

ASS. REC. BY: Stere

REF: CS3/A16 2001 2035/Eyd3

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TR / WS / TP RES / OD RES / EVA / INV / MY
 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
 SIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Cum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SL2 54072 Yr Regn: 79/10/38
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Honda Civic c.c. 1799
 Colour: Black A/C: Insured / Std / Nil
 Sp. Reading: 274107 T/Radio: Insured / Std / Nil
 Eng/No: _____
 C/No: JHMFD16394529246
 Gen. Cond: Good Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modl: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 205/55R4
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front Rear
 R/Bal. 5 mm R/Bal. 5 mm
 L/Bal. 5 mm L/Bal. 5 mm
 D.O.A. 30/10/20 D.O.I. 4/11/20
 Survey held at PKCIR Auto
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear LH
 The U/C / Chassis frame / Body Structure affected due to collision

Date / Time Action / Instruction

MV-20K

SUBMIT DAR

Date/Time, File Pass to? ☐ : Prel. Report
☐ : Final Report

Date/Time, File Return to?

09/11/20 TYPIST

App. Formed:

Comp. Sum / U.C. / P.

DAR

Days Of Repair: 4

Resurvey No. of Trip: _____

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

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Condition (CON)

(01) Bent (2) Denied (3) Distorted (4) Cracked (5) Cut (6) Scratched
(07) Deformed (08) Shifted (09) Buckled (10) Broken (11) Necessary
(12) Missing (13) Torn (14) Unconfirmed (15) Not Working

MOTORCAR (Rear)

ACTION (AC)

(1) Replace (✓) (2) Repair (X) (3) Check (0)
(4) Not Consistent (N/C)

Aug 2005

Rear Portion

NAC	INC	Item	CON	AC	Qty
1137	993626	Rear Number Plate			
1138	993627	Rear Number Plate Base			
1139	993630	Rear Number Plate Garnish			
1140	993632	Rear Number Plate Lamp			
1141	992958	Rear Bumper	DD	✓	
1142	993085	Rear Bumper Upper			
1143	993017	Rear Bumper Lower			
1144	993054	Rear Bumper Side			
1145	993103	Rear Bumper Tow Cover			
1146	992341	Rear Bumper Clips	N/C	✓	
1147	992976	Rear Bumper Bracket			
1148	993068	Rear Bumper Side Retainer	LR	✓	
1149	993045	Rear Bumper Reinforcement			
1150	992970	Rear Bumper Beam			
1151	993077	Rear Bumper Sponge			
1152	992999	Rear Bumper Damper			
1153	993040	Rear Bumper Protector			
1154	993036	Rear Bumper Pad			
1155	993026	Rear Bumper Moulding			
1156	993044	Rear Bumper Reflector			
1157	993023	Rear Bumper Lower Spoiler			
1158	994023	Reverse Sensor	LR	✓	
1159	993327	Rear End Panel		R	
1160	993339	Rear End Panel Top Garnish			
1161	993333	Rear End Panel Inner Trim			
1162	990333	Boot Compartment Inner Trim			
1163	993851	Rear LH Taillamp	CUT	✓	
1164	993853	Rear LH Taillamp Garnish			
1165	993859	Rear LH Taillamp Panel			
1166	995116	Rear RH Taillamp			
1167	993853	Rear RH Taillamp Garnish			
1168	993859	Rear RH Taillamp Panel			
1169	993554	Rear Apron Panel			
1170	992895	Bootlid	DD	✓	
1171	991328	Bootlid Emblem	N/C	✓	
1172	990356	Bootlid Handle			
1173	995250	Bootlid Moulding			
1174	990376	Bootlid Reflector			
1175	995222	Bootlid Lamp LH	CUT	✓	
1176	992899	Bootlid Lamp RH			
1177	995243	Bootlid Lock	BT	✓	
1178	990377	Bootlid Rubber			
1179	990382	Bootlid Hinge			
1180	993877	Bootlid Spoiler			
1181	994543	Tailgate			
1182	991328	Tailgate Emblem			
1183	994643	Tailgate Outer Handle			
1184	994640	Tailgate Moulding			
1185	994545	Tailgate Garnish			
1186	994648	Tailgate Reflector			
1187	994549	Tailgate Lamp			
1188	994646	Tailgate Protector			
1189	994676	Tailgate Wiper Arm			
1190	994677	Tailgate Wiper Blade			
1191	994679	Tailgate Wiper Nozzle			
1192	994555	Tailgate Wiper Motor			
1193	994602	Tailgate Glass			
1194	994606	Tailgate Glass Rubber			
1195	994604	Tailgate Glass Moulding			
1196	994607	Tailgate Glass Sealant			
1197	994629	Tailgate Lock			
1198	994651	Tailgate Rubber			
1199	994611	Tailgate Hinge			
1200	994594	Tailgate Damper			

