

ASS. REC. BY: Sun Pin

REF:

CS3/LPC20012247/Qvf3

## 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. \_\_\_\_\_

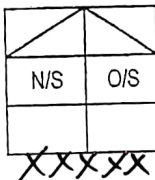
Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

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:

XP1698AYr Regn: 07/11/2007

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

ISUZU CY252LC.C. 15681

Colour

White.

A/C: Insured / Std / NI / NA

Sp. Reading

538314

T/Radio: Insured / Std / NI / NA

Eng/No:

-

C/No:

JALCY252L77000045

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F: 295/60 R 22.5R: 295/60 R 22.5

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

TOYO / YOKO or

Westlake

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

04/11/2020

D.O.I.

04/11/2026

Survey held at

Eng Hup Engineering

Des. 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

MV: 58,000PV: 22,896NV: 35,104

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2) 13/11/20-Typist

Rep. Format: PRS

Lump Sum / B.B. ( )

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	209H
<b>Vehicle Details</b>	
Vehicle No.:	XD1698A
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Nov 2020
Vehicle Make:	ISUZU
Vehicle Model:	CYZ52L
Primary Colour:	White
Manufacturing Year:	2007
Engine No.:	6WG1406607
Chassis No.:	JALCY52L77000095
Maximum Power Output:	-
Open Market Value:	\$81,016.00
Original Registration Date:	07 Nov 2007
First Registration Date:	07 Nov 2007
Transfer Count:	1
Actual ARF Paid:	\$0.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	31 Jul 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$34,070.00
COE Rebate Amount:	\$22,896.00
<b>Total Rebate Amount:</b>	<b>\$22,896.00</b>

The information contained herein is correct as at 11 Nov 2020

OK

## 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	04/11/2020 15:25
Date Of Accident	04/11/2020 03:20
Exact Location Of Accident	AYER RAJAH EXPRESSWAYAYE TOWARDS MCE LPY38
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD1698A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ENG HUP ENGINEERING PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-84510172

### Vehicle Particulars

Manufacturer	ISUZU
Model	CYZ52K-15.7 D (M)

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 MOBILE EQUIPMENT

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO

Policy Number

Cover Note Number

### Driver

Name of Driver	ARUMUGAM VEERAPPAN
Passport No/FIN	GXXXX195N
Date Of Birth	12/02/1975
Occupation	OUTDOOR
Date Of Driving Pass	22/03/2014
Driving Experience	6 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84510172
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address BLK506, SUNGEI TENGAH LODGE,#07-56  
 Postcode 698924  
 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 RAINING  
 Road Surface WET

#### Other Information

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles (including own vehicle) involved in the accident 1  
 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? YES  
 If Yes, Please state which Police Station  
 Police Station Name THOMSON NPP 25 SIN MING ROAD  
 Police Station Address ROAD: 25 SIN MING ROAD #01-180 , POSTCODE: 570025 , COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: - FAX NO:  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

REFER TO SKETCH PLAN

#### 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 YP4570P  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver ALI HASSAN  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage

No. Of Passenger (Including Driver)

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C

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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#### 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:

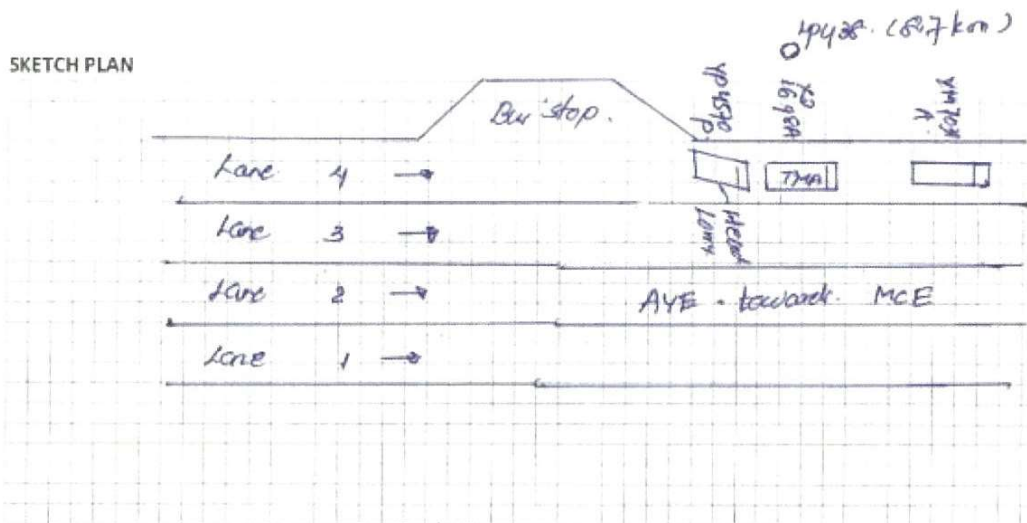
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

CITY AUTO PTE LTD  
Blk 8 Sin Ming Road  
#01-53/50/52 Sin Ming Ind Est  
Singapore 575643  
Tel: 6453 1235 Fax: 6453 7944  
(Claims Section)

### Accident Sketch Plan

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 04/11/2020, I Arumugam VEEYAPPAN, 67884195 N, was driving TMA KD 1698A and were working location at AYE tower. MCE near 5.7km Lamp post 438, At the time we are closing lane 4 and shoulder lane and After job had completed, we make a u-turn to keep our signage and cones. So I heard sound bang on my TMA rear portion. So I came down saw Long YP4570P hit my TMA rear portion and resulted my TMA badly damaged. and This accident happened. Times is 03.19 am.

## DECLARATION

I hereby declare foregoing particulars are true in every respect.



Policyholder Signature  
Date & Time:

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

~~CITY AUTO PTE LTD~~

Blk 8 Sin Ming Road.  
#01-58/60/62 Sin Ming Ind Est  
Singapore 575643  
Tel: 6453 1235 Fax: 6453 7944  
(Claims Section)

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





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**JNZ Car Alliance StarAd**



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A PEACE OF MIND

**HOTLINE: 6741 9997** [view our cars](#)

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2 vehicles

Isuzu CYZ52L

Advanced Search

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Isuzu CYZ52L	Any	Any	Any	Any	Any	Any	Available
	Isuzu CYZ52L (COE till 09/2023)	\$35,000	\$12,400 /yr	08-Sep-2008	15,681 cc	-	Truck	Available
	Fuel Type: Diesel							<a href="#">DIRECT OWNER</a>
	Posted: 02-Nov-2020	Tags: 2008 Isuzu CYZ52L, Isuzu CYZ52L, Isuzu, CYZ52L						
	Isuzu CYZ52L (COE till 11/2028)	\$65,800	\$8,230 /yr	08-Nov-2008	15,681 cc	-	Truck	Available
	Fuel Type: Diesel							
	COE Till 11/2028, Well Kept. In House Loan Available. Trade In Welcome.							
	Posted: 07-Oct-2020	Tags: 2008 Isuzu CYZ52L, Isuzu CYZ52L, Isuzu, CYZ52L						

Save this search criteria, to get email alerts whenever a match is found.

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
For old advertisements, view <a href="#">Expired ads</a>								
20 results/page								

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