

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: _____

(Policy Condition)

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

N/S	O/S

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: GBD5769M yr Regn: 2014/ Dec
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or

Make: Citroen Dispatch c.c. 1997
 Colour: White A/C: Insured / Std / NI / NA
 Sp. Reading: 171014 T/Radio: Insured / Std / NI / NA
 Eng/No: _____

C/No: VF7XURHHA E 2011595Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 205/55R16CR: 205/55R16CBS / DUN / EXNOVA GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 06 mmR/Bal. 06 mmL/Bal. 06 mmL/Bal. 06 mmD.O.A. 30/10/20D.O.I. 03/11/20

Survey held at

NSIDes. 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

TP Budget DirectMV: 30KPV: 24KNett: 6K

Date/Time, File Pass to?

☐

Prel. Report

Days Of Repair: 2

1)

☐

Final Report

Resurvey No. of Trip: 1

Date/Time, File Return to?

30/11/20-Typist

Addl Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Insp. (\$

☐

Master copy (\$

Survey Fee:

Transportation:

S + P + S (\$

Photos

Other:

Report Form 4: TPLump Sum / LS: LS \$1400

P. 3/3

MSME20096486 / SME Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 02/11/2020 17:06
SUBMITTED BY: Chia Pei Ying

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	02/11/2020 17:06
Date Of Accident	30/10/2020 15:35
Exact Location Of Accident	ALONG BEDOK NORTH RD/ BARTLEY RD EAST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD5769M
Insured/Policyholder	
Name Of Registered Owner	JIA FOOD LOGISTICS PTE LTD
Co Reg No	2XXXXX643Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-94716633

Vehicle Particulars

Manufacturer	CITROEN
Model	BERLINGO
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCHHQ20-000125
Cover Note Number	

Driver

Name of Driver	TAN TIAN HOCK
NRIC No	SXXXX588Z
Date Of Birth	10/10/1956
Occupation	OUTDOOR
Date Of Driving Pass	12/10/1974
Driving Experience	46 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84446633
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address BLK 327 ANG MO KIO AVE 3 #02-1964
 Postcode 560327
 Was driver an employee of the Insured's Company YES
 If No, Relationship of the Driver with the Insured
 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? 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) 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

ON ABOVE DATE AND TIME, I WAS DRIVING MY VEHICLE A (GBD5769M) TRAVELLING ALONG BEDOK NORTH ROAD TOWARDS BARTLEY ROAD EAST ON FIRST LANE OF A 2 LANES ROAD. MY VEHICLE WAS STATIONARY AT THE JUNCTION OF BARTLEY ROAD EAST WHILE WAITING FOR TRAFFIC LIGHT TO TURN GREEN. OUT OF SUDDEN, VEHICLE B (SMQ79E) CAME FROM REAR AND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE.

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 SMQ79E
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category PRIVATE CAR
 Name of Driver SEAH SEOW HAN
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)


Sketch Plan Pg. 1

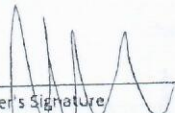
SKETCH PLAN**IMPORTANT NOTICE**

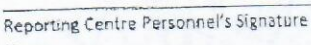
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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.

