

ASS. REC. BY:

REF: FWD /

ASSIGNMENT

Kenneth

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Ah Lim

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: 815k

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

Date / Time Action / Instruction

TOTAL LOSS

SUBMIT INVESTIGATE CASE EXTENSIVE TOTAL LOSS

Date/Time, File Pass to?

☐ : Prel. Report☐ : Final Report

1)

Date/Time, File Return to?

2) 12/11/20 TYPIST

Report Format :

Lump Sum / I.B.I: (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

\$ - RS. \$ _____

Fees:

Others

TOTAL INV

\$500.00

Veh No: SG8 76776Yr Regn: 11.07Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toy ViosColour: Ph. Blue

Sp. Reading: _____

Eng No: _____

C/No: NR053174930.5038853Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: NTI / SPRim / STD A/Rim orTyre Size: F: 185/65R15

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

R/Bal. 8 mmL/Bal. 8 mmD.O.A. 15/10/20

Survey held at

Rear

R/Bal. 8 mmL/Bal. 8 mmD.O.I. 21/10/2020

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

The veh caught fire after collision on theThe UIC / Chassis frame / Body Structure affected due to collision.In RH portion.

AH LIM MOTOR COMPANY

10 ANG MO KIO INDUSTRIAL PARK 2A

#01-09 AMK AUTOPOINT Singapore 568047

Tel: 6483 1244

Fax: 6483 6170

Email: ahlmmc@singnet.com.sg

GST Reg No: M9-0009639-E

SURVEYOR COPY

INSURER:

FWD Singapore Pte. Ltd. (HQ)

PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	
Policy No:	PNPV2019-00001566	Date of Loss:	15/10/2020
Vehicle Reg. No.:	SGZ7677G	Driveable?	
Driver Age/Info:	32 / FEMALE	Party At Fault:	UNKNOWN
TP Injury Involved?	YES	Third Party Involved?	YES
Insured/Claimant:	V KHANISEN		
Driver:	JOESAPHINE SHALENE KHANISEN		

Make/Model:	TOYOTA VIOS, 1.5 E (A)	Vehicle Reg. Date:	16/11/2007
Vehicle Colour:	BLUE	Chassis No:	MR053HY9305038853
Engine No:	1NZX656912		
Odometer:	0 KM		

Paint Type:	
Total Loss?	YES
Est. Duration of Repair (day)	14

Not Authorised
7/10/20
Ex TBA

Description of Accident/Loss	REFER TO THE POLICE REPORT & SKETCH PLAN BY DRIVER
Remarks:	CAR TOW IN @ ALM AMK AUTOPOINT WORKSHOP
Present Location:	AH LIM MOTOR COMPANY (AMK)

COST OF CLAIMS

	Amount
Parts	0.00
Miscellaneous Items	0.00
Labour	0.00
Paintwork Labour	0.00
Towing	0.00
Nett Amount (S\$)	0.00

This claim is handled by: ZILA

Generated using Merimen e-Claims Internet Estimation & Adjusting System

Require PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 354C

Vehicle Details

Vehicle No.: SGZ7677G
Vehicle to be Exported: No
Intended Deregistration Date: 20 Oct 2020
Vehicle Make: TOYOTA
Vehicle Model: VIOS E AUTO
Primary Colour: Blue
Manufacturing Year: 2007
Engine No.: 1NZX656912
Chassis No.: MR053HY9305038853
Maximum Power Output: 80.0 kW (107 bhp)
Open Market Value: \$12,498.00
Original Registration Date: 16 Nov 2007
First Registration Date: 16 Nov 2007
Transfer Count: 2
Actual ARF Paid: \$13,748.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 15 Nov 2022
COE Category: A - Car (1600cc & below)
COE Period(Years): 5
PQP Paid: \$20,997.00
COE Rebate Amount: \$8,697.00
Total Rebate Amount: \$8,697.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 20 Oct 2020

OK

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	20/10/2020 15:19
Date Of Accident	15/10/2020 19:15
Exact Location Of Accident	ALONG ADMIRALTY RD EAST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGZ7677G
Insured/Policyholder	
Name Of Registered Owner	V KHANISEN
NRIC No	SXXXX354C
Email Address	SHALENEKHANISEN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91912816
Alternative Phone No	OTHERS-91912816

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS-1.5 E (A)
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	PNPV2019-00001566
Cover Note Number	16/05/2020 - 15/05/2021

Driver

Name of Driver	JOESAPHINE SHALENE KHANISEN
NRIC No	SXXXX451G
Date Of Birth	05/10/1988
Occupation	INDOOR
Date Of Driving Pass	30/09/2017
Driving Experience	3 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91912816
Fax Number	
Contact Number	OTHERS-91912816
Email Address	SHALENEKHANISEN@GMAIL.COM

Address 38 SARACA PLACE
 Postcode 807467
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured CHILDREN
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident FIRE, EXPLOSION OR LIGHTNING
 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 1
 Was any body injured in the Accident? YES
 Was any injured conveyed to hospital by ambulance? YES
 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) 1