Vehicle No:

SL2 54972

NAC	INC	Item	CON	AC	Qty
1202	993784	Spare Tyre Board			
1203	994328	Spare Tyre Panel			
1204	995065	Spare Tyre			
1205	994326	Spare Tyre Lock Screw			
1206	993787	Spare Tyre Cover			
1207	995323	Triangle Breakdown Sign			
1208	990507	CD Changer Assy			
1209	990164	Antenna			
1210	990534	Centre Exhaust Pipe Assy			
1211	990532	Centre Exhaust Mounting			
1212	993364	Rear Exhaust Pipe			
1213	993357	Rear Exhaust Chrome Pipe			
1214	993361	Rear Exhaust Mounting			
1215	993358	Rear Exhaust Heat Shield			
1216	995223	Rear LH Chassis Member			
1217	993165	Rear RH Chassis Member			
1218	993436	Rear LH Fender			
1219	993449	Rear LH Fender Protector			
1220	993420	Rear LH Fender Inner Panel			
1221	993431	Rear LH Fender Inner Trim			
1222	993415	Rear LH Fender Inner Garnish			
1223	993425	Rear LH Fender Inner Shield			
1224	993621	Rear LH Mudflap			
1225	993933	Rear LH Wheel Rim			
1226	994025	Rear LH Rim Cover			
1227	995065	Rear LH Tyre			
1228	993456	Rear RH Fender			
1229	993450	Rear RH Fender Protector			
1230	993420	Rear RH Fender Inner Panel			
1231	993431	Rear RH Fender Inner Trim			
1232	993415	Rear RH Fender Inner Garnish			
1233	993425	Rear RH Fender Inner Shield			
1234	993622	Rear RH Mudflap			
1235	993934	Rear RH Wheel Rim			
1236	994025	Rear RH Rim Cover			
1237	995065	Rear RH Tyre			
1238	995162	Rear Fender Extension Panel LH			
1239	993491	Rear Fender Extension Panel RH			
1240	993430	Rear Fender Inner Top Garnish			
1241	993673	Rear Fender 1/4 Glass			
1242	993452	Rear Fender 1/4 Glass Rubber			
1243	993453	Rear Fender 1/4 Glass Sealant			
1244	993949	Rear Windscreen Glass			
1245	993976	Rear Windscreen Rubber			
1246	993961	Rear Windscreen Moulding			
1247	993955	Rear Windscreen Sealant			
1248	994729	Third Brake Light			
1249	993385	Rear Fender Air Grille			
1250	992167	Fuel Lid			
1251	992168	Fuel Neck			
1252	992179	Fuel Tank			
1253	992184	Fuel Tank Bracket			
1254	992191	Fuel Tank Float			
1255	990247	Sticker			

4 rep days

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 16:42
Date Of Accident	30/10/2020 19:55
Exact Location Of Accident	PIE TOWARDS SIMS AVE
Country/State Of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ5407Z
Insured/Policyholder	
Name Of Registered Owner	PRECISE CAR RENTAL PTE LTD
Co Reg No	2XXXXX221G
Email Address	SUPPORT@PRECISEAUTO.SG
Mobile Phone No	(LOCAL) +65-94897930
Alternative Phone No	OFFICE-94897930

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE HIRER 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 HIRE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	VFX/P2324520
Cover Note Number	

Driver

Name of Driver	MUZHAFAR BIN MAZLAN
NRIC No	SXXXX819G
Date Of Birth	20/09/1993
Occupation	OUTDOOR
Date Of Driving Pass	28/10/2014
Driving Experience	6 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88149570

Fax Number

Contact Number

E Mail Address

SUPPORT@PRECISEAUTO.SG

NRIC/Passport N
Contact Num
Address
Postco
Insu

Address APT BLK 121A EDGEDALE PLAINS #13-213
Postcode 821121
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OTHER - HIRER
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) 3

