

## 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	21/01/2021 17:58 (SGT)
Date of Accident	20/01/2021 17:49 (SGT)
Exact Location of Accident	690 Upper Changi Rd E, Upper Changi (Dt34), Singapore
Additional Location Information	UPP CHANGI RD EAST TWDS PIE(TUAS) EXIT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA7939Z
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YONG YUNN SHII
NRIC No	SXXXX259H
Email Address	YUNN.SHII@YAHOO.COM
Mobile Phone No	(Phone) +65-82239779
Alternative Phone No	+65-82239779

#### VEHICLE PARTICULARS

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

#### INSURANCE COMPANY

Name of Insurance Company	Direct Asia
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MT/00587906/01
Cover Note Number	-

#### DRIVER

Name of Driver	YONG YUNN SHII
NRIC No	SXXXX259H
Date Of Birth	02/03/1970
Occupation	Indoor

Date Of Driving Pass .....	28/03/2006
Driving experience .....	14 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-82239779
Alt. Phone Number .....	+65-82239779
Email Address .....	YUNN.SHII@YAHOO.COM
Address .....	BLK 557 PASIR RIS ST 51#12-207
Address complement .....	-
Postcode .....	510557
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
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? .....	No
Number of vehicles involved in the accident .....	3
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) .....	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? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

MY FRONT VEHICLE STOP AND I MANAGED TO STOP BUT I FELT AN IMPACT FROM VEHICLE B. TOTAL 3 VEHICLE INVOLVED.

#### 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 .....	GX1336R
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Goods vehicle
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-

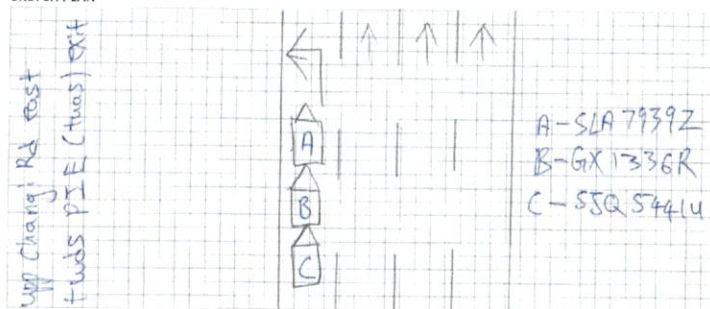
Insurance Company Name ..... -  
Nature Of Damage ..... -  
Details of property damaged in accident ..... -  
No. Of Passenger (Including Driver) ..... -

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number ..... SJQ5441U  
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

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My front vehicle stop and I managed to stop but I felt an impact from vehicle B. Total 3 vehicles involved.

## DECLARATION

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

Policyholder's Signature  
Date & Time: 21 Jan 2024

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

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



SKETCH PLAN

IMPORTANT NOTICE

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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: 21 Nov 2021

Driver's Signature

(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name:  
NRIC/FIN No.:

GIA/MSF WORKSHOP (P) LTD

1



**SINCERE**  
APPRAISAL SERVICES PTE LTD

## VEHICLE DAMAGE INSPECTION REPORT

Our Ref: 43/TP/2020

Date: 2/2/2021

### REFERENCE

Date of loss: 20/1/2021  
Claimant: Yong Yunn Shii

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLA7939Z	Make &	Toyota
Reg date:	17/3/2016	Model	Corolla Altis 1.6L CVT
Colour:	Silver	Engine No:	1ZRX556997
Type:	Motor Car	Chassis No:	MR053REH104546939
Type of Claims:	Third Party	Odometer No:	55654km
		Engine Cap:	1598cc

### CONDITION OF VEHICLE AT THE TIME OF SURVEY (STATIC ONLY)

General Condition:	Good	Steering:	Good	Engine Modification:	Nil
Paint work:	Good	Handbrake:	Good	Pre-accident	
		Footbrake:	Good	Damage:	Nil

### CONDITION OF TYRES

Front Left Size:	Yokohama 205/55R16 70%	Front Right Size:	Yokohama 205/55R16 70%
Rear Left Size:	Yokohama 205/55R16 70%	Rear Right Size:	Yokohama 205/55R16 70%

*The above percentages represent the remaining life of the tyre threads*

### COST OF REPAIRS

Parts	Repairer S\$	Adjuster S\$
	S 2,420.40	S 1,306.15
Labour	S 2,810.00	S 2,330.00
Calculated Cost (S\$) :	S 5,230.40	S 3,636.15

