area and a second			
ASS, REC. BY:	REF:		
	ASSI	GNMENT	
From: Da	ote:	Veh No: SGN311X	Yr Regn: 2010/ Jan
Estimated Cost:		Type: M.Car / M.Cycle / Bus / Van /	
OD / TP / WS / TP RES / OD RES / EVA	/ INV / MV	Truck / Trailer or	
To Inspect Vehicle No:	7 HEV ( HEV		sh. c.c 1797
	- 06 neutr	Colour While.	A/C: Insured / Std / NI / NA
at Workshop m/s	42(50)	Sp.Reading 337441	T/Radio: Insured / Std / NI / NA
of			moured old million
nsured:		Eng/No: ZGE 2000	215089.
Policy No.		C/No: 26 £ 2000 Gen. Cond Good / Fair / Poor / Bur	
Claims No.	- BENEATH	Steering: Inorder / Jammed / Leake	
1	cess:	ESHERI	
(Client's Record)		Brake: Inorder/ Jammed / Leake	
Make of Veh:		Modi: Nil S/Rim / STD A/Rim	
		Tyre Size: F: 195	
(Policy Condition)		R: 195/	
Remark: The veh had commenced its	N/S O/S	BS (DUN / EXNOVA / GY / FS / LIZ	A / MIC / OHTSU / PIR / SUMI /
repair at the time of inspectio	III.	TOYO/YOKO or	
Bal, or Market Value:	· Makana	Front	Rear
DAC Accident Rport: Consis	stent?: Yes or No	R/Bal. 06 mm	R/Bal. 06 mm
GIA / PR Seen: Consis	stent?: Yes or No	L/Bal. 06 mm	L/Bal. 06 mm
Est. Repairs: days	Res.: Yes or No	D.O.A.	D.O.I. 23/02/21
Lum Sum: %	3 Val.: Yes or No	'Survey held at Xin	Hua.
CA / REV / REP. / 24 HRS		Des. of Damages : Frt / Rear / O/S	S / N/S / U/C / Rooftop or
MATERIAL CONTRACTOR CO	Vehicle: IN / OUT	E DEMONESCENT LES LES	
Date:Person Contacted	d:	The U/C / Chassis frame / Bo	dy Structure affected due to collision
Date / Time   Action / Instruction		LAF Expi	7: 31 12 24.
TP AXA.		00 2 27/1	7. 31 12 21.
		ch so two s doubles to	
mv : 28K.			
PV: 152k			
Nett: 12.8K.			
			A STREET, SALES OF STREET
			e Anna Son of Santon Courts
Date/Time, File Pass to? Preli	Report	Days Of Repair:	
- Final	Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?	Vehou	Resultey No. of Tilp.	Transportation:
	Add Fee	: Site Insp (\$	)S ÷ RS,SI
2)	7.000	: Interview (\$	) Photos
Comment Comment	(C) (C) (C)	: Tech. Invs (3	
Report Format:			) Others
Lump Sum / I.B.I: (\$	) -	: Weet end (\$	1

SV0M212M000E / VICOM LTD (VAC) - Sin Ming [575718] ENTRY DATE & TIME: 22/02/2021 16:09 (SGT) SUBMITTED BY: Zarifah Majeed VERSION: 1 (22/02/2021 16:09 (SGT))



# SINGAPORE ACCIDENT STATEMENT

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 3. Information provided must be as truthful and accurate as possible. Any willul misrepresentation of withouting of material facts may allow insurance companies to reputing 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

22/02/2021 16:09 (SGT)

21/02/2021 19:20 (SGT) Singapore

Bukit Batok Road to Choa Chu Kang Way (Filter Lane)

Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SGN311X

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

**Email Address** 

Mobile Phone No

Alternative Phone No

Yes

SG1 CAR PTE. LTD.

2XXXXX744E

SG1CAR@YAHOO.COM

(Phone) +65-97603562

+65-97603562

#### 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

Toyota

Wish

Private hire

No - Claiming third party

Private hire

#### INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

NTUC

Comprehensive

Yes

5109724562-01 (CLASSIC)

#### DRIVER

Name of Driver

NRIC No

Date Of Birth Occupation

ZAIFI BIN MOHAMED YASIN

SXXXX521Z 25/08/1967

Outdoor



Date Of Driving Pass Driving experience

Gender

Mobile Number Alt. Phone Number

**Email Address** 

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

14/03/1988

32 YEARS AND 11 MONTHS

Male

(Phone) +65-92347743

xinhuaworkshop@gmail.com Blk 230 Pasir Ris Street 21 #07-52

510230

No

Hirer

No

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collision - Head to Rear

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? 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?

PASSENGER 1

Name

Gender

PASSENGER 2

Name

Gender

Dry

No 2

Yes

No

Yes

3

No

PASSENGER 1

Male

PASSENGER 2

Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name Police Station Phone No. Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

Yes

Pasir Ris Neighbourhood Police Centre

(Phone) +65-18005852999

(Fax) +65-65855261

1 Pasir Ris Drive 4 #01-01 Singapore 519457

No

#### CIRCUMSTANCES OF ACCIDENT

#### Refer to Sketch Plan

#### ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

Yes

No

No

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SHC5700U Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Taxi Name of Driver Lim Poh Lai NRIC No -1 Contact Number (Phone) +65-90151136 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

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 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
- 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)

Lunderstand, 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 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.

