

ASS. REC BY: *marcus*

REF:

*C53/SMO200/3138/UVF3*ASSIGNMENTFrom:
Estimated Cost:

Date:

Veh No:

GBF7918B

Yr Regn:

10/3/17

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

OD / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

GBF7918B

at Workshop m/s

Eng hup Seng motor

of

Alc-1 Pandan 1007 # 01-D2 9.30

Insured:

SM T 3790x

Policy No.

Claims No. CMTD2003260/IJH

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

Truck / Trailer or *cm /*

Make:

*Toyota hiace*c.c *2982*

Colour

silver

A/C: Insured / Std / NI / NA

Sp. Reading

212777

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

*JTFH T02P000215096*Gen. Cond: *Good* / Fair / Poor / BurntSteering: *Order* / Jammed / Leaked / Burnt orBrake: *Order* / Jammed / Leaked / Burnt orModi: *NI* / S/Rim / STD A/Rim or

Tyre Size:

F:

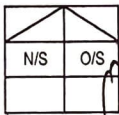
195 R15

R:

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

TOYO / YOKO or

(Policy Condition)

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

Bal. or Market Value:

54

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

MR Lye

Vehicle: IN / OUT

Date:

Person Contacted: *96224030*

Front

6

mm

Rear

6

R/Bal.

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

6/10/20

D.O.I.

30/6/21

Survey held at

*11**@ 9.40am*

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

o/s Rear

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

*Philip Ros LTA at 23.46.24 # 26422**PRS No estimate.**2 accident**Resurvey on 5/7/21 @ 2.25pm.**Repair range 1500-2K.**5/7/21*

Date/Time, File Pass to?

☐

: Preli. Report

Days Of Repair: *4*

1)

☐

: Final Report

Resurvey No. of Trip:

Survey Fee:

Date/Time, File Return to?

Transportation:

2) 6/7/21-Typist

Add Fee:

☐

: Site Insp (\$

) *___* S + RS *___* SI☐

: Interview (\$

) Photos

☐

: Tech. Invs (\$

) Others

☐

: Weekend (\$

)

Report Format : PRS

Lump Sum / I.B.I: (\$

TOTAL

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	562N
Vehicle Details	
Vehicle No.:	GBF7918B
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Jun 2021
Vehicle Make:	TOYOTA
Vehicle Model:	TOYOTA HIACE VAN TURBO 5 DR MANUAL
Primary Colour:	Silver
Manufacturing Year:	2016
Engine No.:	1KD2681305
Chassis No.:	JTFHT02P000215096
Maximum Power Output:	-
Open Market Value:	\$27,952.00
Original Registration Date:	10 Mar 2017
First Registration Date:	10 Mar 2017
Transfer Count:	1
Actual ARF Paid:	\$1,398.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	09 Mar 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$46,430.00
COE Rebate Amount:	\$26,422.00
Total Rebate Amount:	\$26,422.00

The information contained herein is correct as at 28 Jun 2021

OK

Singapore Reckless Drivers Part X

Very bad fuel consumption ?

Budget of \$80,000; Which 4yr old sedan or SUV to buy?

Post an Advertisement

Sell it yourself! Advertise it at just
\$68 until it's SOLD!

BMW X6 XDrive35i Sunroof @ \$153800



1 Owner Only! Low Mileage!
Fully Serviced By Agent With
Service Records!
Hamilton Autobahn StarAd

KA-HUP

HOTLINE: 6741 9997

**VALUE FOR MONEY
VALUE FOR TIME
A PEACE OF MIND**

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[Post an Ad](#) [Advertiser Login](#) [Ways of Selling](#)

