ASSIGNMENT

From Date: - Estimated Cost:	Veh No: SLE2979U TRegn: 2016, Fuly
AT ANY OF A STATE OF THE STATE	Type: wi.Car/ Mi.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No:	Truck / Trailer or
Williams and the Management of the Control of the C	Make: Harder Verel G.G 1496
at Workshop m/s	Colour While - A/C: Insured/Std/NI/NA
of	Sp.Reading 81723 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: RUIHIS107 .
Claims No.	Gen. Cond Good / Pair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil S/Rim STD A/Rim or
	OT DIVIDITION
(Policy Condition)	
Remark: The veh had commenced its N/S O/S	
repair at the time of inspection.	BS/DUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/ TOYO/YOKO or
Bal. or Market Value:	
IDAC Accident Rport: Consistent? : Yes or No	Front Rear R/Bal. & Prop. R/Rel &
GIA / PR Seen: Consistent? : Yes or No	mm Nobal.
Est. Repairs: days Res.: Yes or No	mm Coda.
Lum Sum: % 3 Val.: Yes or No	D.O.A. D.O.I. 05/11/20
Lum Sum. 76 S Val. Tes of No	Survey held at Hua Mery,
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / WS (WC) / Rooftop or
Vehicle: IN / OUT Date: Person Contacted:	The III/O I OI
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
78111	
mv : 55	
PV: 39.1K.	
Nett: 159K	
Dale/Time, File Pass Iu? : Preli. Report [ays Of Repair:
	esurvey No. of Trip: Survey Fee:
Date/Time. File Potention	Transportation
and Fee:	: Site Insp (\$)s+Pssi
	: Interview (3 ; Phone
Pepod Folius :	: Tech, Inv. G silver.
Emily Sun (Electric)	(Maples) of

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 witholding 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	03/11/2020 16:00
Date Of Accident	02/11/2020 00:15
Exact Location Of Accident	PIONEER CIRCLE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLE2979U
Insured/Policyholder	
Name Of Registered Owner	SHO YEE HENG
NRIC No	SXXXX009B
Email Address	SHOYEEHENG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97881267
Alternative Phone No	OFFICE-97881267
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at ime of accident	
Are you claiming under your own insurance policy or repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
/ehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5118208080
Cover Note Number	
Driver	
Name of Driver	SHO YEE HENG
NRIC No	SXXXX009B
Date Of Birth	10/08/1969
Occupation	OUTDOOR
Date Of Driving Pass	05/01/1991
Oriving Experience	29 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97881267
ax Number	
Contact Number	OFFICE-97881267

SHOYEEHENG@GMAIL.COM

Address

NA NA

Postcode

NA

Insurance Company Name

Nature Of Damage

NA

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

SHO YEE HENG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLE2979U

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

BLK 412 TAMPINES ST 41 #12-271

Address Postcode

Individual Statement Pg. 1

	SKETCH PLAN	111111111111		
				4111
		111/11/11		1111
vanicle A.				
SUE 2979 V		MAX		
venicle B.				
HC2533E				
	FITTHE			
	DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT		1111
	Refer to police		*	
	10 to pointe	Toport	,	
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				and later.
	ARATION		(3 * KAN)	
I/We d	eclare the foregoing particular	s are true in every respect.	NAW KS NOON NAW NAW NAW NAW NAW NAW NAW NAW NAW NA	
4			94010M 2Hz	
Policyho	older's Signature	Driver's Signature	Reporting Centre Personnel's Signatur	P
Date & T	ime: 031120	(If driver is not the policyholder)	Name:	
and the same	150 ha.	Date & Time: 031120	NRIC/FIN No.:	

POLICE REPORT Pg. 1





Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 2 of 3 Report No. T/20201102/2009

Tel No: 1800-4849999

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLE2979U	NTUC Income Insurance Co-Operative Limited	5118208080	21/07/2020	

CONTINUATION OF REPORT

Details of Perso				A ALAS		
Any Pedestrian I	nvolved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver						
Name	SHO YEE HENG		ID No		S6925009B	
Related Vehicle	SLE2979U (Car)			Contact No.		97881267
Hospital/Clinic	Internedical 24hrs Clinic			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL
Date Treatment	02/11/2020		Date Disch	charge 02/11		/2020
No. of Days granted Medical Leave 04		04	Degree of	of Injury Slight		

Brief Details.

