

CS/AG120012157/Act3

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. C10007828 JM

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SG48535B yr Regn: 2006 MayType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Estima C.C. 2362Colour: Black A/C: Insured / Std / NI / NASp. Reading: 297163 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ACR50705909Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 225/55R17R: 225/55R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Dayton

Front

Rear

R/Bal. 06 mmR/Bal. 06 mmL/Bal. 06 mmL/Bal. 06 mm

D.O.A.

D.O.I. 06/11/20Survey 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

4/4/21 TP Budget Direct COE Expiry: 23/05/26
Adrian confirmed LS \$7300 and 6 days with repairer. (Red 8373.73, 53%)

MV: 40K
PV: 25.5K
Nett: 14.5K

5932

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: 6

1)

☒ : Final ReportResurvey No. of Trip: 2

Date/Time, File Return to?

2)

Aridl Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Insp. (\$)☐ : Meal and (\$)

Survey Fee:

Transportation:

S + PS \$1

Phone:

Other:

Total:

Report Format:

TP

Lump Sum / L.P. \$ LS \$7300

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 15:59
Date Of Accident	31/10/2020 10:10
Exact Location Of Accident	TAMPINES AVE 1
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGG8535B
Insured/Policyholder	
Name Of Registered Owner	88 MOTOR TRADING
Co Reg No	5XXXX516D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63339441
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ESTIMA
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5040107636-10
Cover Note Number	
Driver	
Name of Driver	WONG JIAN FA
NRIC No	SXXXX834A
Date Of Birth	10/02/1985
Occupation	OUTDOOR
Date Of Driving Pass	05/07/2012
Driving Experience	8 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93505858
Fax Number	
Contact Number	OFFICE-93505858
Email Address	NOEMAIL

Address	BLK 915 TAMPINES STREET 91 #05-45
Postcode	520915
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 - CHANGE/CROSS LANE
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TAMPINES NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 6 TAMPINES AVE 4 , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5871999 - FAX NO: 65871699
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20201102/2001.

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	SJC5816X
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 WONG JIAN FA

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? SGG8535B

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Accident 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.

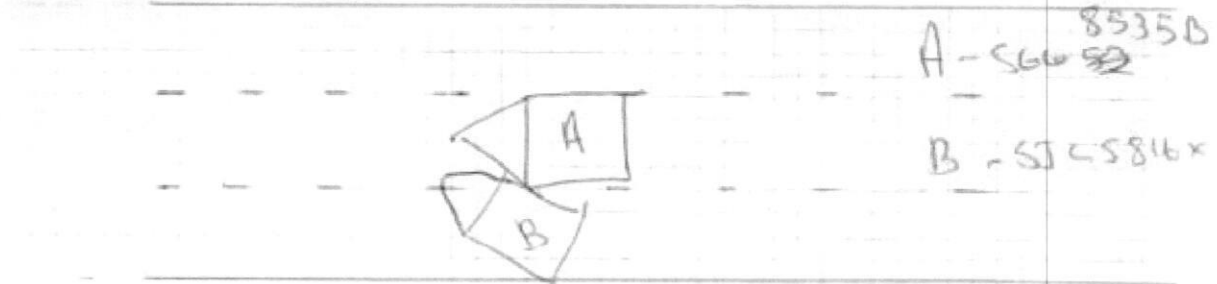
88 MOTOR TRADING
ROC: 53143516D
X 200 Jalan Sultan #02-38
Textile Centre Singapore 199018
Tel 63339441 Fax 68832418
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On above date & time, I was driving my vehicle A (SG685350)

As per police Report

Report No: T/2020/102 / 2001

DECLARATION

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

88 MOTOR TRADING
 ROC: 53143516D
 200 Jalan Sultan #02-38
 Textile Centre Singapore 199018
 Tel 63339441 Fax 68832418

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

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20201102/2001

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

1 of 3

Report No. T/20201102/2001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/11/2020 00:27	Vide Report No.:	Station Diary No.: 14
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Informant's Particulars

Name of Informant: WONG JIAN FA			Address: APT BLK 915 TAMPINES STREET 91 #05-45 SINGAPORE 520915		
ID Type / ID No.: NRIC NO / S8504834A			Contact No.: Home/Office:		Mobile: 93505858
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 35	Date of Birth: 10/02/1985	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Retail/Shop sales manager			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 31/10/2020 10:10	Type of Location: Straight Road
Location: TAMPINES AVENUE 1				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGG8535B	Car	TOYOTA	WISH 1.8 A	Grey	Slightly Damaged	0
SJC5816X	Car	TOYOTA	ESTIMA AERAS 2.4 A	Black	Slightly Damaged	0

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20201102/2001

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

2 of 3

Report No. T/20201102/2001

CONTINUATION OF REPORT

Driver			
Name	WONG JIAN FA	ID No.	S8504834A
Related Vehicle	SGG8535B (Car)	Contact No.	93505858
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	01/11/2020	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On the 31st of October 2020 at about 1011hrs, I was travelling along Tampines Avenue 1, in my vehicle bearing plate number SGG8535B. I was travelling on the centre lane, near the bus stop of The Tropica condominium when suddenly a vehicle bearing plate number SJC5816X from the extreme left lane tried to overtake into my lane and collided into the right portion of my vehicle.

My vehicle had some dents near the left front tyre and some scratches on the left portion of the vehicle. The other party also had some dents and scratches on its right portion of its vehicle.

The driver of SJC5816X is namely Wong Tze Wen, S7582734B hp no: 98227632.

I do not have any in-car camera installed however the other party does.

On the 1st of November 2020, I went to Mount Alvernia Hospital as I had dizziness, left neck pain, right wrist pain and right chest pain. I was given 5 days MC (M20000051112) from 1/11/2020 to 5/11/2020.

