CC4/11/2100/318/ba3 <u>ASSIGNMENT</u>

From: Date:	Veh No: SGM 2721M Yr Regn: 13/10/2006
Estimated Cost:	Type: M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Kia Rio 1.4M c.c 1399
at Workshop m/s	Colour Orange. A/C: Insured / Std / NI / NA
of	Sp.Reading T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: KNADE 2412 6611 8027
Claims No.	Gen. Cond: Good / Fail / Poor / Burnt
Sum Insured: Excess:	Steering: In order / Jammed / Leaked / Burnt or
(Client's Record)	Brake: In rde / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil /S/Rim / STD A/Rim or
	Tyre Size: F: 195/55 R15
(Policy Condition)	R: 195/55 R15
Remark: The veh had commenced its N/S O/S	DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal, 6 mm , R/Balmill
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 21/01/2021 D.O.I. 01/02/2021
Lum Sum: % 3 Val.: Yes or No	Survey held at Auto Repair.
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
MV: 5,000	
PV: 3,613	\
NV: 1387	
	·
	· · · · · · · · · · · · · · · · · · ·
Dale/Time, File Pass to? : Preli. Report	Days Of Repair:
; Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add Fe	ee:; Site Insp (\$)s+Rssi
	: Interview (\$) Photos
Repetitionnel:	:Tech. Invs (\$) Others
Lump Sum / LBJ: (%	: Weel:end (\$
· · · · · · · · · · · · · · · · · · ·	TOTAL

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

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.

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

23/01/2021 12:58 (SGT) 21/01/2021 08:05 (SGT) Gambas Ave, Singapore

GAMBAS AVE TOWARD WOODLANDS AVE 12 SLIP ROAD

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SGM2721M

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner NRIC No

Email Address

Mobile Phone No Alternative Phone No

TEO KOH MENG (ZHANG GUOMING)

SXXXX373H

alexteokm@yahoo.com.sg

(Phone) +65-96695404

+65-96695404

VEHICLE PARTICULARS

Manufacturer

Model Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Kia

Rio

Private use

No - Claiming third party

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy

Policy Number

Cover Note Number

Aviva

Comprehensive

No

10438077

DRIVER

Name of Driver

NRIC No Date Of Birth

Occupation Accident report SA0N211N0001 TEO KOH MENG (ZHANG GUOMING)

SXXXX373H 24/12/1976

Indoor

Date Of Driving Pass Driving experience Gender	
Driving Pass Driving experience Gender Mobile N	
Gender	14/03/1997
	23 YEARS AND 10 MONTHS
Mobile Number Alt. Phone Number	Male
Alt. Phone Number Email Address	(Phone) +65-96695404
Email Address Address	+65-96695404
Address Complement	
Postcode	BLK 120 YISHUN RING ROAD #08-427
is the driver the paller.	760120
11 NO, Relationship of the D	Yes
Does Driver Own Other Vehicles?	· •
Vehicle Registration Number of Other Vehicle Owned by Driver	No
Insurance Company of Other Name of Other Nam	•
Insurance Company of Other Vehicle Owned by Driver	• •
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	
Weather Condision	O-III I
Road Surface	osingion - Head to Rear
Road Surface	olou!
	Dry
OTHER INFORMATION	
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?	2 No - Yes 1
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution at the police?	
Was notice of intended Property:	No
If you :	No
in yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCH PLAN	
ATTACHMENT(S)	
/as there any audio recorded?	Yes No No
DETAILS OF	
DETAILS OF OTHER VE	HICLE PROPERTY 1
chicle Registration Number	119016B

Volida D. Communication of the	
verticle Registration Number	
Vehicle Registration Number Vehicle Manufacturer	SLL9016R
Vehicle Model	0220010N
11.000	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	-
Name of Driver	Private car
Contact Number	
A state	-
Address complement Postcode	-
Postcode Insurance Company Name	-
Insurance Company Name	-
the state of the s	-
_	

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 repudlate 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
- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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' law yers/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
- (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
- (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

5013158130 DEN NO: Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre & Time Personnel Sketch Plan

Describe Circumstances of the Accident
On 21/01/2021 around 0805 hrs. I was driving alon
Carolina di Maria di
Gambas Ave toward modlands Ave 12, while stoping at
the CEO and
the Slip road toward woodlands the 12 to give way for
in-coming traffic a Mazda (SLL 9016R) collided to the
June of macarity see 4016 R) collided to the
rear of my car.
The state of the s

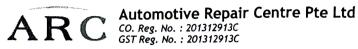
Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre
Personnel