**Recommended Lump Sum Repair Cost (S\$) : \$ 3,000.00**

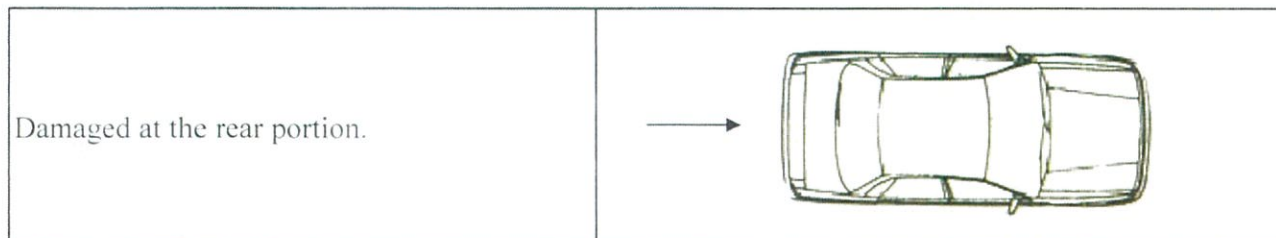
Date of Assignment:	25/1/2021	Inspected At:	Power Auto Car Services
Date Inspected:	25/1/2021		Blk 3012 #01-2026
Est. repair Period:	06 days		Bedok Industrial Park E
			Singapore 489978

**SINCERE APPRAISAL SERVICES PTE LTD** Co.Reg no: 201800639R

60 Paya Lebar Road #07-41 Paya Lebar Square Singapore 409051

Tel : 6636 4628 E-mail : office@sincereappraisal.com.sg

### POINT OF IMPACT



### BRIEF CIRCUMSTANCES OF ACCIDENT

The Insured's vehicle collided onto the Third Party's vehicle along Upper Changi Road East towards PIE Expressway.

### GENERAL DESCRIPTION OF DAMAGES

Our visual inspection of the vehicle revealed that the damages noted are at the rear portion.

### SPECIAL REMARKS

We have inspected the actual damages found on the vehicle and recommend the replacement of parts and repairs accordingly. The estimated repair cost is \$5,230.40. The repairer has agreed to undertake the repairs at our adjusted lump sum amount of \$3,000.00.

We have not authorised the repair. Under normal circumstances, estimated **06** working days are required to repair the vehicle.

We are pleased to advise that the inspection work was carried out accordingly, and hereby submit our Inspection Report and photographs.



**Dave Chang**  
Automotive Appraiser  
AUTO. ENG, CAE, CGI  
MIRTE, MSAAA, MTM

Automotive Appraiser: Dave Chang

*Please note that this report is solely based on our findings at the time and place of inspection. This inspection has been carried out to our best knowledge and ability. Any other liability is hereby excluded.*

## ANNEX A

**REPAIR DETAILS**

## Recommended Parts

No	Qty	Description	Condition	Repairer's Amount	Adjuster's Amount
1	1	Rear bumper assy	warped/dented	\$ 643.50	\$ 643.50
2	1	Rear left bumper side retainer	bent/necessary	\$ 36.90	\$ 36.90
3	1	Rear right bumper side retainer	bent/necessary	\$ 36.90	\$ 36.90
4	1	Rear left bumper bracket	bent/necessary	\$ 55.60	\$ 55.60
5	1	Rear right bumper bracket	bent/necessary	\$ 55.60	\$ 55.60
6	1	Rear bumper reinforcement	dented	\$ 279.90	\$ 279.90
7	1	Rear left bumper reflector	bent/necessary	\$ 69.90	\$ 69.90
8	1	Rear right bumper reflector	bent/necessary	\$ 69.90	\$ 69.90
9	1	Rear bootlid assy	repair	\$ 749.20	\$ -
10	1	Rear end panel	repair	\$ 669.80	\$ -
				<hr/>	<hr/>
				\$ 2,667.20	\$ 1,248.20
Less 25%				\$ 666.80	\$ 312.05
				<hr/>	<hr/>
				\$ 2,000.40	\$ 936.15
 <u>Special Nett Items</u>					
1	1	Rear no plate with garnish	necessary	\$ 100.00	\$ 80.00
2	2	Rear bumper reverse sensor	malfunction	\$ 270.00	\$ 250.00
3	1 set	Rear bumper clips	necessary	\$ 50.00	\$ 40.00
				<hr/>	<hr/>
				\$ 420.00	\$ 370.00
 <b>Total parts</b>					
				<hr/>	<hr/>
				\$ 2,420.40	\$ 1,306.15



## ANNEX B

### REPAIR DETAILS

#### Recommended Labour

No	Description	Repairer's Amount	Adjuster's Amount
1	Labour for panel beating, cut, weld, straighten rear affected area and replace rear damaged parts.	\$ 1,200.00	\$ 1,000.00
2	To putty and spray painting rear portion.	\$ 1,200.00	\$ 1,000.00
3	To check rear lighting and wiring.	\$ 50.00	\$ 30.00
4	To remove and install rear inner garnish and trim to facilitate the repair.	\$ 140.00	\$ 120.00
5	To apply anti rust proofing to rear affected area.	\$ 140.00	\$ 120.00
6	To remove and install rear bumper reverse sensor.	\$ 80.00	\$ 60.00
Total labour :		\$ 2,810.00	\$ 2,330.00