Police Report



**SINGAPORE
POLICE FORCE**



T/20201102/2001

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

3 of 3

Report No. T/20201102/2001

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 SITI NUR SYAFIQAH BINTE AZMAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTE AHMAD

Contact No.: 65476219

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

02/11/2020 00:27

Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	593Z
Vehicle Details	
Vehicle No.:	SGG8535B
Vehicle to be Exported:	No
Intended Deregistration Date:	09 Nov 2020
Vehicle Make:	TOYOTA
Vehicle Model:	ESTIMA AERAS 2.4 A
Primary Colour:	Black
Manufacturing Year:	2006
Engine No.:	2AZC045332
Chassis No.:	ACR507025907
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	\$32,714.00
Original Registration Date:	24 May 2006
First Registration Date:	24 May 2006
Transfer Count:	0
Actual ARF Paid:	\$35,986.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	23 May 2026
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$46,048.00
COE Rebate Amount:	\$25,499.00
Total Rebate Amount:	\$25,499.00

The information contained herein is correct as at 09 Nov 2020

OK



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Advanced Search

Used Car Comparison

--- Comparing 4 Vehicles ---

Toyota Estima 2.4A Aeras (COE till 05/2026)


Clear All

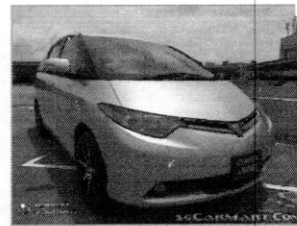
Add all to Shortlist

Back to search result

Add to Shortlist

Toyota Estima 2.4A Aeras Moonroof (COE till 05/2026)


Add to Shortlist

Toyota Estima 2.4A (COE till 03/2027)


Add to Shortlist

Toyota Estima 2.4A (COE till 04/2027)


Add to Shortlist

CAR DETAILS

Price	\$39,800	\$44,800	\$50,800	\$57,800
Instalment	N.A.	N.A.	N.A.	N.A.
Registration Date	24-May-2006	03-Jan-2007	30-Mar-2007	11-Apr-2007
Manufactured	2006	2006	2006	2007
Mileage	-	156,923 km	-	-
Transmission	Auto	Auto	Auto	Auto
Engine Cap	2,362 cc	2,362 cc	2,362 cc	2,362 cc
Road Tax	\$2,293 /yr	\$2,129 /yr	\$2,129 /yr	\$2,129 /yr
Power	125.0 kW (167 bhp)	125.0 kW (167 bhp)	125.0 kW (167 bhp)	125.0 kW (167 bhp)
Curb Weight	1,730 kg	1,730 kg	1,700 kg	1,710 kg
Features	2.4L DOHC Reliable VVT-i Engine, 7 Speed Automatic Transmission, ABS, Dual Zone Climatic Aircon, Keyless Entry/Start, Electric Driver Seat.	Powerful 2.4L DOHC VVT-i Engine, Push Start, Keyless Entry, ABS, Airbags, Dual Auto Power Sliding Door.	2.4L DOHC Reliable VVT-i Engine, 7 Speed Automatic Transmission, ABS, Dual Zone Climatic Aircon, Keyless Entry/Start, Electric Driver Seat.	Estima 8 Seaters, Powerful MPV, Spacious Interior.
Accessories	Keyless Entry, Cruise Control, Twin Power Door, Leather Seats, DVD Player, Reverse Camera.	Luxurious Interior. Customized Leather Seats, Sports Rims, Pioneer Sound System With Reverse Camera. Digital Climatic Control. Keyless Entry.	Leather Seats, Upgraded Deep Dish Rims Almost New Tyre, Pioneer DVD, Reverse Sensors, 8 Seater.	Option For Nego: Customized Leather Seats, 8 Seater, 12 Months More To Drive.
Description	Full Loan Available! We Are sgCarMart Premium Dealer! Buy With Confidence! In House Loan Or Bank Loan Available! Fast And Easy Loan Approval! All Our Vehicles Has Undergone A 120 Points Check At Top Gear Motor Works! Peace Of Mind! Accident-Free! No Worries! Warranty Provided By Top Gear Motor Works! Open Daily Including Weekends And Public Holiday!	Best Unit. Elegant Metallic Grey. High Spec 'Aeras' Edition With Twin Power Sliding Doors And Twin Roof. Super Well Maintained. Free Extended Warranty. Car Available. Must View. Up To 100% Flexible Loan Available. We Provide Lowest Interest Rate. Flexible Loan And High Trade In Are Available. Package With Unrivaled Warranty. Meet Our Friendly Consultant For A Non Obligation Advise. \$3000 Drive Away Package.	Just Inspected. Certify Good Condition With Extended Warranty. 100% Accident Free. Don't Miss It. Car Available. View Now! Up To 100% Flexible Loan. We Provide Lowest Interest Rate. Flexible Loan And High Trade In Are Available. Package With Unrivaled Warranty. Complete With Certificate And Test Report. Meet Our Friendly Consultant For A Non Obligation Advise.	8 Seaters, High Load Capacity. Call For Viewing. In House Loan Available.
COE	\$46,048	\$46,048	\$50,347	\$52,008
OMV	\$32,714	\$32,811	\$26,775	\$26,477
ARF	\$35,986	\$36,093	\$29,453	\$29,125
Depreciation	\$7,190 /yr	\$8,060 /yr	\$7,950 /yr	\$9,000 /yr
No. of Owners	1	4	6	3
Type of Vehicle	MPV	MPV	MPV	MPV
Category	COE Car	COE Car	COE Car	COE Car
Availability	Available	Available	Available	Available
Remarks				