ASS. REC. BY: CS3 MSG 20	10/2866/Ritol3 502B
The state of the s	CHMENT
From: Date:	Veh No: SGN 8801X YI Regn: 2016 Juny
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD I PIWS ITP RES I OD RES I EVA I INV I MV	Truck / Trailer or
To Inspect Vehicle No: SAN 8801 /	Make: Citruston apomo CY MCASSOFG.c 1560
at Workshop m/s	Colour BROWN AC: Insured / Std / NI / NA
of lool, But morath in 3	Sp.Reading 42616 T/Radio: Insured / Std / MI / NA
Insured: MSL4	Eng/No:
Pollcy No.	C/No: UF 73 A BHZTG J 6431-85.
Claims No.	Gen. Cond: Good / Falls / Poor / Burnt
Sum Insured: Excess:	Steering: Morde / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Gorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
<b>N</b>	Tyre Size: F: 205/60R15
(Policy Condition)	R: 4 -
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MICH OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or .
Bal. or Market Value: 51K	Fron! Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	UBal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 87 11 2020 D.O.I. 24/11/2020
Lum Sum: % 3 Val.: Yes or No	Survey held at Han Call
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN/OU	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time   Action / Instruction	
ESTIMATE REPAIR RANGE /NO. UT	days - (2K-3K) /4 days
Callende Marie Engle   1-0-01	and the property
SUBMIT PRS REPORT	
· All	,
Dale/Time, File Pass to? : Preff. Report	Days Of Repair: 4
:) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	. Transportation:
2) Add I	Fee:: Site Insp (\$)s+Rssi
	: Interview (\$) Photos
Rept Formal:	:Tech, Invs (\$ ) Others
Lunsp Sum/LEJ: (\$)	: Weel:end (%
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### 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 <u>truthful and accurate</u> 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
 09/11/2020 14:27

 Date Of Accident
 07/11/2020 15:05

 Exact Location Of Accident
 CLEMENTI AVE 2

 Country/State of Loss
 SINGAPORE

A CONTRACTOR OF THE PROPERTY O

Vehicle Registration Number SGN8801X

Insured/Policyholder

Name Of Registered Owner GOH KEH SHENG

NRIC No SXXXX502B

Email Address JASEGOH@YAHOO.COM

Mobile Phone No (LOCAL) +65-91180996

Alternative Phone No HOME-68733235

Vehicle Particulars

Manufacturer CITROEN

Model GRAND C4 PICASSO 1.6 BLUE HDI EAT6

Exact Purpose for which vehicle was being used at time of accident

time of accident

LEISURE PERSONAL 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 CAR

**Insurance Company** 

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE, LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 2100475618

Cover Note Number

Driver

Name of Driver GOH KEH SHENG

 NRIC No
 SXXXX502B

 Date Of Birth
 07/07/1973

 Occupation
 INDOOR

 Date Of Driving Pass
 21/04/1994

Driving Experience 26 YEARS AND 6 MONTHS

Gender MA

Mobile Number (LOCAL) +65-91180996

Fax Number

Contact Number HOME-68733235

EMail Address JASEGOH@YAHOO.COM

Address

10 DOVER RISE #06-11

Postcode

138680

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

**OWNER** 

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

AFTER RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

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)

2

Passenger 1

NAME:

: TEE SOO SUN

GENDER:

: FEMALE

**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

REFER TO ATTACHMENT

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

# DETAILS OF OTHER VEHICLE PROPERTY 11

Vehicle Registration Number

**SKU6934A** 

Vehicle Make/Model/Colour

TOYOTA ALTIS/BEIGE

**Details Of Properties** 

RIGHT PASSENGER DOOR

Vehicle Category

Contact Number

PRIVATE CAR

Name of Driver

TOH KIAN HOCK

NRIC/Passport Number

94500569

Address

Postcode

Insurance Company Name

MSIG INSURANCE (SINGAPORE) PTE, LTD.

Nature Of Damage

RIGHT PASSENGER DOOR

No. Of Passenger (Including Driver)

#### Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

- 1 Please report correctly the details of the accident to speed up the claims process.
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- 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.
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- 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
- 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)

Lunderstand, 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 "...
  - 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:
  - 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

10:45AM 9/NOV/220 Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name. NRIC/FIN No.:

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COAST	14			4 Th -	5 3 7	
Const					to a	
	2 200	* * *	EVERS PR			3

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AL	ter the traffic turn apain, had tried to hilter my car
56,	NEBOIN From lone 13 to LZ ( vish left signal fight or ) as I
	s in the wrigh lane Alfter ensuring MAZADA STS 2660
	Lane 2 are safe distance of as reliate in left blind spot
544	of to bilter to lone stouther my v Darly mid-val
J	filtering, SKU6934A had also filter in to lane 2 at a
La s	+ speed (from lane 1). From video bootage, \$446936A
512	ms to be avoiding a materiagele in front of him at lane 1.
	TOU.