Browse by Category

Sort by Date Posted 100 results/page

52 vehicles

Hiace

Advanced Search Submit

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Hiace		Any	Any	2017	Any	Any	Any	Available
	Toyota Hiace 3.0A DX		\$60,800	\$10,630 /yr	17-Mar-2017	2,982 cc	-	Van	Available
	Fuel Type: Diesel \$900 Plus Monthly Instalment For This Unit! Very Good Condition! Well Taken Care By Previous Owner. Bank Loan And In-House Loan A... ABS Bus Pte Ltd Posted: 28-Jun-2021 Tags: 2017 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace 3.0M		\$58,800	\$9,160 /yr	28-Nov-2017	2,982 cc	-	Van	Available
	Fuel Type: Diesel Free 1 Year Insurance, Warranty & Free Servicing Provided. Well Maintained And Tip Top Condition. No Repairs Needed. 100% Bank Or... ABS Bus Pte Ltd Posted: 28-Jun-2021 Tags: 2017 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace 3.0M		\$56,800	\$9,530 /yr	14-Jun-2017	2,982 cc	79,900 km	Van	Available
	Fuel Type: Diesel 100% Loan Available! Low Driveaway! Powerful Workhorse And Most Reliable Logistics Van Trusted By Many! High Resale Value, A Van... Posted: 28-Jun-2021 Tags: 2017 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace 3.0M		\$61,777	\$10,090 /yr	11-Aug-2017	2,982 cc	-	Van	Available
	Fuel Type: Diesel Ultra Low Mileage! Turbocharged! New Paintwork! Excellent Engine And Interior Condition! Well Taken Care By Previous Owner! No Rep... Net Link Partners Pte Ltd Posted: 28-Jun-2021 Tags: 2017 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	2008 Toyota Hiace 3.0M Diesel (For Lease) \$1,150/mth Leasing a powerful van Toyota Hiace 3.0M Diesel (2008) fulfil your business needs! Contact us for more info. More info about this vehicle								
	Toyota Hiace 3.0M		\$62,800	\$9,960 /yr	17-Oct-2017	2,982 cc	-	Van	Available
	Fuel Type: Diesel 1 Owner Agent Unit With Genuine Low Mileage! Exclusive 3-Months Warranty Will Be Provided To Next Owner! Original Functionality &... Car (S) Pte Ltd Posted: 28-Jun-2021 Tags: 2017 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace 3.0M DX		\$59,800	\$9,600 /yr	20-Sep-2017	2,982 cc	71,000 km	Van	Available
	Fuel Type: Diesel ONE OWNER! BEAUTIFUL CONDITION! GENUINE LOW MILEAGE! LOW DEPRECIATION! EXCLUSIVE WARRANTY GIVEN FOR A PEACE O... Car (S) Pte Ltd Posted: 28-Jun-2021 Tags: 2017 Toyota Hiace, Toyota Hiace, Toyota, Hiace								

Compare

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	09/11/2020 14:50
Date Of Accident	06/11/2020 13:30
Exact Location Of Accident	TOH GUAN EAST (ENTERPRISE HUB)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF7918B
Insured/Policyholder	
Name Of Registered Owner	PROSPER TRADING PTE LTD
Co Reg No	2XXXXX562N
Email Address	PROSPERTRDG@SINGNET.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62661281
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5119269854
Cover Note Number	
Driver	
Name of Driver	GOH TECK YONG
NRIC No	SXXXX388B
Date Of Birth	03/12/1960
Occupation	OUTDOOR
Date Of Driving Pass	04/07/1981
Driving Experience	39 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91472559
Fax Number	
Contact Number	OFFICE-62661281
Email Address	NOEMAIL

Address	BLK 30 TELOK BLANGAH RISE #09-314
Postcode	090030
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	COLLIDED INTO PARKED VEHICLE
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?	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)	0

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 ATTACHED STATEMENT AND SKETCH.

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	SMT3790Z
Vehicle Make/Model/Colour	KIA CREATO / WHITE & BLUE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	AHMAD SUKRI BIN ALI
NRIC/Passport Number	SXXXX412D
Contact Number	88912294
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLANIMPORTANT 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 willful 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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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.

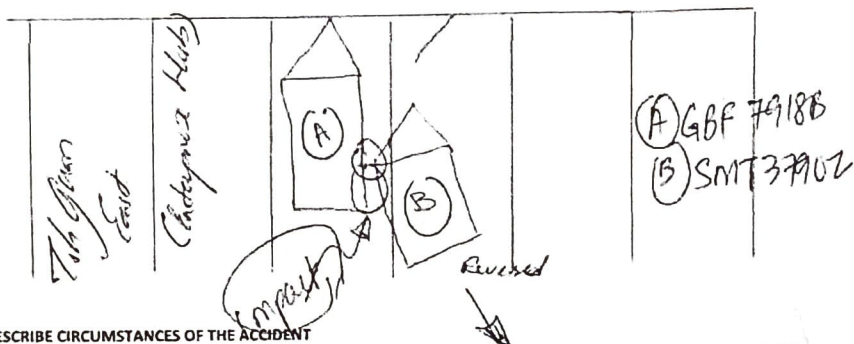
Policyholder's Signature
Date & Time

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

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I parked my vehicle at the stated place date & time. When I came back I saw vehicle 'B' driver was beside his car and waiting for me. He said he accidentally hit my vehicle while he was reversing. Only 2 vehicles involved & no one was hurt - we exchange particulars.

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:
NRIC/FIN No.: