

# ASSIGNMENT

From \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No. \_\_\_\_\_  
 Claims No. \_\_\_\_\_  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

N/S	O/S

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Rpt: \_\_\_\_\_ 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: SKF8198Z yr Regt: 2012/July  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or

Make: Hyundai Veloster C.C. 1591  
 Colour: Brown A/C: Insured / Std / NI / NA  
 Sp. Reading: 189551 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_

C/No: KMHIC6DVCU081761

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: 225/40R18

R: 225/40R18

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

Front

Rear

R/Bal. 06 mm

R/Bal. 06 mm

L/Bal. 06 mm

L/Bal. 06 mm

D.O.A.

D.O.I. 28/10/20

Survey held at

Dynamic

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

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

Date / Time

Action / Instruction

TP AXA

MV: 26K

PV: 19.8K

Nett: 6.2K

Date/Time, File Pass to?



: Preli. Report

1)



: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

3 + P.S. 31

Phone

Other

P.S. 31

Arbit Fee:



Site Insp. (\$



Interview (\$



Tech. Insp. (\$



Meet. (\$

Report Form 4:

Long Form / Short

## 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	28/10/2020 11:02
Date Of Accident	27/10/2020 13:15
Exact Location Of Accident	SERANGOON RD TWDS UPPER SERANGOON RD B4 WHAMPO EXI
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF8198Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ANG SU ANN
NRIC No	SXXXX818E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96691360
Alternative Phone No	OFFICE-60000000

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	VELOSTER-1.6 (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?	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	GA228802/1
Cover Note Number	

### Driver

Name of Driver	TAN ENG JOO
NRIC No	SXXXX323F
Date Of Birth	11/03/1981
Occupation	INDOOR
Date Of Driving Pass	30/09/2009
Driving Experience	11 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93685529
Fax Number	
Contact Number	
EMail Address	ANDREW TAN311@GMAIL.COM



Address	BLK 530A PASIR RIS DRIVE 1 #10-362
Postcode	511530
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	3
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)	2
Passenger 1	NAME: : ANG SU ANN
	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

Report 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 1

Vehicle Registration Number	SLR5529Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number	SKS3437Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**DETAILS OF INJURED PERSON 1**

Name	TAN ENG JOO
Approximate Age	
Injuries Sustain	UNKNOWN
Injured person in which vehicle?	SKF8198Z
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Sketch Plan

### 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.
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.

  
Policyholder's Signature  
Date & Time:

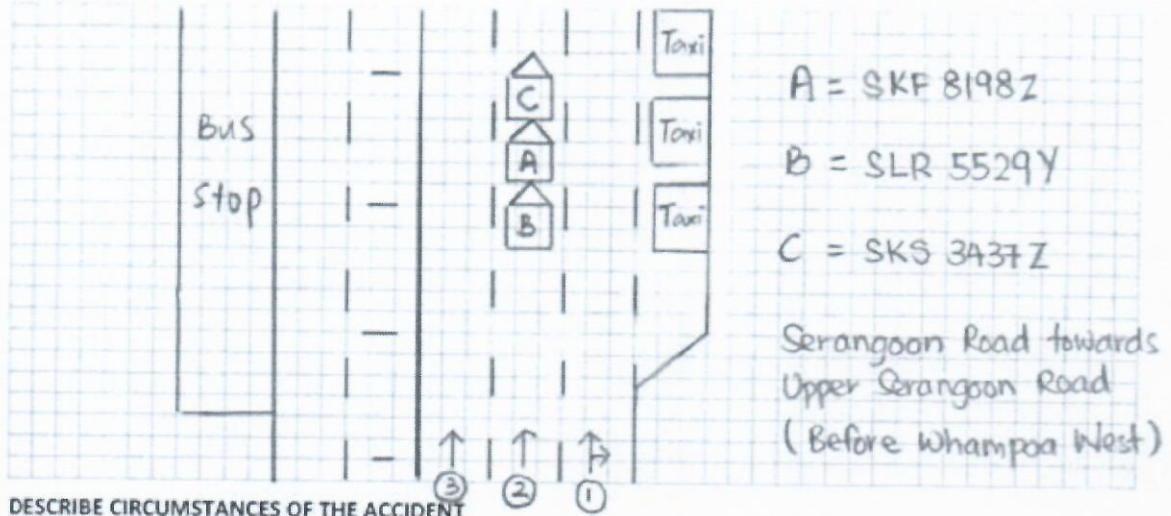
  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