DECLARATION

I/We declare 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:

NRK/FIN No ..

# Addendum Sheet



Date

CONTRAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

10105-6224-0010 Fax (65) 6224-0030

Updating Hours: Monday to Friday, 09-00 – 17 or

ALL CRIDS MANAGEM	MI EX. STAL	Descripting Hours - No	nday to Friday, 09 C Brg No 6660001773	0 – 17 00 5			
IMPORTANT A	OTE: Ple wit	ase submit the c h whom you sub	Ornelletad ( )	50 N	the same Auth	norised Report	ting Centre
				NDUM			
(A) PARTICU	LARS OF PE	RSONMAKING	THEAMENDM	ENTS:			
		:_MCC 620			Registration No	. SGN 88	OI X
Nameus	hawnin NAIC)	: Geh keh	Sheng	NRIC/FII	N/Passport No		_
(*Vehicle	Driver/Ve	ehicle Owner) [*]	Please delete	as appropriate			
Address						Singapo	ore( )
Contact	(Tel)	;		Mobile	No.: 9118 0	996	
Email Ac	idress				and many 1		
Date of	Accident	: 07/11/2024	Ü	Time of	Accident:!	5:05	
Place of	Accident	: Clements	Ave Z		un programme and the second		
Insuran	ce Compan	v: A16		and the second s			<u> </u>
I have n	nade a repo he following	RMATION / AMS ort on the above r g amendments:	nentioned acci				
Add	Indus	On Name	of Regnet	ered Owner	and `	Name of	Driver '
		Manager Street, and the Observation	-1112				
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-				Accessor of the American			*
				Ũ	1_		
Policy	/holder / Dri	ver's Signature	<del></del>	Rép	orting Centre Pe	ersonnel's Sier	nature

Réporting Centre Personnel's Signature Name: NRIC/FINNO.

Date: 11111 7020

# > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	502B
Vehicle No.:	SGN8801X
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Nov 2020
Vehicle Make:	CITROEN
Vehicle Model:	GRAND C4 PICASSO 1.6 BLUEHDI EAT6 S/R
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No:	10JBHD3049789
Chassis No.:	VF73ABHZTGJ643185
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$28,575.00
Original Registration Date:	21 Jul 2016
First Registration Date:	21 Jul 2016
Transfer Count:	0
Actual ARF Paid:	\$14,205.00
# (N FIVE CO. #24:4 # (T) OF (T) # ) A FT C PROPRIES AND	ayun dagan banggalun dagan gan dagan gan basun dagan dagan sa bangga dagan bangga dagan bangga bangga bangga b
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Jul 2026
PARF Rebate Amount:	\$10,653.00
COE Expiry Date:	20 Jul 2026
COE Category:	A - Car up to 1600cc & 97kW (1306hp)
COE Period(Years):  OP Paid:	10 *E240400
QP Paid: COE Rebate Amount:	\$53,694.00 \$30,357.00
Total Rebate Amount:	\$41,010.00
he information contained herein is correct as at 24 Nov 2020	54.1.010.00

OK

Used 2016 Citroen C4 Picasso Di

PARF/C

gcarmart.com/used\_cars/info.php?ID=938997&DL=1000

# Citroen C4 Picasso Diesel 1.6A BlueHDi

	Financial Accessories :	Similar Resear	rch Photos Ma
Price	<b>\$51,500</b>	Fuel Type	Diesel (Euro 5 Engine and Above)
Depreciation (1)	\$8,310 /yr View models with similar depre	Reg Date	22-Jul-2016 (5yrs 7mths 27days COE left)
Mileage	64,000 km (14.7k /yr)	Manufactured ①	2016
Road Tax ①	\$1,144 /yr	Transmission	Auto
Dereg Value ①	\$36,303 as of today (change)	OMV ①	\$22,822
COE 🕖	\$52,301	ARF ①	\$8,951
Engine Cap	<b>1,560</b> cc	Power	88.0 kW (118 bhp)
Curb Weight	1,320 kg	No. of Owners 🔘	1
Type of Vehicle	MPV		
NAT 12 12 12 12 12 12 12 12 12 12 12 12 12	"我有我在我的是我们的,我们就是我们的,我们们们		

#### **Features**

1.6L 6 Speed Auto With Paddle Shifters, Max Torque 300nm/1750rpm, 6 Airbags, EBA, ESP, ABS, Keyless Access & Start, Cruise Control & Speed Limiter. View specs of the Citroen C4 Picasso Diesel (2014-2017)

## Accessories

7" Touchpad Info Screen With Navigation And Reverse Camera. Bluetooth, LED DRL, Garmin Navi 67lm, Thinkware E750 Eull HD In Car Camera.



