CS/SM021001401/Qkvd3 ASS. REC. BY: Sun Pin ASSIGNMENT SM x 2879 M Yr Regn: 05/01/2021 From: Veh No: Date: Type: (M.Ca) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Estimated Cost: Truck / Trailer or OD / TP / WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: Toyota Noah Hybrid. Make: Blach. Insured / Std / NI / NA at Workshop m/s Colour 6466 T/Radio: Insured / Std / NI / NA of : Sp.Reading Insured: Eng/No: Policy No. ZWR800456295 Gen. Cond: Good / Fair / Poor / Burnt Claims No. Steering: In order / Jammed / Leaked / Burnt or Sum Insured: Excess: Brake: Indrder / Jammed / Leaked / Burnt or (Client's Record) Modi: Nil / 8/Rim / STD A/Rim or Make of Veh: 195/65 R15 Tyre Size: 195/65 R15 (Policy Condition) N/S OIS Remark: The veh had commenced its BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / repair at the time of inspection. TOYO / YOKA **Front** Rear Bal. or Market Value: R/Bal. R/Bal. Consistent?: Yes or No mm IDAC Accident Rport: L/Bal. L/Bal. mm Consistent?: Yes or No mm GIA / PR Seen: D.O.I. 29/01/2021 D.O.A. 25/01/2021 Res.: Yes or No days Est. Repairs: Mu Car 3 Val.: Yes or No Survey held at Lum Sum: Des. of Damages: Frt / Rear / O/S / (N/S) / U/C / Rooftop or CA / REV / REP. / 24 HRS Vehicle: IN / OUT Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date: Date / Time Action / Instruction Mr. 130,000 Pr: 63,503 NV: 67,497 Days Of Repair: : Preli. Report Date/Time, File Pass to? Resurvey No. of Trip: Survey Fee: ; Final Report Date/Time, File Return to? Transportation: Add Fee: : Site Insp (\$ _S + RS.___SI : Interview (\$ Photos :Tech. Invs 🖇 Others Reperior Format :

Weellend (\$

TOTAL

Lump Sum / LBJ: (%

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

- 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 28/01/2021 16:12 (SGT) Date of Accident 28/01/2021 10:00 (SGT) **Exact Location of Accident** Singapore Additional Location Information FARRER ROAD TOWARDS QUEENSWAY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX2879M

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner **LUMENS AUTO PTE LTD** Company Reg No 2XXXXX961K Fmail Address BRUCE@LUMENS.SG Mobile Phone No (Phone) +65-87781765 Alternative Phone No +65-87781765

VEHICLE PARTICULARS

Manufacturer Toyota Model Noah Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire

INSURANCE COMPANY

Name of Insurance Company **Tokio Marine** Type of Coverage ThirdParty Fleet Policy Yes Policy Number 20ML000510R00 Cover Note Number

DRIVER

Name of Driver NG KOON SENG NRIC No SXXXX729D Date Of Birth 04/02/1975 Occupation Outdoor

Date Of Driving Pass 29/10/1997 Driving experience 23 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-97772738 Alt. Phone Number **Email Address** LANCER2738@GMAIL.COM Address BLK309 HOUGANG AVE 5 #10-297 Address complement Postcode 530309 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer 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 Chain Collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? Nο Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name **PASSENGER** Gender Female **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 SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category
Name of Driver
Contact Number

FBG3406H

-

Motorcycle

MUHAMMAD MUZZUDDEEN BIN HAJAH MOHAAIDEEN

(Phone) +65-98514994

Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLG4139D Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle 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)

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 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.
- 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 haurers* 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 the claims:
- (ii) investigating the accident and/or my claims;
- (iil) 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 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.