## ANNEX C

### REPAIR DETAILS

#### Adjusted Repair Cost

	Repairer's Amount	Adjuster's Amount
Total parts :	\$ 2,420.40	\$ 1,306.15
Total labour :	\$ 2,810.00	\$ 2,330.00
Total repair cost :	\$ 5,230.40	\$ 3,636.15

Adjusted Repair Cost (Lump Sum Repair)

\$ 3,000.00

2020/2/21

Power Auto Car Services  
Blk 3012 Bedok Industrial Park E  
#01-2026 Singapore 489978  
Tel: 64419949

Date : 04 February 2021

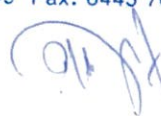
Yong Yunn Shll  
C/O Power Auto Car Services  
Blk 3012 #01-2026  
Bedok Industrial Park E  
Singapore 489978

RE: Final Repair Bill For Vehicle No: SLA 7939Z TOYOTA ALTIS 1.6L

<u>Date</u>	<u>Description</u>	<u>Amount</u>
	Being Lump Sum Cost to repair the abovementioned vehicle as recommended by an independent surveyor for the supply of spare parts, repair and other misc., charges.	
	Lump sum cost to repair:-	3,000.00

Singapore dollars : Three Thousand only

POWER AUTO CAR SERVICES  
Blk 3012 Bedok Ind. Pk E  
#01-2026 Singapore 489978  
Tel: 6441 9949 Fax: 6445 7032





# KT AUTOMOBILE TRADING

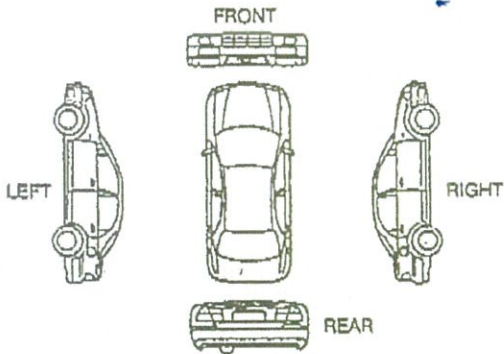
Blk 3012 Bedok Ind. Park E #01-2046 Singapore 489978.

(Bedok North Ave. 4) Tel: 6443 8631 Fax: 6448 5177

Reg. No.: 532550211

## VEHICLE RENTAL AGREEMENT

VRA No. 1388

<b>HIRER'S &amp; DRIVER'S PARTICULAR</b>		Veh No: <u>SGN 3051B</u>	<input checked="" type="radio"/> Auto <input type="radio"/> Manual
Name (As in I/C): <u>YONG YUNN SHI</u>		Make & Model: <u>TOYOTA AYX</u>	
NRIC/PASSPORT No: <u>S 7071259 H</u>		Mileage Out:	Mileage In:
Company Name: <u>MOLE ASIA</u>		Date Out: <u>28/1/21</u>	Date In: <u>28/1/21</u>
Driving License No: <u>S 7071259 H</u>		Time Out: <u>2.10pm</u>	Time In: <u>4pm</u>
Date of Birth: <u>02-03-1976</u>		Petrol Out: <u>Empty</u> 1/8 1/4 3/8 1/2 3/4 7/8 Full	
Tel / HP No: <u>8 223 9779</u>		Petrol In: <u>Empty</u> 1/8 1/4 3/8 1/2 3/4 7/8 Full	
Address (Res): <u>Blk 557 Posir Rd Sg. 51</u>		<b>RENTAL RATE</b>	
<u># 12-207 9 (510557)</u>		Daily : S\$ <u>130</u>	No Of Day: <u>03</u>
Address (Company):		Weekly : S\$	No Of week:
		Monthly : S\$	No Of Month:
		Other : S\$	
<b>ADDITIONAL DRIVER'S PARTICULAR</b>		<b>CASH/CHEQUE</b>	
Name (As in I/C):		Recovery Of Damages : S\$	
NRIC/PASSPORT No:			
Driving License No:		Total Amount : S\$ <u>\$390</u>	
Date of Birth:		Down Payment On This Agreement	
Tel / HP No:		Deposit	
Address (Res):		Total Paid By Hirer	
		Total Amount From Hirer On This Agreement	
		Amount Refund To Hirer	
Hirer is responsible for the first \$ <u>1500/p</u> excess for collision / damage to first party. (i.e.) KT Automobile Trading (including windscreen) and also first \$ <u>1500/p</u> excess for collision / damage to third party's vehicle for each and every accident / damage. Collision Damage Waiver does not cover damage due to MISSING ACCESSORIES, SANDBLASTING, UNDERCARRIAGE DAMAGES AND DRINK-DRIVING			
I, _____ NRIC NO: _____ undersigned to take over the Veh No: _____ from KT AUTOMOBILE TRADING. I am aware of bearing the full responsibility of any incident and Traffic fine incurs after the hand over of this said vehicle.		<b>REMARK:</b>  AIR/CON RADIO CASSETTEE CD PLAYER	

