

ASS. REC. BY:

REF:

CS/ASM21001597/Avf3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

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.

N/S	O/S

Bal. or Market Value: _____

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: GBH3969U Yr Regn: 2018 / May

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

Truck / Trailer or

Make: Toyota Hiace C.C. 2982Colour: White A/C: Insured / Std / NI / NASp. Reading: 63534 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTFHT02P00241695

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195 R15CR: 195 R15C

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

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 02/02/21Survey held at JECDes. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time	Action / Instruction
	<u>TP AXA</u>
	<u>MV: 62K</u>
	<u>PV: 22K</u>
	<u>Nett: 40K</u>

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 17/3/21-TypistDays Of Repair: 12Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech. Insp (\$)

☐

: Weekend (\$)

Report Format: SMART CLAIMLump Sum / L.B.J: LS \$11,500

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	02/02/2021 09:53 (SGT)
Date of Accident	01/02/2021 15:40 (SGT)
Exact Location of Accident	Bishan Street 11, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH3969U
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	EC COOL AIR CONDITIONING
Company Reg No	5XXXX642W
Email Address	AHBOYPHANG@HOTMAIL.COM
Mobile Phone No	(Phone) +65-84182992
Alternative Phone No	(Home) +65-84182992

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	No
Policy Number	5100572295-02
Cover Note Number	-

DRIVER

Name of Driver	PHANG SUE MIN
NRIC No	SXXXX205A
Date Of Birth	23/07/1989
Occupation	Outdoor

Date Of Driving Pass	07/09/2010
Driving experience	10 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84182992
Alt. Phone Number	-
Email Address	AHBOYPHANG@HOTMAIL.COM
Address	APT BLK 877 TAMPINES ST 84 #04-54
Address complement	-
Postcode	520877
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Major/Minor Rd
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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?	Yes
Police Station Name	Eunos Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18004439999
Alt. Police Station Phone No	(Fax) +65-62444376
Police Station Address	Blk 629 Bedok Reservoir Road #01-1620 Singapore 470629
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?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EU1222A
Vehicle Manufacturer	Honda
Vehicle Model	Civic
Vehicle Variant	-
Vehicle Colour	Blue
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person PHANG SUE MIN
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? GBH3969U
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN**IMPORTANT NOTICE**

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2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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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.

