

ASS. REC. BY: JohnREF: CS/CT120014193/RH#3S
5712

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SCF 122at Workshop m/s TC AUTO CLINICof 1, SIXTH LOKYANH RDInsured: CTI

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: 65K

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: SCF 122 Yr Regn: 2016 / OCTType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: NISSAN BASHA 1200 CVT c.c. 1457Colour RED A/C: Insured / Std / NI / NASp. Reading 73174 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: SJNFBAD11U784078

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Order / Jammed / Leaked / Burnt orBrake: Order / Jammed / Leaked / Burnt orModi: NII / SRIM / STD A/Rim orTyre Size: F: 225/45R19R: 21

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

TOYO / YOKO or _____

Front Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 16/12/2020 D.O.I. 11/01/2021Survey held at TC AUTO CLINICDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop orO/S REAR

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

Date / Time	Action / Instruction
	<u>Repair limit - 17K</u>
	Finalised amount of \$ 5,238.46 / 5 days of repair is confirmed
	RED: 1984.56:27%

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Rep. Format: _____

Lump Sum / L.B.A. (\$) _____

Days Of Repair: 5

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS. \$ _____

Photos

Others

TOTAL

TC AUTOCLINIC PTE LTD
1 SIXTH LOK YANG ROAD
SINGAPORE 628099

ESTIMATE : ACCIDENT/BODY REPAIRS

REFERENCE : 157/IC/TC/HO/2020
DATE : 18-DEC-2020

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
S(079909)
TEL : 63896111
FAX : 62247175

OWNER'S NAME : MRS KOH HUON
ADDRESS : 557 UPPER THOMSON ROAD
#03-02
S(574418)
TELEPHONE NO : 97680508

TYPE OF CLAIM : DIRECT SETTLEMENT / THIRD PARTY CLAIM
POLICY NO : CHINA TAIPING 3RD PARTY DIRECT
VEHICLE NO : SCF12Z (27/12/2016)
MODEL CODE : FDRARBZJ11EWAFJJ-
MODEL/YEAR : NISSAN QASHQAI 2.0
ENGINE NO : RED-108456
CHASSIS NO : SJNFBAJ11U1784078
MILEAGE : 1 KM
DATE IN : 18/12/2020
LIABILITY : 0.00
EXCESS CLAUSE : 0.00
ESTIMATE BY : HO YUE MENG
ACCIDENT DATE : 16/12/2020

TC AUTOCLINIC PTE LTD
1 SIXTH LOK YANG ROAD
SINGAPORE 628099

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SCF12Z

S/NO	JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1	RSI	REPLACE REVERSE SENSOR, NECESSARY ADJUSTMENT & FUNCTION TEST	110.00	/
2	WAPI	ELECTRONIC 4 WHEEL ALIGNMENT & ADJUST STRG ANGLES TO STANDARD SPECIFICATION- PASSENGER	103.00	/
3	ZZ/001	REMOVE/INSTALL REAR BUMPER AND AFFECTED PORTION. REPAIR END PANEL AND RH REAR FENDER @ 280 X 2.5 <i>rh sill panel & aux p.p.</i>	1170.00	700
4	ZZ/002	RESPRAY PAINT REAR BUMPER, END PANEL AND RH REAR FENDER @ 250 X 3 + RH RSV <i>panel & aux p.p.</i>	1100.00	750
5	ZZ/003	REMOVE/INSTALL RH REAR TYRE AND SPORTS RIM TO FACILITATE THE REPAIR	20.00	/
6	ZZ/004	CHECK REAR LIGHTINGS AND WIRING SYSTEM	20.00	/
TOTAL LABOUR CHARGES			2523.00	