Driver's Signature: \_\_\_\_\_

Additional Driver's Signature: \_\_\_\_\_



FOR 24HOURS VEHICLE BREAKDOWN,  
ACCIDENT, TOWING, ETC...  
JACKSON: 9617 6695

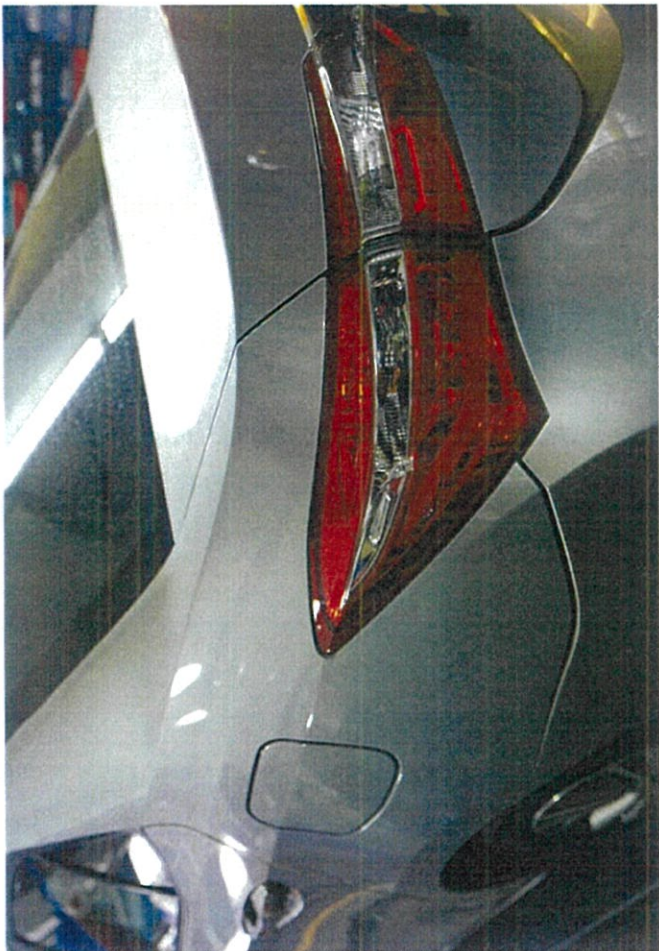
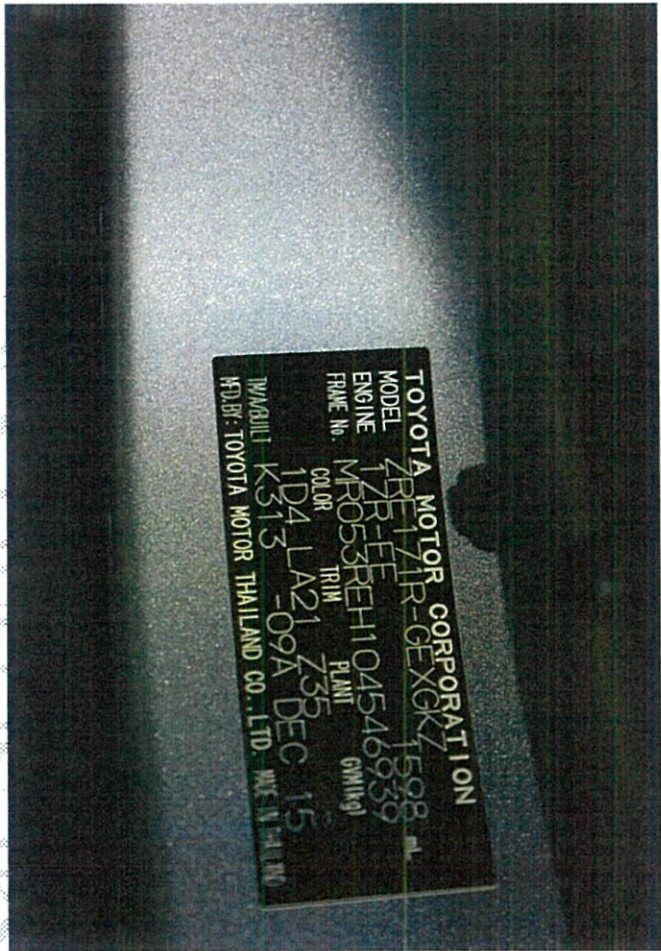
### \*IMPORTANT\*

ONLY PERSON ABOVE 25YRS OF AGE OR WITH MORE THAN 2 YEARS DRIVING EXPERIENCE. AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.

