

ASS. REC. BY:

REF:

CS3/91420014376/R1+d3

2449

COE Xp14 = 2012/Jan

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: YN 2752Eat Workshop m/s NHEE NHEEof BLK K, NO. 22 Pandan LoopInsured: AK

Policy No. \_\_\_\_\_

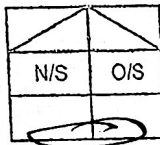
Claims No. \_\_\_\_\_

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: 9K

IDAC Accident Report: \_\_\_\_\_ 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

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: YN 2752EYr Regn: 2012 Jan

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

Truck / Trailer or

Make: Hino XZ4710R 4.0m c.c. 4009Colour: WHITE

A/C: Insured / Std / NI / NA

Sp. Reading: 360310

T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JHHULP3HXOK001693

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 orTyre Size: F: 7-00R16

R: \_\_\_\_\_

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

TOYO / YOKO or \_\_\_\_\_

Front

Rear

R/Bal. 7 mmR/Bal. 7/7 mmL/Bal. 7 mmL/Bal. 7/7 mmD.O.A. 12/12/2020D.O.I. 24/12/2020Survey held at NHEE NHEEDes. of Damages: Frt Rear / OIS / NIS / UIC / Rooftop or

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

Date / Time

Action / Instruction

Repair limit = 4

Date/Time, File Pass to?



: Prel. Report

1)



: Final Report

Date/Time, File Return to?

2)

Report Format: \_\_\_\_\_

Lump Sum / L.S. (\$) \_\_\_\_\_

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

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

Add Fee:



: Site Insp (\$ \_\_\_\_\_)



: Interview (\$ \_\_\_\_\_)



: Tech. Invs (\$ \_\_\_\_\_)



: Weekend (\$ \_\_\_\_\_)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL



## 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	14/12/2020 15:54 (SGT)
Date of Accident	12/12/2020 13:47 (SGT)
Exact Location of Accident	Farrer Rd, Singapore
Additional Location Information	TOWARDS LEEDON HEIGHTS
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number YN2752E

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	EDMUND VEHICLE RENTAL PTE LTD
Company Reg No	2XXXXX244G
Email Address	edmunddevr@gmail.com
Mobile Phone No	(Phone) +65-62503339
Alternative Phone No	(Office) +65-62503339

#### VEHICLE PARTICULARS

Manufacturer	Hino
Model	XZU710R 4.0 MANUAL ABS TURBO
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle

#### INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	5112254195-01
Cover Note Number	-

#### DRIVER

Name of Driver	PANCHANATHAN GNANAVEL
Passport No/FIN	GXXXX663M
Date Of Birth	15/05/1982
Occupation	Outdoor

Driving Pass	06/04/2017
g experience	3 YEARS AND 8 MONTHS
der	Male
ile Number	(Phone) +65-67473233
l. Phone Number	-
Email Address	edmundevr@gmail.com
Address	279 BALESTIER ROAD #02-27 BALESTIER POINT
Address complement	-
Postcode	329727
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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 - Head to Rear
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### 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 ATTACHED

#### 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

Vehicle Registration Number	GBJ4095Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	RAMADHANDRAN RANJITH
Passport No/FIN	GXXXX066N
Contact Number	(Phone) +65-98355609
Address	-
Address complement	-
Postcode	-

Insurance Company Name  
Type Of Damage  
Details of property damaged in accident  
No. Of Passenger (Including Driver)

-  
REFER TO ATTACHED  
REFER TO ATTACHED  
-



## 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 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. 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 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.

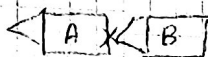


Policyholder's Signature  
Date & Time:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# SKETCH PLAN

FARRER ROAD TOWARDS LEEDON HEIGHT



A → YN275E

B → 6BS4095Z

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELING FROM FARRER ROAD TOWARDS  
LEEDON HEIGHTS ON A STRAIGHT ROAD. SUDDENLY 6BS 4095Z  
HIT MY VEHICLE BEHIND.

## 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.:

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:

Company

Owner ID:

244G

Vehicle No.:

YN2752E

Vehicle to be Exported:

No

Intended Deregistration Date:

24 Dec 2020

Vehicle Make:

HINO

Vehicle Model:

XZU710R 4.0 MANUAL ABS TURBO

Primary Colour:

White

Manufacturing Year:

2011

Engine No.:

N04CUV10679

Chassis No.:

JHHUCP3HX0K001693

Maximum Power Output:

-

Open Market Value:

\$37,358.00

Original Registration Date:

16 Jan 2012

First Registration Date:

16 Jan 2012

Transfer Count:

1

Actual ARF Paid:

\$1,868.00

PARF Eligibility:

No

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

COE Expiry Date:

15 Jan 2022

COE Category:

C - Goods Vehicle & Bus

COE Period(Years):

10

QP Paid:

\$39,589.00

COE Rebate Amount:

\$4,193.00

Total Rebate Amount:

\$4,193.00

The information contained herein is correct as at 24 Dec 2020

OK

White



rmart.com/used\_cars/info.php?ID=952602&amp;DL=2128

## ▶ Hino XZU710R

Overview

Financial

Accessories

Similar

Research

Photos

Map

Price	\$44,800	Lifespan	05-Nov-2035
Depreciation ?	\$9,200 /yr View models with similar depre	Reg Date	06-Nov-2015 (4yrs 10mths 12days COE left)
Mileage	66,800 km (13k /yr)	Manufactured ?	2015
Road Tax ?	N.A.	Transmission	Manual
Dereg Value ?	\$2,247 as of today (change)	OMV ?	\$28,558
COE ?	\$4,615	ARF ?	\$1,428
Engine Cap	4,009 cc	No. of Owners ?	1
Curb Weight ?	2,500 kg		
Type of Vehicle	Truck		

## Features

14 Feet Lorry Comes With Rear Box And Cladding To Tie Your Goods, Brand New Paintwork For The Whole Lorry White,

## Accessories

Hino, The Most Reliable 14 Feet Lorry With Box, 66,800 Km

D

Hi

Come With Brand New Paintwork. Please Call For Viewing.