TC AUTOCLINIC PTE LTD
1 SIXTH LOK YANG ROAD
SINGAPORE 628099

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SCF12Z

DAMAGED PARTS & PRICES

S/NO PARTS DESCRIPTION	PARTS NUMBER	NETT	LIST	S/NETT REMARKS
1 RH REAR SPORTS RIM <i>SCA ✓</i>	D0300-4ES3B			1681.50
2 CLIP-RH REAR OVER FENDER @\$2.70EACH X3PCS <i>M ✓</i>	76847-JG00A	8.10		
3 CLIP-RH REAR OVER FENDER @\$2.70EACH X3PCS <i>M ✓</i>	76847-4EA0A	8.10		
4 OVER FENDER-REAR, RH <i>SCA ✓</i>	93828-4EA0A	540.50		
5 LH REAR BUMPER STAY <i>X</i>	H5211-4EAMA	141.00		
6 RH REAR BUMPER STAY <i>X</i>	H5210-4EAMA	141.00		
7 REAR BUMPER REINFORCEMENT <i>X</i>	H5030-4EAMA	691.50		
8 REAR BUMPER ENERGY ABSORBER <i>X</i>	85090-4EA0B	141.40		
9 RH REAR BUMPER SIDE BRACKET <i>M ✓</i>	85220-4EA0A	38.90		
10 RETAINER-REAR BUMPER SIDE, RH <i>X</i>	79184-4EA0A	25.70		
11 REVERSE SENSOR(4EYE) <i>?</i>	SENSOR-4-FUM			250.00
12 REAR BUMPER UPPER CLIP @\$8.00EACH X3PCS <i>M ✓</i>	85284-JD00A	24.00		
13 CANOE RIVET-REAR BUMPER @\$7.10EACH X2PCS <i>M ✓</i>	76882-0M000	14.20		
14 REAR BUMPER LOWER CLIP @\$1.30EACH X4PCS <i>M ✓</i>	01553-05933	5.20		
15 FINISHER-REAR BUMPER <i>X</i>	85071-4EA0A	18.80		
16 REAR BUMPER FASCIA <i>de ✓</i>	85022-4EA0H	796.70		
17 REFLEX REFLECTOR-RH <i>X</i>	26560-JJ90A	61.90		
18 LAMP ASSY-REAR COMBI, RH <i>?</i>	26550-4EA0A	346.90		
SUB TOTAL		3003.90	0.00	1931.50
LESS DISCOUNT (NETT-20.00%, LIST-30.00%, S/NETT-.00%)		600.78	0.00	0.00
GRAND TOTAL		2403.12	0.00	1931.50
OVERALL TOTAL		4334.62		

LEGEND: REMARKS(OK) = APPROVED, REMARKS(X) = NOT APPROVED

TC AUTOCLINIC PTE LTD
1 SIXTH LOK YANG ROAD
SINGAPORE 628099

SUMMARY OF ESTIMATE FOR VEHICLE REGN NO SCF12Z

TOTAL LABOUR CHARGES	2523.00
TOTAL SPARE PARTS CHARGES	4334.62
GRAND TOTAL	6857.62 *

* All charges do2 not include GST.

SURVEYOR'S PARTICULARS

NAME	:	Rene - Hp 9001068
SURVEYED DATE	:	11/01/2021 @ 1035
AUTHORIZED DATE	:	
EXCESS CLAUSE	:	0.00 5 days
LIABILITY	:	0.00
REMARKS	:	Resurvey before paint

PLS NOTE : This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges & spare parts in the process of repairs, we shall inform you accordingly.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

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 Submission	17/12/2020 13:25 (SGT)
Date of Accident	16/12/2020 13:40 (SGT)
Exact Location of Accident	Ang Mo Kio, Singapore
Additional Location Information	ANG MO KIO AVE 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCF12Z
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KOH HUON
NRIC No	SXXXX571Z
Email Address	XUYUN37@GMAIL.COM
Mobile Phone No	(Phone) +65-97680508
Alternative Phone No	+65-82222333

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	QASHQAI 2.0 CVT ABS D/AIRBAG 2WD 5DR S/R
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	Hong Leong
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MP306301
Cover Note Number	27/10/2020 - 26/10/2021

DRIVER

Name of Driver	KOH HUON
NRIC No	SXXXX571Z
Date Of Birth	05/08/1966
Occupation	Indoor

Driving Pass	08/02/1990
Driving experience	30 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97680508
Alt. Phone Number	+65-82222333
Email Address	XUYUN37@GMAIL.COM
Address	557 UPPER THOMSON RD #03-02
Address complement	-
Postcode	574418
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
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	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	JASON ONG MENG LEE
Gender	Male

PASSENGER 2

Name	ONG MENG HWEE
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

ATTACHMENT(S)

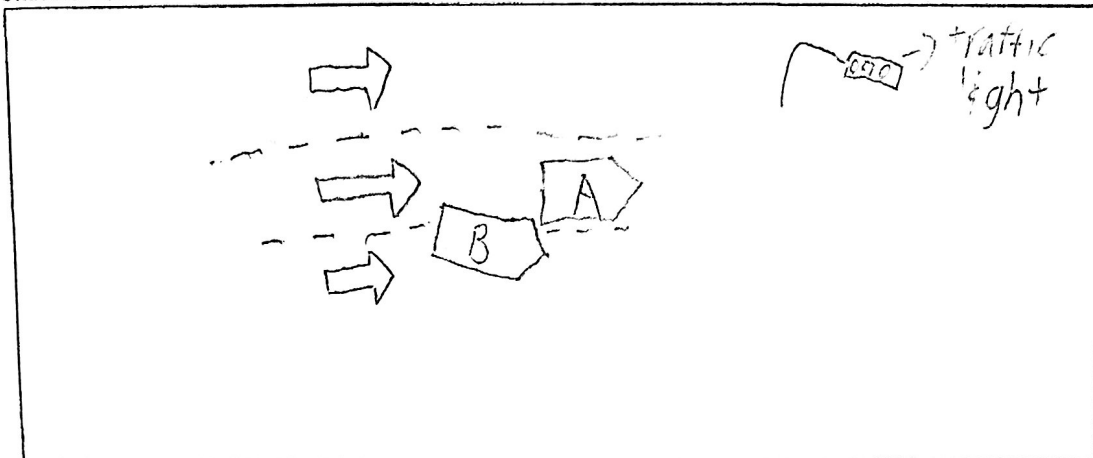
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	SJC6625Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Date of accident: 16/12/20 Time: 1.40pm Location: Ang Mo Kio Ave 1
 My Vehicle A: SCF127 Vehicle B: SJC6625Z Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The traffic was turning from amber to red and I had to slow down to a stop. After stopping for 2 seconds, we suddenly heard a loud bang from behind. When we got out to check, we realised Vehicle B had barged us on the right to the back of the car.

