ASS. REC. BY: Tay TW REF: CS CT121002718/TIVES ASSIGNMENT Veh No: Date: From: Type: M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Estimated Cost: Truck / Trailer or OD THE WS ITP RES / OD RES / EVA / INV / MV Allion. Make: To Inspect Vehicle No: A/C: Insured / Std / NI / NA Colour at Workshop m/s Sp.Reading T/Radio: Insured / Std / NI / NA Eng/No: Insured: C/No: Policy No. Gen. Cond: Good / Fair / Poor / Burnt Claims No. Sum Insured: Steering: Inorder / Jammed / Leaked / Burnt or Excess: Brake: Inorder / Jammed / Leaked / Burnt or (Client's Record) Modi: Nil / S/Rim / STD A/Rim or Make of Veh: F: _____(851 Tyre Size: (Policy Condition) NIS O/S BS I DUN EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / Remark: The veh had commenced its repair at the time of inspection. TOYO / YOKO or Bal. or Market Value: \$16K. Front Rear IDAC Accident Rport: Consistent? : Yes or No R/Bal. R/Bal. mm mm ∐Bal. Consistent? : Yes or No GIA / PR Seen: D.O.A. Res.: Yes or No days Est. Repairs: 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 The U/C / Chassis frame / Body Structure affected due to collision. Person Contacted: Date / Time Action / Instruction Date/Time, File Pass to? : Preli. Report Days Of Repair: Survey Fee: Resurvey No. of Trip: : Final Report Date/Time, File Return to? Transportation: Add Fee: : Site Insp (\$ S+RS.__SI : Interview (\$ Photos : Tech. Invs (\$ Others Reperformal: Lump Sum / LBJ: /F : Weel end (\$ TOTAL



Automotive Pte Ltd

Main Office:

No. 22, Jalan Kilang, Singapore 159419 Tel: (65) 6476 3333 Fax: (65) 6271 5891 www.mova.com.sg

> Workshop Dept: Block 1008,

Bukit Merah Lane 3. #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Mova Building

26/02/2021

Estimate

Attention :- XA017

26-02-21;18:24 ;

CHINA TAIPING INSURANCE (S) PTE LTD 3 Anson Road #16-00 Springleaf Tower Singapore 079909.

Page # :- 1

Veh# :- SJG7719J

Veh Model :- TOYOTA ALLION 1.5 A

Estimate# :- CK421582

Claim #

ACC. Date :- 26/02/21

Terms

- C.O.D Days

Remarks

U.Price Amounts S\$ Qty Description LIST ITEMS : 1,098.20 1. BOOT LID 1 PC 1,098.20 125.00 2. BOOT LID HINGE RH & LH 1 PC 125.00 PC 55.0014 3. **BOOTLID LOGO** 55.00 1 PC 45.00 ver-**BOOTLID EMBLEM - ALLION** 1 45.00 45.00101_ BOOT LID EMBLEM - A15 PC 5 45.00 1 255.000m 6. **BOOT LID CHROME GARNISH** PC 255.00 BOOTLID WEATHERSTRIP 190.00/11 7. PC 1 190.00 77.50 66 8. **BOOTLID LOCK** PC 77.50 315.00 LHC1-630.00 RH-! TAILLAMP ASSY RH & LH REAR END PANEL - Photo 9. PC 2 555.00 6+ 10. PC 555.00 REAR END PANEL TOP COVER - PWP 155.00 de 11. PC 155.00 1,580.00 de 12. REAR BUMPER PC 1,580.00 REAR BUMPER BRACKET RH & LH 110.00 13. PC 2 55.00 116.00 de 14. REAR BUMPER RETAINER RH & LH 2 PC 58.00 30 50.00mg REAR BUMPER CLIPS PC 15 10 5.00 48.00 X 16. REAR BUMPER REFLECTOR LH PC 48.00 55.00 Appelof 110.00 × REAR BUMPER SIDE RETAINER RH & LH 17. PC 2 LIST TOTAL S\$ 5,244.70 30% DISCOUNT S\$ -1,573.41 3,671.29 LABOUR : TO CUT/WELD REAR END PANEL, KNOCK & STRAIGHTEN REAR BODY MEMBER, SPARE WHEEL PANEL, REMOVE & REPLACE ACCIDENT DAMAGED PARTS, REALIGN ALL CONNECTION 900.00 SPRAY PAINT BOOT LID, REAR FENDER RH & LH, 1000 700 REAR END PANEL, SPARE WHEEL PANEL, REAR BUMPER (PEARL COLOUR) 1,200.00 40. REMOVE & REPLACE LUGGAGE COMPARTMENT INNER TRIM, GARNISH, COVERING 60.00 30 TO APPLY SEAL ON WELDING JOINT 80.00 30 60.00 RUST PROOF AFFECTED AREAS 2,300.00 LABOUR TOTAL S\$