Policyholder's Signature / Date &

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

Sketch Plan

Choo Chu Kang Way

IDAC KAKI BUKIT (VAC) 23 Ka | Bukit Ave 4 #02-0. 51 Spore 415933 Tel: 6741 607 Fax: 674923

Email: vack v@vicom.com

Witnessed by Reporting Quarter B 2021

vehicle A = SGN311X vehicle B = SHC 5700U



	Refer to Police Report T/20210222/2027	
2	Defer Zalf; Bin Mohamad Yosin nect I shoulder Pain	
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# Declaration

IWe declare the foregoing particulars are true in every respect.

537719102

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

IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415935 Tel: 67416697 Fax: 67492305 Email: vackb@vicom.com.sg

Witnessed by Reporting Centre Personnel 2 2 FEB 2021





1 of 4

Report No. T/20210222/2027

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/02/2021 10:39	Vide Report No.:	Station Diary No.:

Informa	ant's Partic				
Name of Informant: ZAIFI BIN MOHAMED YASIN			Address: APT BLK 230 PASIR RIS ST 510230	REET 21 #07-52 SINGAPORE	
	/ ID No.: O / S17905	21Z	Contact No.: Home/Office:	Mobile: 92347743	
Nationality: SINGAPORE CITIZEN		'EN	Email:		
Sex: Male	Age: 53	Date of Birth: 25/08/1967	Type of Informant: Driver		
Race: Malay			Language:	Institution / School Name:	
Occupation: Driving instructor/tester		ster	Driving Licence Information: Class: 2B,2A,2,3,4,5	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/02/2021 19:20	Type of Location Bend	
Location: BUKIT BATO Weather: Clear	K ROAD	Road Surface:		Road Speed Limit:	
Traffic Flow: Tra		Traffic Control:		Traffic Volume: Moderate	
		Not Controlled		Moderate	

Details of V	ehicle Invo	ived				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGN311X	Car	ТОҮОТА	WISH 1.8X A	White	Slightly Damaged	2
SHC5700U	Car	RENAULT	2.0L DCI AUTO D/AB 4DR	Red	No Damage	0



T/20210222/2027

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999

2 of 4 Report No. T/20210222/2027

CONTINUATION OF REPORT

Any Pedestrian	Involved: No				ALC: UNK	
No. of Pedestria			Use of Pe	adpetria	n Cros	nine: NA
Driver	element and the second	Charles and	030 017	suestria	Cros	sing: NA
Name	ZAIFI BIN MOHAMED YASIN			ID No.		S1790521Z
Related Vehicle	SGN311X (Car)			Conta	act No.	92347743
Hospital/Clinic	SINGHEALTH POLYCLINICS - PASIR RIS			Class Drivin Licend Expire	g	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	22/02/2021 Date Disc				NIL	
No. of Days granted Medical Leave 03			Degree of Injury Slight		ş	
Driver			Jog Co o	injury	Oligit	
Name	LIM POH LAI			ID No.		S1340818I
Related Vehicle	SHC5700U (Car)	SHC5700U (Car)			ct No.	90151136
Hospital/Clinic	NIL			Class Driving Licence Expiry	e &	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	Date Discharge NIL		
No. of Days grant	ed Medical Leave	NIL	Degree of	Injury	NIL	

#### Brief Details.

On 21/02/2021 at about 1920hrs, I was driving my vehicle, bearing plate no. SGN311X, along Bukit Batok Rd towards Choa Chu Kang Rd. I was sending 2 of my passengers to their destination located at Choa Chu Kang. I stopped my vehicle after the zebra crossing towards Choa Chu Kang Way, to look out for incoming traffic. Suddenly, I felt an impact from the rear of my vehicle and noticed that there was a taxi, bearing plate no. SHC5100U, behind my vehicle. I got down from the vehicle and noticed that the front of the taxi had hit onto the rear of my vehicle when I was looking out for incoming traffic. The taxi driver got out from his vehicle and we exchanged our particulars. I made a check on both our vehicles and I noticed that there are cracks and dents on the rear bumper of my vehicle however, there was no damages on the taxi. I also made a check on my passengers and was informed that they were fine and do not need to medical attention. The taxi driver also did not suffer any injuries and I did not felt any painfulness at that point of time. We then left the scene shortly after.

On 22/02/2021, I woke up in the morning and felt painfulness on my neck and right shoulder thus, I went to Singhealth Polyclinic located at 1 Pasir Ris Dr 4 and was given a total of 3 days MC dated from 22/02/2021 to 24/02/2021.