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name SERANGOON NORTH NEIGHBOURHOOD POLICE POST
 Police Station Address ROAD: BLK 108 SERANGOON NORTH AVENUE 1 #01-709 , POSTCODE: 550108 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-2849999 - FAX NO: 63431742
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO THE POLICE REPORT & SKETCH PLAN BY DRIVER

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? NO
 Was there any audio recorded? NO

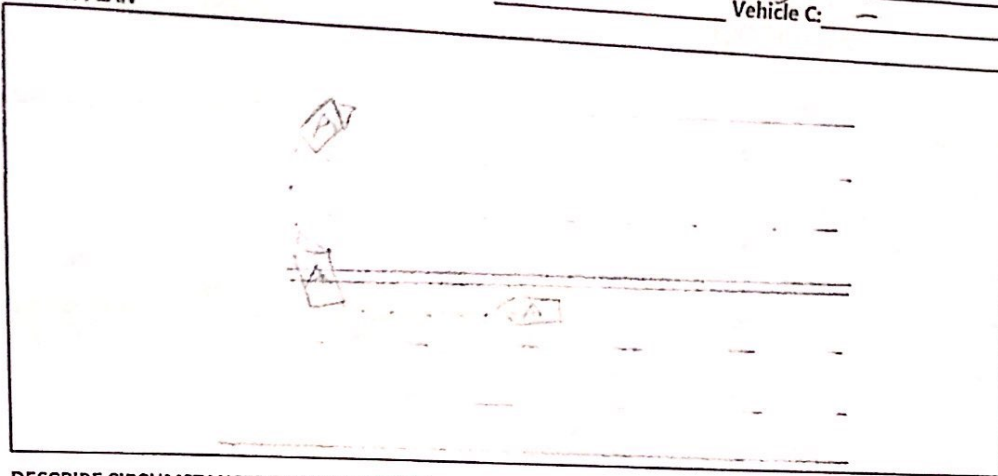
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number DIVIDER
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category GOVERNMENT
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

ASS. R

Kenn

Date of accident: 15/10/20 Time: 1915 Location: Admiralty Rd Out.
 My Vehicle A: SGT 76795 Vehicle B: — Vehicle C: —
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Peter to the police report.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address :

& myself :

Email address : shalenekhanisen@gmail.com

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own Insurer for more information.

DECLARATION

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

Policyholder's Signature

Date & Time:

GMFMC Sketch Plan Form V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre personnel's Signature

Name:

NRIC/FIN No.:

AH LIM MOTOR COMPANY

Sketch Plan Pg. 3



**SINGAPORE
POLICE FORCE**



T/20201019/2068

1 of 3

Report No. T/20201019/2068

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/10/2020 15:24		Vide Report No.: L/20201015/0129		Station Diary No.: 25	
Informant's Particulars					
Name of Informant: JOESAPHINE SHALENE KHANISEN			Address: 38 SARACA PLACE SINGAPORE 807467		
ID Type / ID No.: NRIC NO / S8837451G			Contact No.: Home/Office: Mobile: 91912816		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 32	Date of Birth: 05/10/1988	Type of Informant: Driver		
Race: Indian			Language: English		Institution / School Name:
Occupation: COUNSELLOR			Driving Licence Information: Class: 30/09/2012 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 15/10/2020 19:15	Type of Location: Straight Road
Location: ADMIRALTY ROAD EAST				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGZ7677G						0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20201019/2058

2 of 3

Report No. T/20201019/2058

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

CONTINUATION OF REPORT

Driver Name	JOESAPHINE SHALENE KHANISEN	ID No.	S8837451G
Related Vehicle	SGZ7677G	Contact No.	91912016
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	15/10/2020	Date Discharge	16/10/2020
No. of Days granted Medical Leave	14	Degree of Injury	NIL

Brief Details.

On 15.10.2020 at around 1917hrs, I was driving my father's vehicle bearing the registration plate number : SGZ7677G travelling along the said road heading back home. As I was driving, I started to see slight smoke emitting out from the vehicle and suddenly, I started to lose control of the steering wheel. I tried to stepped onto the brake all the way however it was too late and my vehicle had mount over a center divider causing it to hit onto a kerb. Fortunately, I was still conscious however the vehicle started to catch fire and the flame became bigger. The airbag was deployed and I managed to break open the door and came out. There was a passer by who came to assist and he told me to move away as he fear the vehicle might explode. As the incident location was near to previous workplace, some of my ex-colleagues rushed to render assistance. SCDF and police arrived a while later however I do not wish to be conveyed. After the accident, I started to feel pain and I went to Sengkang hospital. I was given a total of 14 days MC.

I also wish to state that my personal belongings were all burnt in the fire. The items that were burnt as follows one driving licence, POSB ATM card, UOB ATM card, HSBC credit card, OCBC atm card, Singapore passport, Singapore NRIC, One personal laptop and One work phone.