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Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

140344

Veh# :- SJG7719J

Veh Model :- TOYOTA ALLION 1.5 A

:- C.O.D Days

Estimate# :- CK421582

Claim #

Page #

ACC. Date :- 26/02/21

Terms

Remarks

Attention:- XA017

No.

Singapore 079909.

Estimate

CHINA TAIPING INSURANCE (S) PTE LTD

26/02/2021

3 Anson Road

#16-00 Springleaf Tower

Description

26-02-21;18:24

Qty

U.Price Amounts S\$

E. & O.E

NON-TAX AMOUNT S

AMOUNT S\$

5,971.29

GST @ 7 %

417.99

AMOUNT DUE S\$

6,389.28

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD

Tanphin 97415749

" up" 1/3/21 2 1620

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touthin c / hleanto un

5 days.

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:

> Back to OneMotoring

Enquire PARF/CO	Rebate for R	egistered Vehicle
------------------------	--------------	-------------------

Vehicle Owner Particulars	Vernicle
Owner ID Type:	Company
Owner ID: Vehicle Details	978C
Vehicle No.:	SJG7719J
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Feb 2021
Vehicle Make:	TOYOTA
Vehicle Model:	ALLION 1.5 A
Primary Colour:	White
Manufacturing Year:	2008
Engine No.:	1NZD045760
Chassis No.:	NZT2603025975
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$15,553.00
Original Registration Date:	15 Jul 2008
First Registration Date:	15 Jul 2008
Transfer Count:	2
Actual ARF Paid: Intended PARF Rebate Details	\$15,553.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	2
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	14 Jul 2023
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$18,583.00
COE Rebate Amount:	\$8,853.00
Total Rebate Amount: Message	\$8,853.00
	e further renewed. The vehicle must be de-registered upon

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 26 Feb 2021

OK

SGCARMART.COM

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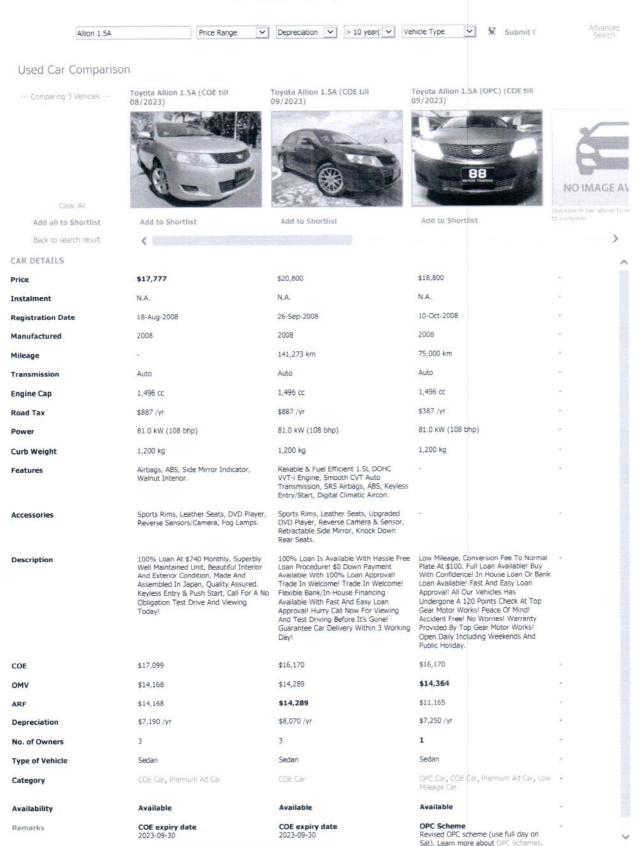
Resources