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999

Report No. T/20210222/2027

CONTINUATION OF REPORT

### Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of	Officer	Recording	The Report
--------------	---------	-----------	------------

G

Sgt 2 TOH SHIMIN, KIMBERLY

Signature Of Interpreter. Not applicable

Officer In Charge Of Case TP / AEIT /

Insp BOON YEN KIAN Contact No.: 65476172

Authentication Stamp NP168 Signature Of Informant

Date/Time:

22/02/2021 10:39

Classification Of Case



Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999



3 of 4

Report No. T/20210222/2027

CONTINUATION OF REPORT



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

21 Feb 2021 / 22:05:32

Receipt Date/Time:

21 Feb 2021 / 22:05:30

Tax Invoice/Receipt

Receipt No.: ITNET-00000-210221-001385

Previous Receipt No.:

As at 21 Feb 2021/19:00:00 Insurance Co: AXA INSURANCE PTE LTD 1 Insurance Enquiry - SHC5700U	1p claim SHESTOOL	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Enquiry Fee 20210221220405841571		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	Rounding Difference			0.04
	<b>Total Amount Payable</b>			7.45
	Paid By			
	20210221220419215	Direct Debit: eNI (Interne	ETS Debit et Banking)	7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

# THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

# > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	744E
Vehicle Details	7442
Vehicle No.:	SGN311X
Vehicle to be Exported:	No
Intended Deregistration Date:	22 Feb 2021
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8X A
Primary Colour:	White
Manufacturing Year:	2009
Engine No.:	2ZR0441671
Chassis No.:	ZGE200015089
Maximum Power Output:	106.0 kW (142 bhp)
Open Market Value:	\$22,665.00
Original Registration Date:	05 Jan 2010
First Registration Date:	05 Jan 2010
Transfer Count:	3
Actual ARF Paid:	\$22,665,00
Intended PARF Rebate Details	* 000*********************************
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Dec 2024
COE Category:	E - Open Category
COE Period(Years):	5
PQP Paid:	\$19,657.00
COE Rebate Amount:	\$15,165.00
Total Rebate Amount: Message	\$15,165.00
Please note that the Fire COF fault:	

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 22 Feb 2021

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5 vehicles

toyota wish

Model

Depreciation

Eng Cap Anv

Mileage Anv

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Any

Available

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toyota wish

530k to \$35k

Arry

25-Sep-2009

1.797 cc

MPV/

Available

Toyota Wish 1.8A X (COE till 08/2024)

\$31,888

\$9,050 /yr

> 10 year(s)

150,000 km

DIRECT OWNER

Owned This Car For 18 Mth, Spent \$10k To Restore It To Tip-Top Condition, Only Go For Original Parts. Most With Receipt To Prove. Sound System, Engine, All Done Up, Drive For Balance 3 Year Plus Without Hassle. Major Servicing Just Done Jan/2021 (ATF/Spark Plug.

168,000 km

Toyota Wish 1.8A (COE till 05/2026)

\$30,800

\$5,940 /yr

02-May-2006

1,794 cc

MPV

Available

100% Guaranteed Accident Free, Extremely Well Maintained, All Wear And Tear Fully Replaced Receipts Proof, 90% Loan At 3.18%, Guaranteed Loan For Bad Credit/Ex-Bankruptcy, View After Lunch Till 11PM Daily By Appointment Only.

Posted: 11-Feb-2021 Tags: 2006 Toyota Wish, Toyota Wish, Toyota, Wish

Posted: 16-Feb-2021 Tags: 2009 Toyota Wish, Toyota Wish, Toyota, Wish



Toyota Wish 1.8A (COE till 06/2026)

\$33,800

\$6,310 /vr

15-Sep-2006

1,794 cc

MPV

Available

New Headlight, New Leather, New Cooling Coil, New Radiator, New KYB Absorber, New Engine And Gearbox Mountings. Just Done Engine Overhaul On March 2020.

Posted: 09-Feb-2021 Tags: 2006 Toyota Wish, Toyota Wish, Toyota, Wish



Toyota Wish 2.0A (COE till 01/2025)

\$32,800

\$8,470 /vr

06-Jan-2010

1 987 cc

170,000 km

MPV/

Available

High Trade In, High Loan Available! Very Well Maintained By Ex Owner. Monthly \$700.

Posted: 03-Feb-2021 Tags: 2010 Toyota Wish, Toyota Wish, Toyota, Wish



Is your COE expiring? Let us help you renew it!

Getting your COE renewed is easy, fast and affordable. We'll help you renew your COE and get a loan for it. Get the cheapest loan in town and an approval in 2 days without effort! Enquire today,



Toyota Wish 2.0A (COE till

\$34,800

\$9,020 /vr

25-Jan-2010

1.987 cc

121,562 km

MPV

Available

12/2024)

Monthly \$606 x 42 Months Only! 1 Year Free Maintenance In Our In House Workshop! Full VICOM Evaluation Report Provided To Understand The Condition Of The Car, To Give Every Purchase With Assurance And Peace Of Mind.

Yong Lee Seng Motor

Posted: 16-Jan-2021 Tags: 2010 Toyota Wish, Toyota Wish, Toyota, Wish

Save this search criteria, to get email alerts whenever a match is found.

Model

Depreciation

Eng Cap

Mileage

Veh Type

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