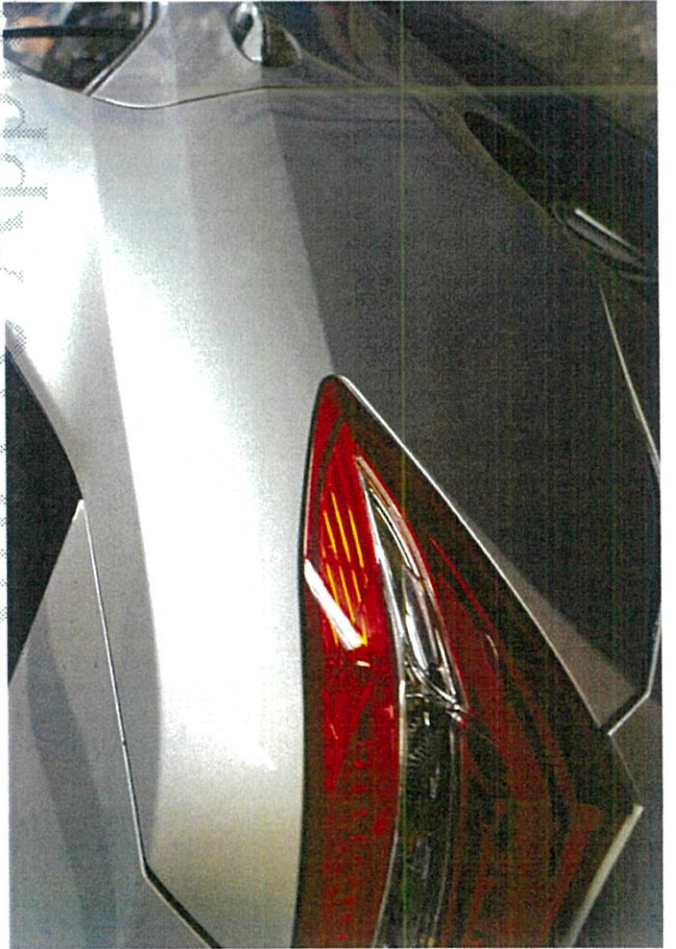
VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY KT AUTOMOBILE TRADING

VEHICLE CHECKED OUT BY: <u>mes</u>	VEHICLE CHECKED IN BY: <u>mes</u>	Return by Hirer on this Agreement and the vehicle confirm return.
TIME CHECK OUT: <u>1410hrs.</u>	TIME CHECK IN: <u>4pm</u>	Signature / Date <u>mes</u>

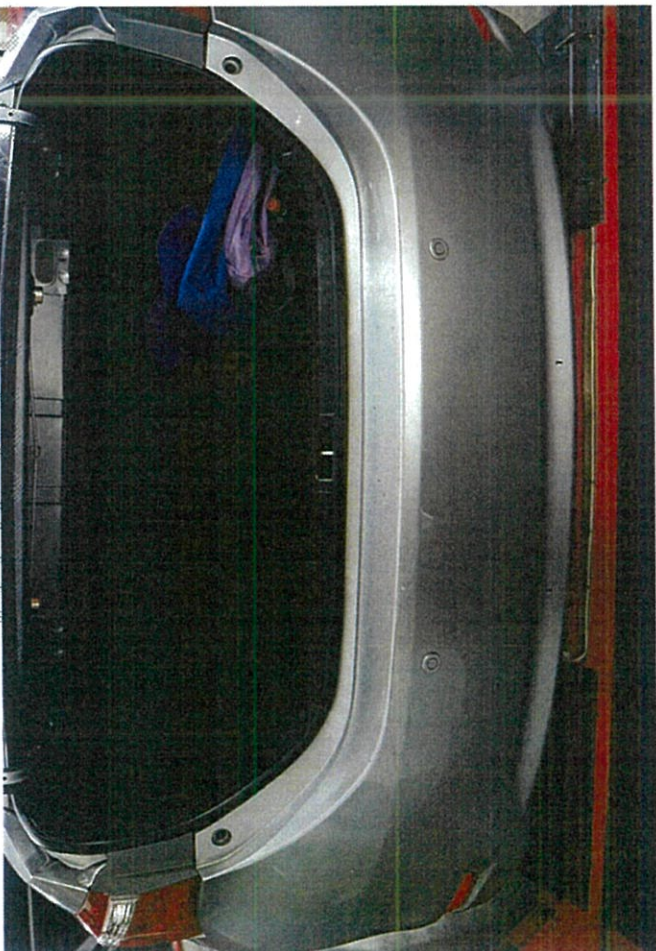
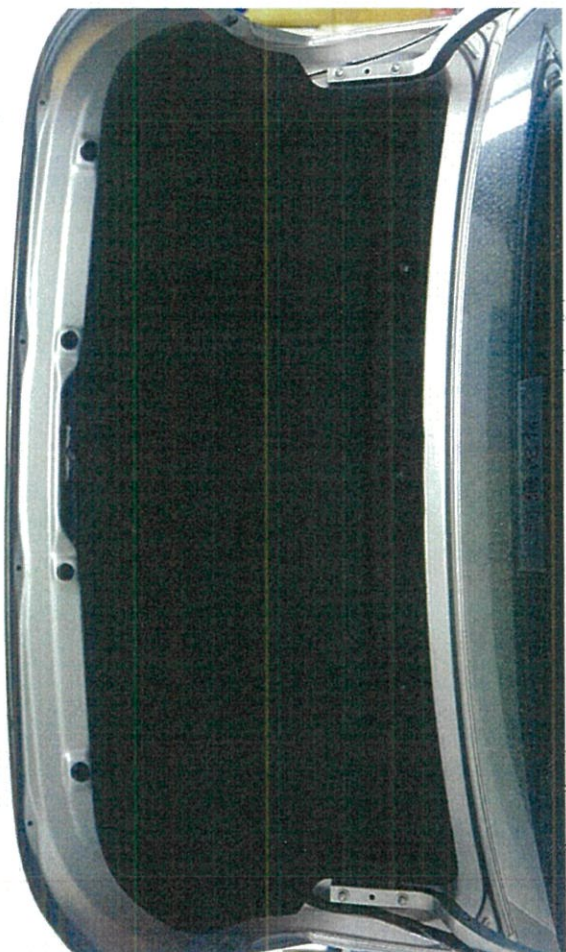