FASTER CONNECTION BETTER KDR



Forum

GAMEPRO 1GBPS \$52/MTH



SM0M212Q0001 / MOVA AUTOMOTIVE PTE LTD [159722] ENTRY DATE & TIME: 26/02/2021 11:36 (SGT)

SUBMITTED BY: Suann VERSION: 1 (26/02/2021 11:36 (SGT))



SINGAPORE ACCIDENT STATEMENT

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 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

26/02/2021 11:36 (SGT) 26/02/2021 08:30 (SGT) Singapore SINGAPORE Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJG7719J

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

Yes

FIRE ARMOUR PTE LTD

1XXXX3978

firearmour@firearour.com.sg

(Phone) +65-96330393

+65-96330393

VEHICLE PARTICULARS

Manufacturer

Model

Variant Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Toyota

Allion

Private use

No - Claiming third party

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

NTUC

Comprehensive

No

5114818017

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

TAN WEI WEI SXXXX511B 16/05/1985 Indoor

Accident report SM0M212Q0001

Page 1 of 14

Date Of Driving Pass Driving experience

Gender

Mobile Number Alt. Phone Number Email Address

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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

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?

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 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

06/11/2008

Male

128528

Employee

No

No

Clear

Dry

No

No

Yes

1

No

No

No

2

12 YEARS AND 3 MONTHS

firearmour@firearour.com.sg

(Phone) +65-96330393

Collision - Head to Rear

4 JUBILEE ROAD

Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

Address

Address complement

Postcode

YM8627A

-

-

-

Commercial vehicle

SURESH

GXXXX428Q

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-

-

-

Accident report SM0M212Q0001

Page 2 of 14

Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	0
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (iii) 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
- 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.
- 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: 26 fob 2021

830 AM.

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26 fol 2021 830 AM.

Reporting Centre Personnel's Signature

NRIC/FIN No.

14.1		
SKETCH PLAN	taines cle	
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DESCRIBE CIRCUMSTANCES OF THE AC	CIDENT	
LICENSE PLATE SJ67719 J		DATE & TIME: 26 Feb 2021 830AM.
CONTACT NUMBER: 96330393		DRESS firearmor @ frearmove.com. sq
LOCATION AYE PLYOVER TOWARD	S JURONG (After exi	+ 13) 18
		, Tan Ting Wei S8918798B along
Avr , 1 or -	var my contentue	(1) 1417 44
		bent of me abraked. I kept a
sate distance so I was	able to stop in to	me.
The diver of YM8627A	Peethambaram	Sunsh of Company MW
[i + 1 24 1 +d al-	lead or well her	t could not stop in time.
Environce He Livi , abra	11 1 1	1 9 // 1:20
My Car was year or	ided and damage	ed. Sursh's driving liverce
is 68 165428Q		
NOTE: PLEASE NOTE THAT YOUR	INSURER MAY HAVE 14 DA	AYS TIME FRAME FOR YOU TO SUBMIT AN
		ECK YOUR POLICY FOR MORE INFORMATION
Please state:		
() Claim Own Policy	Third Party () Claim Of	D/TP at other workshop) Reporting Only
DECLARATION		Λ
I/We declare the foregoing particulars are tr	ue in every respect.	
W (Final)	Me	M
Policyholder's Signature Driv	er's Signature	Reporting Centre Personnel's Signature
Date & Time: 7.6 felo 2021 (Hd	river is not the policyholder)	Name:
8 30 AM Date	e & Time: 26 fob 2021	NRIC/FIN No.
0.00	0.22AM	