X

 Policyholder's Signature
 Date & Time: 2/11/20

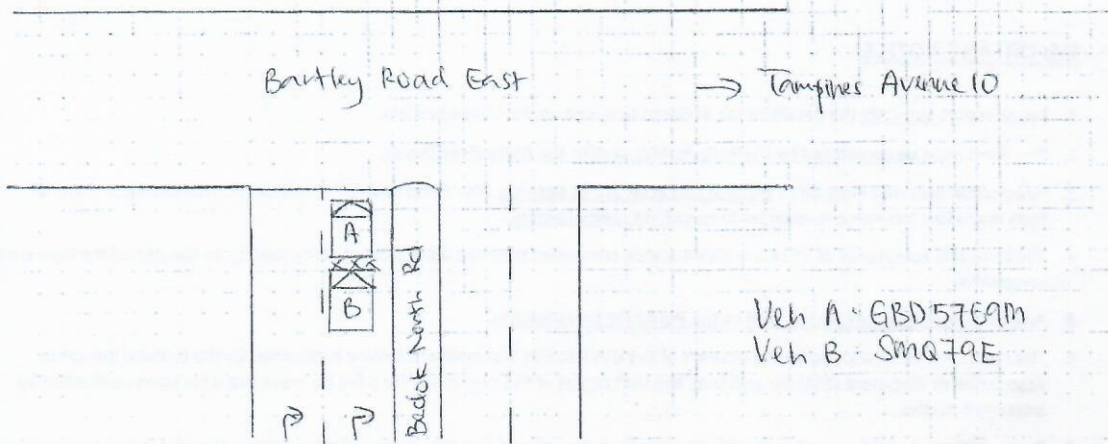

 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:


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

N51

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On above date & time, I was driving my vehicle A (GBD5769M) traveling along Bedok North Road towards Bartley Road East on first lane of a 2-lanes road. My vehicle was stationary at the junction of Bartley Road East while waiting traffic light to turn green. Out of sudden, vehicle B (SMQ79E) came from rear and collided onto the rear portion of my vehicle.

DECLARATION

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

X

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

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	643Z
Vehicle Details	
Vehicle No.:	GBD5769M
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Nov 2020
Vehicle Make:	CITROEN
Vehicle Model:	DISPATCH 2.0I HDI AT
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	10WAPH0400705
Chassis No.:	VF7XURHHAEZ011595
Maximum Power Output:	-
Open Market Value:	\$27,805.00
Original Registration Date:	17 Dec 2014
First Registration Date:	17 Dec 2014
Transfer Count:	1
Actual ARF Paid:	\$1,391.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	16 Dec 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$57,389.00
COE Rebate Amount:	\$23,966.00
Total Rebate Amount:	\$23,966.00

The information contained herein is correct as at 03 Nov 2020

OK



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dispatch

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	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	dispatch		Any	Any	Any	Any	Any	Any	Available
	Citroen	Dispatch 2.0M (COE till 11/2024)	\$18,800	\$4,650 /yr	18-Nov-2009	1,997 cc	-	Van	Available
Fuel Type: Diesel Auto Midas Certified Pre-Owned! Loan Available. Call Or Text Our Sale Consultant For More Information. Posted: 20-Oct-2020 Tags: 2009 Citroen Dispatch, Citroen Dispatch, Citroen, Dispatch									
	Citroen	Dispatch 2.0A	\$34,800	\$7,540 /yr	15-Jun-2015	1,997 cc	-	Van	Available
Fuel Type: Diesel Cheap And Affordable AUTO Van Here! Previous Owner Running Cafe Business, Low Maintenance And Fuel Efficiency. 3 Days Handover. Monthly Start From \$688! Full Loan Can Be Arrange. High Trade In Welcome. Call For Viewing Now. ABS Bus Pte Ltd Posted: 28-Oct-2020 Tags: 2015 Citroen Dispatch, Citroen Dispatch, Citroen, Dispatch									
	Citroen	Dispatch 2.0A	\$36,800	\$7,750 /yr	04-Aug-2015	1,997 cc	66,500 km	Van	Available
Fuel Type: Diesel Looking For A Vehicle With Good Fuel Consumption Vehicle? No Matter Which Engine You Go For, The Citroen Dispatch Offers Impressive Fuel Consumption For This Class. Try This Spacious Very Good Condition Citroen Dispatch 2.0A. Fuel Consumption At Only 17.5 Km/L. L... Motor-Way Credit Pte Ltd Posted: 06-Oct-2020 Tags: 2015 Citroen Dispatch, Citroen Dispatch, Citroen, Dispatch									

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