TO NUMERO PUTO

Policyholder's Signature / Date &

Time

Ohn

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

CITY AUTO PTE LTD

Blk 8 Sin Ming Road

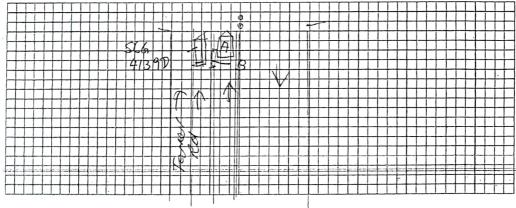
#01-58/60/62 Sin Ming Ind Est

Singapore 575643

Tel: 6453 1235 Fax: 6453 7944

Witnessed by Reporting Centre Personnel

Sketch Plan



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Declaration

We declare the foregoing particulars are true in every respect.

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Policyholder's Signature / Date &

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

CITY AUTO PTE LTD
Blk 8 Sin Ming Road
#01-58/60/62 Sin Ming Ind Est
Singapore 575643
Tel: 6453 1235 Fax: 6453 7944
(Claims Section)

Witnessed by Reporting Centre Personnel



MY CAR CONSULTANT PTE LTD

Reg no.: 201605878Z

Address: NO:60 JALAN LAM HUAT CARROS CENTRE #05-68 SINGAPORE 737869

HP: 98888885/97816380

Estimation

Date:

9/1/2021

Vehicle:

SMX2879M

Make / Model:

TOYOTA NOAH

Chassis No:

ZWR800327363

No	. Description L		Unit Price		Amount]
	Parts Replacement:				1		
1	SIDE SKIRTING LH / CU+.	(1)	\$	1,025.00	\$	1,025.00	
2	REAR SIDE PANEL LH ★ R	1	\$	2,159.00	\$	2,159.00]
3	REAR QUARTER GLASS C/W MOULDING LH ★	1	\$	898.00	\$	898.00]
4	SLIDING DOOR LH / (RY	1	\$	2,598.00	\$	2,598.00]
5	SLIDING DOOR INNER LOCK LH 💢	1	\$	381.00	\$	381.00	
6	SLIDING DOOR OUTER HANDLE LH 💢	1	\$	354.00	\$	354.00	
7	SLIDING DOOR STICKER LH	1	\$	198.00	\$	198.00]
8	SLIDING DOOR GLASS LH 🔏 🐔 🔾	1	\$	791.00	\$	791.00	
9	SLIDING DOOR INNER TRIM LH 🗡	1	\$	985.20	\$	985.20]
10	SLIDING DOOR REGULATOR C/W MOTOR LH 🎉 🚶	1	\$	1,125.00	\$	798.00	1
11	SLIDING DOOR WEATHERSTRIPE LH 🗙	1	\$	1,125.32	\$	1,125.32	1
12	SLIDING DOOR RAILING GARNISH LH 🔀	1	\$	321.00	\$	321.00	1
13	SLIDING DOOR GLASS MOULDING SET LH # 15(K	(1)	\$	211.00	\$	211.00	
14	SLIDING DOOR GLASS BLACK STICKER SET LH / ///RC		\$	80.00	\$	80.00	
15	REAR FENDER INNER TRIM BOARD RH 💢	1	\$	1,344.00	\$	1,344.00	1
16	FRONT DOOR LH / bb	$^{\ominus}$	\$	1,025.00	\$	1,025.00	1_
17	black FRONT DOOR STICKER LH / Nec	(1)	\$	159.00	\$	159.00	80
18	FRONT DOOR GLASS LH 💢	1	\$	498.00	\$	498.00	1
19	FRONT DOOR OUTER MOULDING LH &/CUH	(1 ₎	\$	215.00	\$	215.00	1
20	SIDE MIRROR LH / C/k.y.		\$	698.00	\$	698.00	1
	TOTAL PART)			\$	15,863.52	1
	LIST DOWN	25%		7	\$	3,965.88	1
	AFTER LIST DOWN				\$	11,897.64	1
					Ė		1
	SPECIAL NETT						
1	SLIDING DOOR INNER TRIM CLIPS SET 💢	1	\$	50.00	\$	50.00	1
2	SIDE SKIRTING CLIPS SET / Nec	1	\$	50.00	\$	50.00	30
3	FRONT DOOR INNER TRIM CLIPS &//YeC	1	\$	50.00	\$	50.00	1
					\$	150.00	
	LABOUR				Ť	200.00	1
1	TO CHECK ELECTRICAL WIRING	1	\$	50.00	\$	50.00	30
2	REMOVE AND REFIX REAR UPHOLSTERY	1	\$	300.00	\$	300.00	
3	REMOVE AND REFIX FUEL TANK TO FACILIATE REPAIR	1	\$	200.00	\$		1
4	REMOVE AND REFIX REAR FRONT DOOR MECHANISM	1	\$	150.00	\$	200.00)	1
5	REMOVE AND REFIX SLIDING DOOR GLASS LH	1	\$		_	150.00	_
6	ANTI RUST COAT		_	100.00	\$	100.00	30
7	KNOCK	1	\$	150.00	\$	150.00	40
8		1		1,200.00	\$	1,200.00	500
<u> </u>	SPRAY	1	\$	1,200.00	\$	1,200.00	700
	TOTAL AMOUNT				\$	3,350.00	