On 02/11/2020 at about 0010hrs, I was driving my car bearing registration number SLE2979U on the right most lane along Pioneer Road turning into Pioneer Circus Roundabout.

I then checked for traffic and when the traffic was clear, I then proceed to turn into the roundabout. When I wanted to exit the roundabout, I signaled left however before I even exit the roundabout, one taxi bearing registration number SHC2533E collided onto the left portion of my vehicle.

Due to the collision, the left portion of my vehicle was dented and there were scratches from the rear to the front portion of the car. My left side mirror was also bent forward due to the impact.

There was no injuries earlier on hence we proceed to exchange particulars and drove off.

Traffic police also attended to the case however no further follow up was carried out.

Subsequently, I then felt unwell and felt pain on my neck and my back. I then visited Intermedical 24Hr Clinic and was given a 4 days MC.

I also have an in car built camera that could be used to aid the investigation.

I am lodging this report for police investigation and insurance claim.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	009B
Vehicle Details	Parallel San
Vehicle No.:	SLE2979U
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Nov 2020
Vehicle Make:	HONDA
Vehicle Model:	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	L15B4035114
Chassis No.:	RU11115107
Maximum Power Output:	96.0 kW (128 bhp)
Open Market Value:	\$20,973.00
Original Registration Date:	15 Jul 2016
First Registration Date:	15 Jul 2016
Transfer Count:	0
Actual ARF Paid:	\$11,363.00
Intended PARE Rebate Details	中国企业的企业企业的企业企业企业企业企业企业企业企业企业企业企业企业企业企业企业企
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Jul 2026
PARF Rebate Amount:	\$8,522.00
Intended COE Rebate Details	
COE Expiry Date:	14 Jul 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$53,694.00
COE Rebate Amount:	\$30,556.00
Total Rebate Amount:	\$39,078.00

The information contained herein is correct as at 05 Nov 2020

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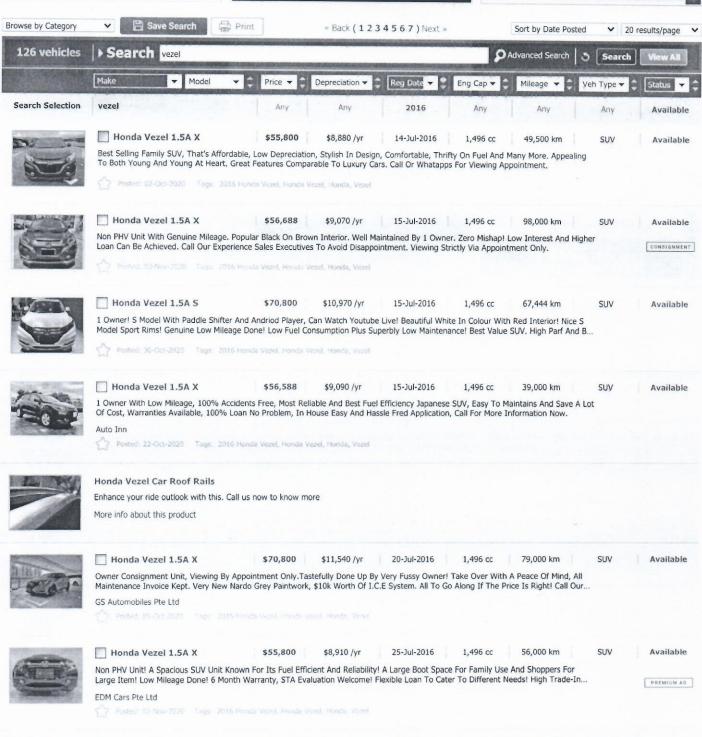




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25-Jul-2016

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