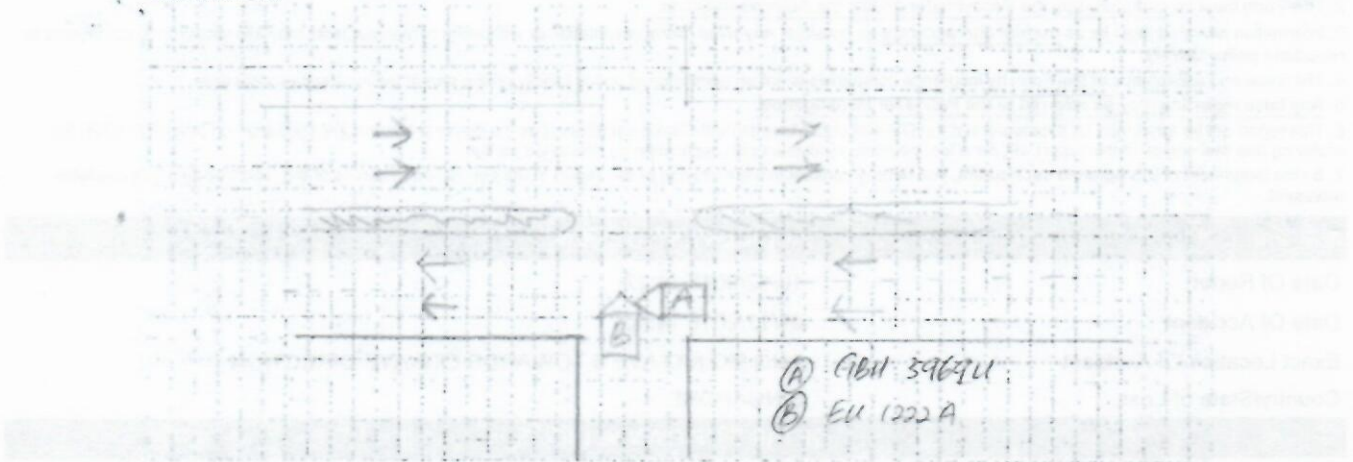


Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

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

Vehicle Owner Particulars

Owner ID Type: Business
Owner ID: 642W

Vehicle Details

Vehicle No.: GBH3969U
Vehicle to be Exported: No
Intended Deregistration Date: 02 Feb 2021
Vehicle Make: TOYOTA
Vehicle Model: HIACE VAN TURBO 5DR MT
Primary Colour: White
Manufacturing Year: 2018
Engine No.: 1KD2791938
Chassis No.: JTFHT02P900241695
Maximum Power Output: -
Open Market Value: \$28,138.00
Original Registration Date: 16 May 2018
First Registration Date: 16 May 2018
Transfer Count: 0
Actual ARF Paid: \$1,407.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 15 May 2028
COE Category: C - Goods Vehicle & Bus
COE Period(Years): 10
PQP Paid: \$30,086.00
COE Rebate Amount: \$21,917.00
Total Rebate Amount: \$21,917.00

The information contained herein is correct as at 02 Feb 2021

OK



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7 vehicles

hiace

Advanced Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	hiace		Any	Any	2018	Any	Any	Any	Available
	Toyota Hiace 3.0M		\$62,800	\$8,530 /yr	13-Jun-2018	2,982 cc	78,000 km	Van	Avail
	Fuel Type: Diesel 1 Owner, Low Mileage Done Only 78,000Km, 100% Loan Available, High Trade In. Faster Auto Trading Posted: 27-Jan-2021 Tags: 2018 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace 3.0M		\$63,800	\$8,610 /yr	02-Jul-2018	2,982 cc	57,197 km	Van	Available
	Fuel Type: Diesel Only 1 Owner! Vehicle As Good As New, With No Repairs Needed! Low Mileage! See It To Believe It! High In House Loans And High Trade In Options Are Available. Contact Our Sales Representatives To Inquire Or To Arrange For A Viewing! Don't Wait! Posted: 01-Feb-2021 Tags: 2018 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace 2.8A DX		\$67,800	\$9,030 /yr	07-Aug-2018	2,754 cc	-	Van	Available
	Fuel Type: Diesel Fires Sales! Very Well Maintain By Owner, Not Use Often, Low Mileage. Automatic Gearbox With Covered Side Panel. Highly Suited For Goods Delivery And Quick Storage. Price Negotiable Only For Genuine Buyer! Look No Further, Flexible Loan And Trade In Welcome. Co... Posted: 01-Jan-2021 Tags: 2018 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace Commuter 2.8A GL		\$75,800	\$9,820 /yr	22-Oct-2018	2,754 cc	-	Bus	Available
	Fuel Type: Diesel COE Up 5k Too Expensive To Get New Hiroof? We Have Nice White 2yr Old High Roof Available. Monthly Installment 1K. All Seats Tip Top Condition Like New. Ready To Go No Need Touch Up. High Trade In, Flexible Loan, Fast Handover. Buy Before COE Price Go UP Again.... ABS Bus Pte Ltd Posted: 25-Jan-2021 Tags: 2018 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Convenience & Safety Night Time Driving Auto-Dimming Rear View Mirrors eliminate the glare of headlights behind you for safer nighttime driving More info about this product								
	Toyota Hiace Commuter 2.8A GL High Roof		\$69,999	\$9,070 /yr	22-Oct-2018	2,754 cc	-	Bus	Available
	Fuel Type: Diesel Online Sales Available 24/7. Please Call Sales Staff For Any Enquires! Popular Toyota High Roof 14 Seater Commuter Model! Cheapest In SG! Full Accessories! Can Register Excursion Private Hire Or Private Bus. No Gimmicks! Call Our Sales Executive And Grab It Before It's... Net Link Partners Pte Ltd Posted: 29-Dec-2020 Tags: 2018 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace Commuter 2.8A		\$70,000	\$9,060 /yr	24-Oct-2018	2,754 cc	-	Bus	Available
	Fuel Type: Diesel ICE- (Optional) Front:DLS 3way Sound System Rear:DLS 2way Speaker x 4; 12" Woofer x 2 -Undercarriage- (Optional) Front_UI Vehicle_Stabilizer Bar Rear_Cusco_Stabilizer Bar -Wheel- (Optional) Fabulous PANDEMIC LW10 Size: 17", All Optional Item Will Be Repla... Posted: 19-Jan-2021 Tags: 2018 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
Compare	yota Hiace Commuter 2.8A		\$76,800	\$9,740 /yr	20-Dec-2018	2,754 cc	-	Bus	Available