Parts	Replacement Amount
Total	Amount for Labour

11,897.64 3,500.00

Total Amount

15,397.64

Repair day - 4 days
LIS
After pain photo

Sun Pin CLKICI 29/01/2021 TP withou 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:

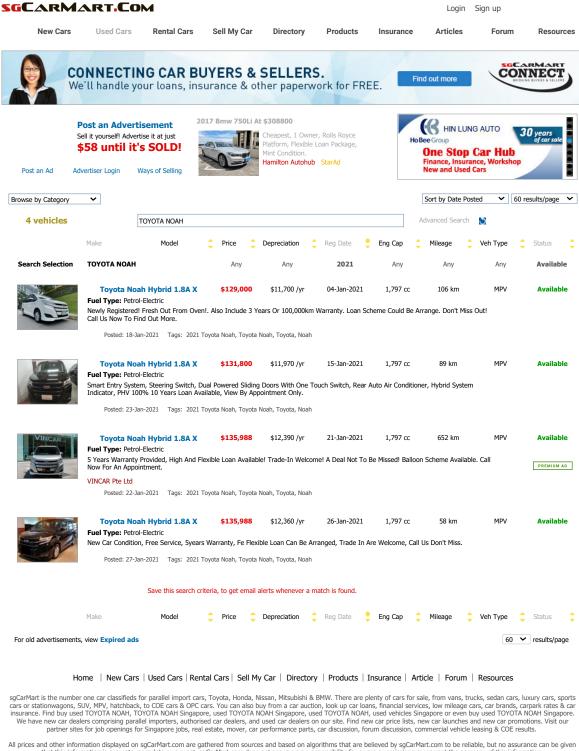
Date:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	961K
Vehicle Details	
Vehicle No.:	SMX2879M
Vehicle to be Exported:	No
Intended Deregistration Date:	01 Feb 2021
Vehicle Make:	TOYOTA
Vehicle Model:	NOAH HYBRID 7-SEATER 1.8X CVT
Primary Colour:	Black
Manufacturing Year:	2020
Engine No.:	2ZR2H82326
Chassis No.:	ZWR800450295
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$34,362.00
Original Registration Date:	05 Jan 2021
First Registration Date:	05 Jan 2021
Transfer Count:	0
Actual ARF Paid:	\$25,107.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	04 Jan 2031
PARF Rebate Amount:	\$18,830.00
Intended COE Rebate Details	
COE Expiry Date:	04 Jan 2031
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$45,510.00
COE Rebate Amount:	\$44,673.00
Total Rebate Amount:	\$63,503.00

The information contained herein is correct as at 01 Feb 2021



that this information is accurate, complete or current. sgCarMart.com does not assume any responsibility for errors or omissions or warrant the accuracy of this information.

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