ASS. REC. BY: AM REF: CS3 111 200	141841P10f3
	GNMENT CAR TO A TO THE TOTAL CONTRACT OF THE
From: Date:	Veh No: SJM 264 U Yr Regn: 704 1 JM Type: M.Car M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
Estimated Cost: OD RES / EVA / INV / MIV	Truck / Trailer or
To Inspect Vehicle No: SJM 2624	Make: Howa CIVIC 1.6 VTCVI C.C 1597
at Workshop m/s Kak wawy	Colour BUCK A/C: Insured/Std/NI/NA
of 1, soon less this to promean con	Sp.Reading DST-(50 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No. MCOM0015	CNO: MRHFC5650 JT 60.2082.
Claims No. MCT20120355	Gen. Cond: Good / Par / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder/ Jannmed / Leaked / Burnt or
(Client's Record)	Brake: horder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / SRim / STD A/Rim or
	Tyre Size: F: 215 50ZR17
(Policy Condition)	R:
Remark: The veh had commenced Its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA /MIG / OHTSU / PIR / SUM! /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value: 85K	Fron! Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal, R/Bal mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. L/Balmm
Est Repairs: days Res.: Yes or No	D.O.A. 17/12/2020 D.O.I. 21/12/2020
Lum Sum: % · 3 Val.: Yes or No	Survey held at Kok name
	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN / OL	FRT NS
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
0 1 1 100	
Repair mt - 47K	
ALTERNATION DE LE DEPONT IN	o. of days - 3k-4k/s days
ESTIMATE RANKE OF REPAIR IN	0.04 gody = 21 (1/2 cm)
03/02/21 Submit PRS.	
Committee	
Dale/Time, File Pass to? Preff. Report	Days Of Repair:
1) 03/02 Typist : Final Report	
Date/Time, File Return to?	Transportation:
Add	Constant of the Constant of th
	: Interview (\$) Photos
Representation MER-PRS	:Tech, Invs (%) Others
Lump Sun/I.B.A: (\$)	: Weekend (%
Printedly Assessed to a second	TOTAL
to the co	•

SS1F20CJ0001-01 / SNG AH TEE MOTOR & PANEL SERVICE PTE LTD ENTRY DATE & TIME: 19/12/2020 10:49 (SGT) SUBMITTED BY: SAMANTHA TAN VERSION: 2 (19/12/2020 10:58 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

1. Please report <u>correctly</u> the details of the accident to speed up the details.
2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
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.

4. The issue and acceptance of this referred to the Police for Investigation.

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 Submission Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

19/12/2020 10:49 (SGT) 17/12/2020 18:00 (SGT) Orchard Turn, Singapore NEAR WISMA ATRIA TAXI STAND EXIT Singapore

IDETAILS OF OWN VEHICLE

Vehicle Registration Number

SJM2626U

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No Alternative Phone No

No

LI CHUSHENG GARY

SXXXX770J

GARY1410@HOTMAIL.COM

(Phone) +65-92399322

+65-92399322

VEHICLE PARTICULARS

Manufacturer

Model

Variant

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?

Vehicle Category

Honda

Civic

Private use

No - Claiming third party

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Accident report SS1F20CJ0001

Direct Asia ThirdParty

No

MT/00748513

LI CHUSHENG GARY SXXXX770J 14/10/1984 Indoor

ate Of Driving Pass Driving experience Gender

Mobile Number Alt. Phone Number Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident

Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Was there any audio recorded?

16/12/2005

15 YEARS

+65-92399322

(Phone) +65-92399322

GARY1410@HOTMAIL.COM

234A SERANGOON AVE 2 #10-141

Male

551234

Yes

No

Collision - Major/Minor Rd DRIZZLING

Wet

No

2 No

Yes

No

No No

Yes Yes

No .

IDETAILS (FOTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model Vehicle Variant Vehicle Colour

Vehicle Category Name of Driver

NRIC No Contact Number

Address

Address complement

Postcode

SHD6625S

Taxi

ANG SOON CHAI SXXXX482F

(Phone) +65-90285308



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 <u>truthful</u> and <u>accurate as possible</u>. 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 Ladgment 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.
- 3 Consent under the Personal Data Protection Act (PDPA)

understand acknowledge, agree and consent that:

- Parsonal Information to all insurer(s) who have insured vehicles involved in this accident (all insurers' lawyers/law firms. The Nonetary Authority of Singapore and any other personal and representation of the insurers' lawyers/law firms.
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - in investigating the accident and/or my claims.
 - the carrying out and/or dealing with my instructions or responding to any enquiries by me:
 - 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
 - vy, complying with applicable law in admir istering, processing, handling and/or dealing with my claims. collectively the
 - th: all insurers) 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 mill Personal Information for one or more of the above Purposes, and
 - To Personal information may/can be disclosed by any of the insurers and/or GIA to their third party service providers a sgents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purcoses
 - id). In: Personal information will also be collected and used to compile claims history for the purpose of fraud detection in estigation and management in present and all future claims.
 - er the information so collected under (d) above may be shared a disclosed.
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fractive regulators, law enforcement and government agencies as reasonably required for the purposes stated for
 - the foregoing with requirements under any regulations. (and or court orders