veh B: Ng Ee Jee Martha / 86817321C

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :
 Email address :
 & myself :
 Email address :

Note: Please take note that your Insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

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.:


AH LIM MOTOR COMPANY

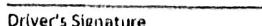
SKETCH PLANIMPORTANT NOTICE

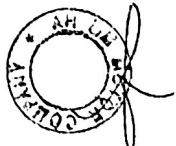
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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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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/FIN No.:



HL Assurance

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Form X1

CERTIFICATE NUMBER : MP306301

Type of Coverage : Comprehensive Own Damage Excess : SGD750.00

Sum Insured : Market Value Windscreen Excess : SGD100.00

- | | |
|--|-------------------|
| 1. Index Mark and Registration Number of Vehicle | SCF12Z |
| Chassis Number of Vehicle | SJNFBAJ11U1784078 |
| 2. Name of Policyholder | KOH, HUON |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 27 Oct 2020 |
| 4. Date of Expiry of Insurance | 26 Oct 2021 |
| 5. Persons or Classes of Persons entitled to drive* | |
| 01. KOH, HUON | 02. N/A |
| 03. N/A | 04. N/A |
| 05. N/A | 06. N/A |

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

*Provided that the person driving is permitted in accordance with the licensing or other laws or laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business or profession. The Policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Trade.

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Please note that the Own Damage Excess will be halved if claims related repairs are done at HL Assurance Approved Workshops listed in the attached.

This Certificate is not transferable to a new owner of the Motor Vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to HL Assurance Pte. Ltd. Within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

Hire Purchase Company : HL Bank

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

HL ASSURANCE PTE. LTD.

Authorized Signature

Issue on: 23 Sep 2020

HL Assurance Pte. Ltd. A Member of the Hapag-Lloyd Group

11 Keppel Road, #11-01 ABI Plaza, Singapore 089057 Tel: 65 6922 6030 Fax: 65 6221 3782 UEN/GS1 Regn No. 201229558W www.hlas.com.sg

201E0308



Accident report SA1920CH0001

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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	571Z
Vehicle No.:	SCF12Z
Vehicle to be Exported:	No
Intended Deregistration Date:	12 Jan 2021
Vehicle Make:	NISSAN
Vehicle Model:	QASHQAI 2.0 CVT ABS D/AIRBAG 2WD 5DR S/R
Primary Colour:	Red
Manufacturing Year:	2016
Engine No.:	MR20431846W
Chassis No.:	SJNFBAJ11U1784078
Maximum Power Output:	106.0 kW (142 bhp)
Open Market Value:	\$17,653.00
Original Registration Date:	27 Oct 2016
First Registration Date:	27 Oct 2016
Transfer Count:	0
Actual ARF Paid:	\$19,653.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 Oct 2026
PARF Rebate Amount:	\$14,739.00

COE Expiry Date:	26 Oct 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$56,410.00
COE Rebate Amount:	\$32,648.00
Total Rebate Amount:	\$47,387.00

The information contained herein is correct as at 12 Jan 2021

OK



art.com/used_cars/info.php?ID=953160&DL=1032

► Nissan Qashqai 2.0A Premium Moonroof

Overview

Financial

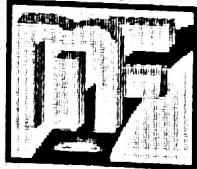
Accessories

Similar

Research

Photos

Map

**MAYFAIR**
MOTORING

Price	\$65,800		
Depreciation ⓘ	\$9,710 /yr View models with similar depre	Reg Date	17-Oct-2016 (5yrs 9mths 4days COE left)
Mileage	81,705 km (19.3k /yr)	Manufactured ⓘ	2016
Road Tax ⓘ	\$1,210 /yr	Transmission	Auto
Dereg Value ⓘ	\$45,277 as of today (change)	OMV ⓘ	\$19,653
COE ⓘ	\$53,001	ARF ⓘ	\$19,653
Engine Cap	1,997 cc	Power	106.0 kW (142 bhp)
Curb Weight ⓘ	1,379 kg	No. of Owners ⓘ	1
Type of Vehicle	SUV		

Features

2.0L 4 Cylinders DOHC Engine, 142 BHP, Xtronic CVT Automatic, ABS, Airbags, Cruise Control, Auto Headlights/Rain Sensors, Keyless Entry/Start/Stop. View specs of the Nissan Qashqai (2008-2014)

