4 SE 75TR
Primary Colour:	Orange
Manufacturing Year:	2015
Engine No.:	015037103446204PT
Chassis No.:	SALCA2AG0FH542221
Maximum Power Output:	177.0 kW (237 bhp)
Open Market Value:	\$57,497.00
Original Registration Date:	17 Sep 2015
First Registration Date:	17 Sep 2015
Transfer Count:	1
Actual ARF Paid:	\$75,495.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Sep 2025
PARF Rebate Amount:	\$52,846.00
COE Expiry Date:	16 Sep 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$62,101.00
COE Rebate Amount:	\$30,324.00
Total Rebate Amount:	\$83,170.00

The information contained herein is correct as at 29 Oct 2020

OK

Orange



mart.com/used_cars/info.php?ID=939804&DL=2547

Land Rover Discovery Sport 2.0A Si4 SE 7-Seater

Overview

Financial

Accessories

Similar

Research

Photos

Map

Price \$109,800

Depreciation \$15,870 /yr
View models with similar depre

Reg Date 18-Jun-2015
(4yrs 7mths 19days COE left)

Mileage 50,000 km (9.3k /yr)

Manufactured 2015

Road Tax \$1,212 /yr

Transmission Auto

Dereg Value \$85,485 as of today (change)

OMV \$55,807

COE \$75,002

ARF \$72,453

Engine Cap 1,999 cc

Power 177.0 kW (237 bhp)

Curb Weight 1,841 kg

No. of Owners 2

Type of Vehicle SUV

Features

Powered By 2L Inline 4 Cylinder Turbocharged Engine Producing 237BHP, 9-Speed ZF Transmission, Paddle Shift, Hill Descent Control, Terrain Response. View specs of the Land Rover Discovery Sport (2015-2019)

Accessories

Touch Screen Infotainment System With Navi, Power Tailgate, Reverse Camera, Keyless Entry/Start, Electric Seats, DRL.

D

Seller

The Ca