Passenger 1

NAME: : MR WONG
GENDER: : MALE

Passenger 2

NAME: : UNKNOWN
GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name

BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-2449999 - FAX NO: 62447258

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED

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 II

Vehicle Registration Number SJY8330U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

91380915

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

MUZHAFAR BIN MAZLAN

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLZ5407Z

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 ~~exactly~~ the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized 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:

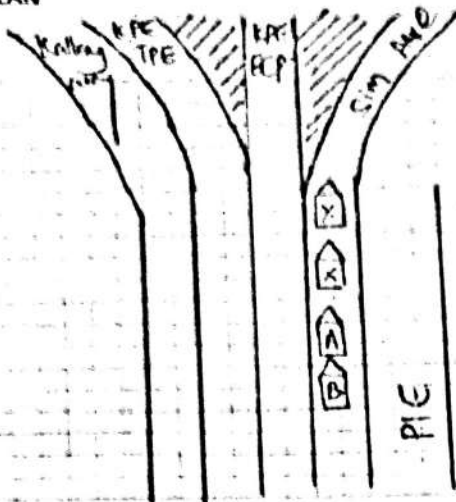
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Sketch Plan #2

SKETCH PLAN



(A) SL2 54072

(B) SJY 83304

Along AE Towards Sims
Ald

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Statement Please Refer To
Police Report No: T/20201031/2024

DECLARATION

I/We hereby declare that 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
NRIC/FIN No.



**SINGAPORE
POLICE FORCE**



T/20201031/2004

1 of 3

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20201031/2004

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/10/2020 00:39		Vide Report No.:		Station Diary No.: 9
Informant's Particulars				
Name of Informant: MUZHAFAR BIN MAZLAN		Address: APT BLK 121A EDGEDALE PLAINS #13-213 SINGAPORE 821121		
ID Type / ID No.: NRIC NO / S9333819G		Contact No.: Home/Office: Mobile: 88149570		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 27	Date of Birth: 20/09/1993	Type of Informant: Driver	
Race: Malay		Language:	Institution / School Name:	
Occupation: GRAB DRIVER		Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 30/10/2020 19:55	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear	Road Surface: Dry		Road Speed Limit: 90 Km/h	
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SJY8330U	Car				Slightly Damaged	0
SLZ5407Z	Car				Slightly Damaged	2

Details of Person Involved

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

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20201031/2004

3 of 3

Report No. T/20201031/2004

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469070
Tel No: 1800-2449999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
G /
Sgt 3 MUHAMMAD FIKRI BIN MOHD FADIL

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
Sr Staff Sgt ONG YONG HOCK
Contact No.: 65476436

Authentication Stamp
NP168

Signature Of Informant: .

Date/Time:
31/10/2020 00:39

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20201031/2004

2 of 3

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469678
Tel No: 1800-2449999

Report No. T/20201031/2004

CONTINUATION OF REPORT

Driver:			
Name	RAVICHANDRAN SUBRAMANIAN	ID No.	S6861737E
Related Vehicle	SJY8330U (Car)	Contact No.	91380915
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver:			
Name	MUZHAFFAR BIN MAZLAN	ID No.	S9333819G
Related Vehicle	SLZ5407Z (Car)	Contact No.	88149570
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	30/10/2020	Date Discharge	30/10/2020
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

On the 30/10/2020 at 1955hrs, I was driving my vehicle bearing plate number SLZ5407Z with two passengers along PIE exit towards Sims Avenue as I am working as a Grab Driver. The traffic was heavy thus I stopped my vehicle. Out of a sudden, I felt an impact on my rear end of my car followed by a loud thud. My car moved forward however I did not collide with the car in front. I checked my vehicle and discover a CHR Toyota bearing plate number SJY8330U had collided with my car.

My car sustained damage in the rear bumper. The bumper left side had cracked and had come off abit. There was also scratches on the left rear of my bumper. After the accident I have suffered pain in my neck, and shoulder area. My back was also in pain. With the injuries I suffered I went to Changi General Hospital to get my injuries checked. The doctor gave me 4 days MC.

I wish to add that it was not raining, the road surface is dry. There was no conveyance by ambulance. No other party is involved in the accident. No government property damaged. I checked with both my passengers and were informed that they are fine however I am not sure if they had went to hospital or not.