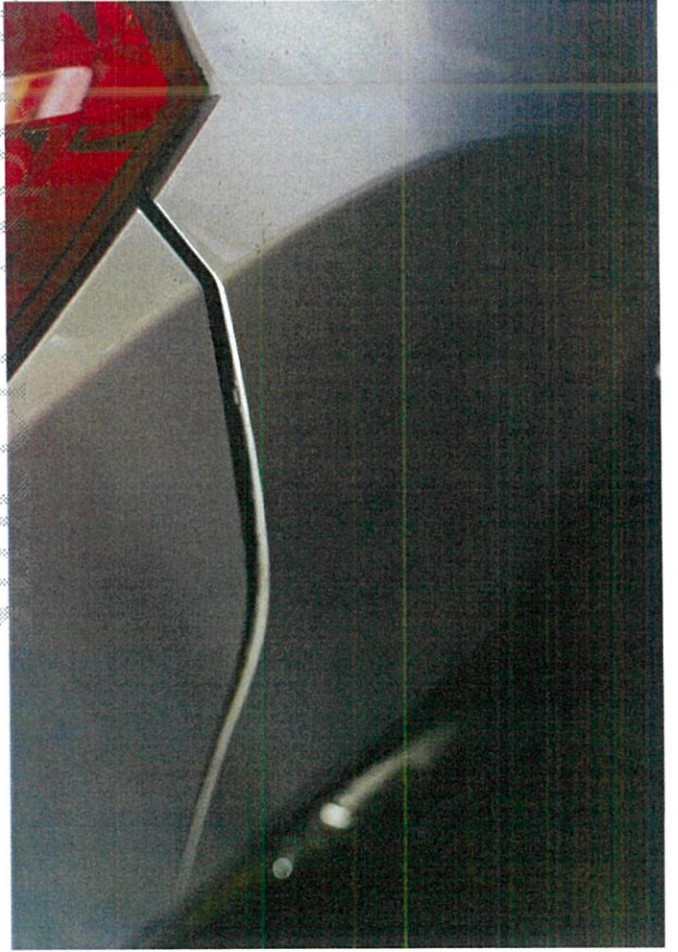
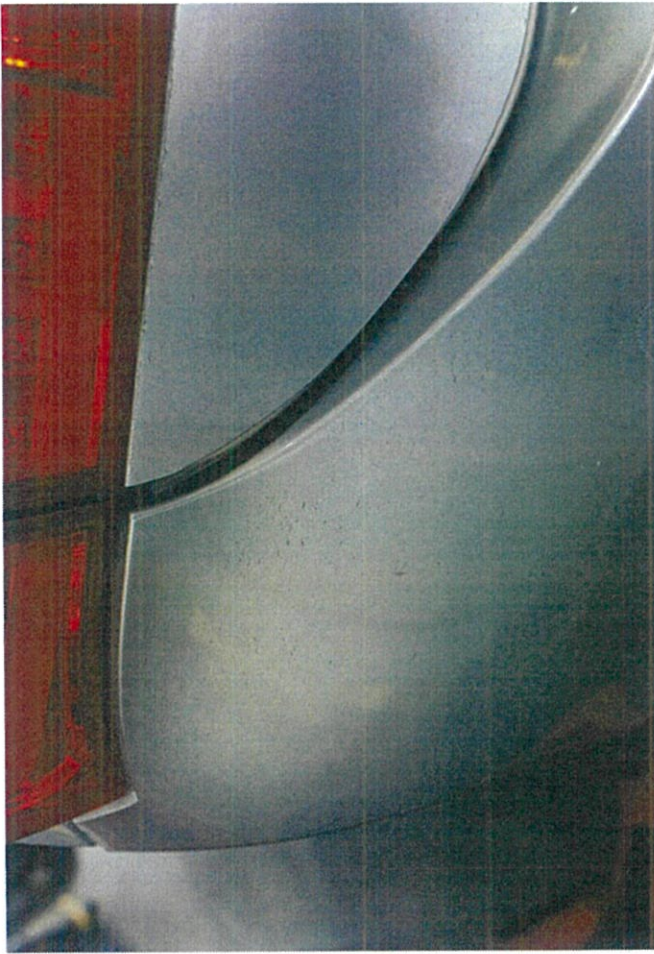