  
Reporting Centre Personnel's Signature  
Name: ROHINI  
NRIC/FIN No.: 57131309E



## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached

### 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: P. N. C.  
NRIC/FIN No.: 57136396

### Sketch Plan #3

On 27.10.2020 at about 13:15 hours along Serangoon Road towards Upper Serangoon Road (Before Whampoa West). I was travelling straight on lane 2 and when the front vehicle (C) slowed down and stopped, hence I followed suit.

Suddenly, I heard a loud bang from behind and the impact forced my vehicle (A) to hit onto the rear portion of vehicle (C). When I alighted, I realised it was vehicle (B) that collided onto the rear portion of my vehicle (A) thus causing damages to the front and rear portion of my vehicle (A). It was a chain collision of total of 3 vehicles involved.

I wish to state that I have 1 passenger in my vehicle (A).

Vehicle (A): SKF 8198Z

Vehicle (B): SLR 5529Y

Vehicle (C): SKS 3437Z



> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

#### Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

818E

#### Vehicle Details

Vehicle No.:

SKF8198Z

Vehicle to be Exported:

No

Intended Deregistration Date:

27 Oct 2020

Vehicle Make:

HYUNDAI

Vehicle Model:

VELOSTER FS 1.6 GDI DCT ABS D/AB SR 4DR

Primary Colour:

Orange

Manufacturing Year:

2012

Engine No.:

G4FDCU876874

Chassis No.:

KMHTC61DVCU081761

Maximum Power Output:

103.0 kW (138 bhp)

Open Market Value:

\$16,770.00

Original Registration Date:

07 Jul 2012

First Registration Date:

07 Jul 2012

Transfer Count:

0

Actual ARF Paid:

\$16,770.00

#### Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

06 Jul 2022

PARF Rebate Amount:

\$9,223.00

#### Intended COE Rebate Details

COE Expiry Date:

06 Jul 2022

COE Category:

A - Car (1600cc & below)

COE Period(Years):

10

QP Paid:

\$62,600.00

COE Rebate Amount:

\$10,586.00

Total Rebate Amount:

\$19,809.00

30/08/2012

\$ 7991.00

The information contained herein is correct as at 27 Oct 2020

OK



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Hyundai Veloster

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	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
<b>Search Selection</b>	<b>Hyundai Veloster</b>		Any	Any	<b>2012</b>	Any	Any	Any	<b>Available</b>
	Hyundai Veloster	1.6A GDI (New 10-yr COE)	\$69,888	\$6,980 /yr	08-May-2012	1,591 cc	129,000 km	Hatchback	Available
Low Mileage, Well Maintained, 100% Accident Free! Flexible Loan Available Welcome All Trade-In, Direct Sale, Consignment Unit. Call Or WhatsApp To View Now! Strictly By Appointment Only! 360 VR Cars Posted: 06-Sep-2020 Tags: 2012 Hyundai Veloster, Hyundai Veloster, Hyundai, Veloster									
	Hyundai Veloster	1.6A GDI	\$27,800	\$10,580 /yr	30-Aug-2012	1,591 cc	126,000 km	Hatchback	Available
Please Call For An Appointment, Check On Our Company's Reviews, No Gimmick Only Quality Cars! 100% Loan Approval With Low Interest Rate! Low Mileage Done At 15,000KM Yearly, Inclusive Of 6 Months Engine And Gearbox Warranty From Workshop, Road Tax T... Posted: 03-Oct-2020 Tags: 2012 Hyundai Veloster, Hyundai Veloster, Hyundai, Veloster									
	Hyundai Veloster	1.6A GDI	\$23,500	\$10,040 /yr	03-May-2012	1,591 cc	127,500 km	Hatchback	Available
100% Loan Available. Low Interest Rate. Trade In Welcomed. Interior And Exterior All Well Maintained And In Excellent Condition. 100% Accident Free. Posted: 10-Oct-2020 Tags: 2012 Hyundai Veloster, Hyundai Veloster, Hyundai, Veloster									

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Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
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