Estimate

38 Woodlands Industrial Park E1

#05-18, Singapore 757700 Tel: 64688834 Fax: 64622278

E-mail: info@automotiverepaircentre.com.sg

ESTIMATE NO.: EST2101-017

DATE: 25-Jan-2021

POLICY NO.: AVIVA 10438077

VEHICLE REG. NO.: SGM2721M

VEHICLE MAKE: KIA RIO 1.4M HB

то Motor Claim Department

> India International Insurance Pte Ltd 64 Cecil Street, #04-#05 IOB Building

Singapore 049711

Tel: 6347 6100 Fax: 6224 4174 / 6225 7743

FOR SURVEYOR	

ESTIMATE REPAIR COST

NO.	DESCRIPTION	QUANTITY	U	NIT COST	TO	OTAL COST	1
	SPARE PARTS						1
1	Rear Bumper / (K V	1	\$	480.00	\$	480.00	1
2	Rear Bumper Top Black Protector / pcf.	1	\$	120.00	\$	120.00	1
3	Rear Bumper Clips / N-PC	10	\$	3.00	\$	30.00	1
4	Rear Bumper Retainer RH / n n	1	\$	25.00	\$	25.00	1
5	Rear Bumper Retainer LH	1	\$	25.00	\$	25.00	
6	Rear Reinforcement 💢	1	\$	160.00	\$	160.00	1
7	Rear Sponge ×	1	\$	120.00	\$	120.00	1
8	End Panel X	1	\$	340.00	\$	340.00	
			Tota	l Spare Parts	\$	1,300.00	
	SPECIAL NETT						1
9	Reverse Sensor Short	2	\$	200.00	\$	400.00	200
			Total	Special Nett	\$	400.00	1
	LABOUR						
10	Spray Painting (Rear Bumper & Rear Fender RH)	1	\$	440.00	\$	440.00	200
11	Remove and Refit Front & Rear Affected Area & Rear End Panel	1	\$	600.00	\$	600.00	20
	te prepared by: Ken Ho		T	otal Labour	\$	1,040.00	
	ove is an estimate based on our inspection and does not cover any nal parts or labour which may be required after work has been started.	Am	ount B	efore Excess	\$	2,740.00	
	mally, worn or damaged parts are discovered which may not be evident		Α	dd GST @ 7%		191.80	

Octabilities, with or dailinged parts are discovered which may not be evided on the first inspection. Because of this, the above price are not guaranteed. Quotation on parts and labour are current and subject to change.

Total Amount Payable \$ 2,931.80

Repair day - 2 days

LIS / After pain photo 01/02/2021 Sum Pin (Lluk)

TP without prejudice.

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

Signature: Date:

Page 1 of 1

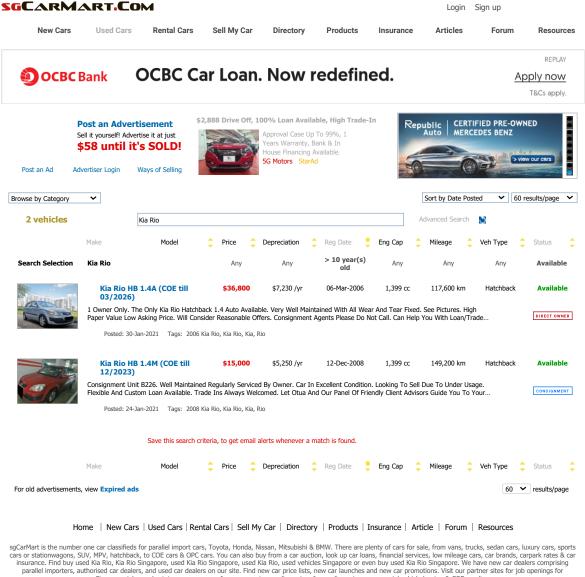
> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

wner ID Type:	Singapore NRIC
Owner ID:	373H
Vehicle Details	
Vehicle No.:	SGM2721M
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Feb 2021
Vehicle Make:	KIA
Vehicle Model:	RIO 1.4M HB
Primary Colour:	Orange
Manufacturing Year:	2006
Engine No.:	G4EE6H038288
Chassis No.:	KNADE241266118027
Maximum Power Output:	69.9 kW (93 bhp)
Open Market Value:	\$9,742.00
Original Registration Date:	13 Oct 2006
First Registration Date:	13 Oct 2006
Transfer Count:	1
Actual ARF Paid:	\$7,954.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	12 Oct 2021
COE Category:	E - Open Category
COE Period(Years):	5
PQP Paid:	\$26,054.00
COE Rebate Amount:	\$3,613.00
Total Rebate Amount:	\$3,613.00
Message	

vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 02 Feb 2021 $\,$



rearrial to the full matter of the care described by partial import care, judged, principled, wisself, principled in the care pietry of cars for sassiness or partial employ. Care as the care principled is careful to the care pietry of the care pietry of the careful to the care pietry of the care p Singapore jobs, real estate, mover, car performance parts, car discussion, forum discussion, commercial vehicle leasing & COE results.

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