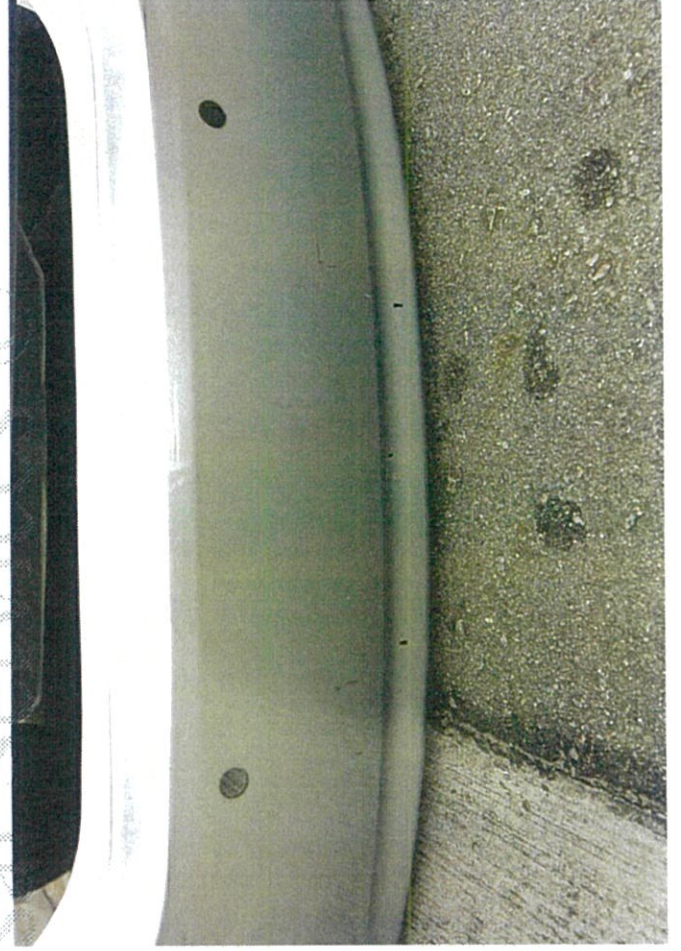




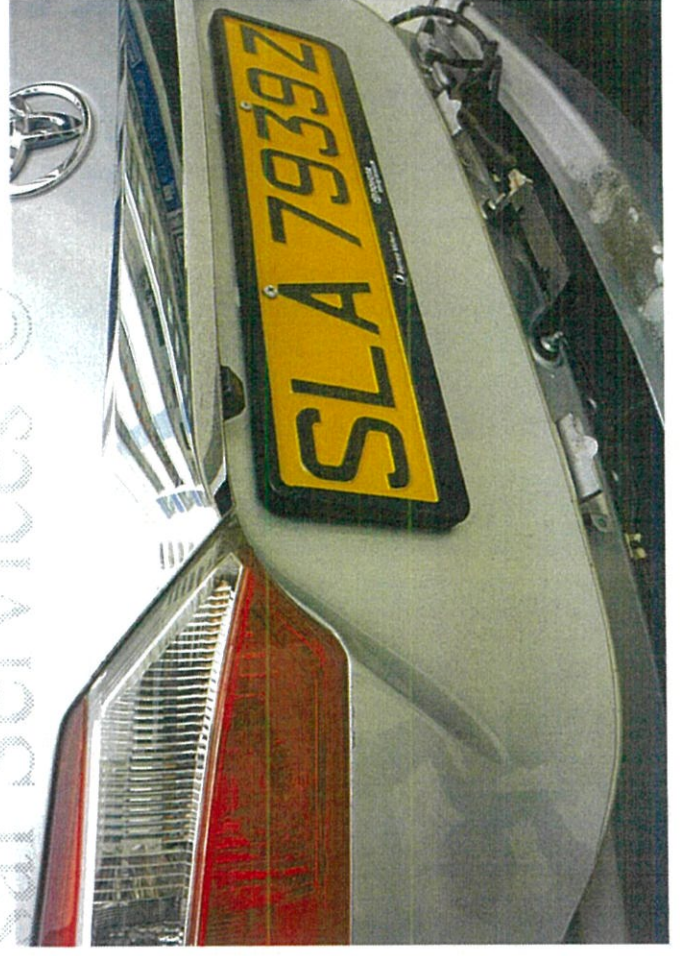




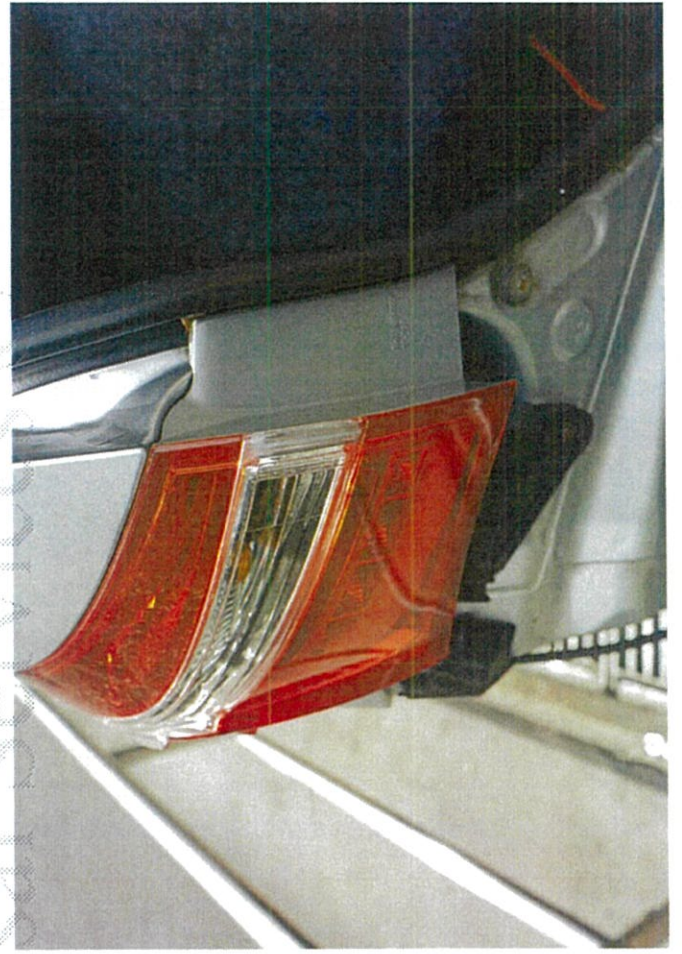