) F

Ser i Signature

Driver's Signature
(If driver is not the pulls, no per Date & Eime

Reporting Co

tre Personne is Eigheture

•

SKETCH PLAN	
S RANGE	'
	12 0 TW26264
	A - 95m21264 B - SHO6625S
	B-SHOWS
96	a Lin
/ / /	
	,
\ (
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
On 17th December 2020 at about 6	' I was to all a glass Outlook
Turn towards Hage Ann City. Upon appr	pri 1 des travelling along Dreight
suddenly a white Mercedes Trui (SH	ociding Wigner First land the tax
stand without stopping at the stop	described a long burn
to warn him and thus collice into mu	last left of my vokide (STM26264)
to me the course two wo	TOTAL TOTAL STATE OF THE PARTY
	•
	Clarm own policy
	Claim OD (TP at other workshop LOC WAW (UV NIM)
	For record purpose only
	Policy No maurer DYCET ASIA Ven No. JOYA TO TO U
DECLARATION	
We peclare the foregoing particulars are true? I every respect	
W. \\\	
Driver's Signature prover's Signature if driver's not the unit of the	Reporting Centre Personner's 5 gnatury
pare & Time	PAC ATT CO
-	
-	

Accident report SS1F20CJ0001

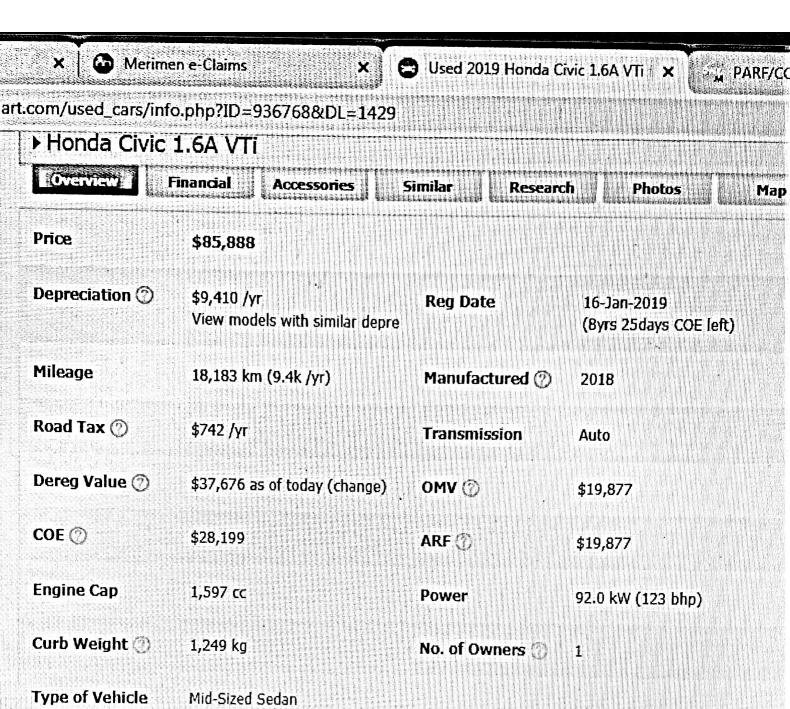
Page 5 of 19

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	770)
Vehide No.:	SJM2626U
Vehicle to be Exported:	No
Intended Deregistration Date:	21 Dec 2020
Vehicle Make:	HONDA
Vehicle Model:	CIVIC 1.6 VTI CVT
Primary Colour:	Black
Manufacturing Year:	2018
Engine No.	
Chassis No.:	R16B25502466
Maximum Power Output:	MRHFC5650JT002082
Open Market Value:	92.0 kW (123 bhp)
Original Registration Date:	\$19,877.00 09 Jan 2019
First Registration Date:	
Transfer Count:	09 Jan 2019
Actual ARF Paid:	0
erit planters describit en 1985 en 1770 describer en 111 describer describer en 1980 en 1980 describer des	\$19.877.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	08 Jan 2029
PARF Rebate Amount:	\$14,907.00
rtife-selevele (###) (##ees) (##ees) (###) (##############################	
COE Expiry Date:	08 Jan 2029
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period (Years):	10 (1366HP)
QP Paid:	\$28,199.00
COE Rebate Amount:	\$22,695,00
Total Rebate Amount:	\$37,602.00

ОК



Original Condition. View specs of the Honda Civic (2016)

Accessories

Features

Factory Fitted Interior. Keyless Entry And Push Start Function. Cruise Function, Brake Hold Function And Reverse Camera.