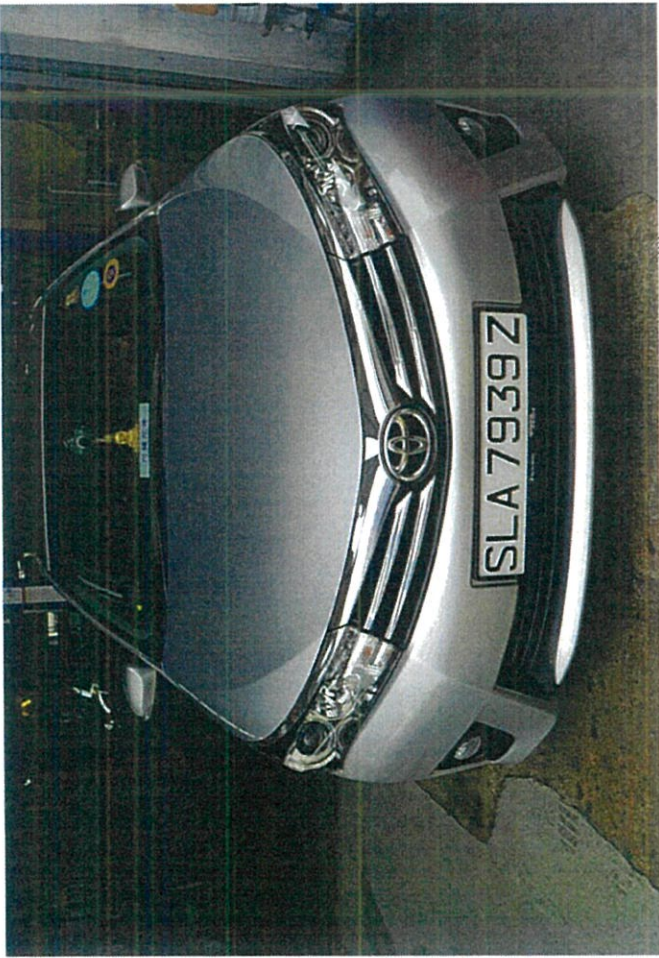












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