

REF:

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: _____

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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: PC 8622Y. Yr Regn: 2020 / Jun.

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

Truck / Trailer or Mini Bus.

Make: Toyota Hrace. C.C. 2754

Colour: White. A/C: Insured / Std / NI / NA

Sp.Reading: 66205. T/Radio: Insured / Std / NI / NA

Eng/No: GDH223200/855

C/No: GDH223200/855

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: 195R15C
R: 195R15C.

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front		Rear			
R/Bal.	06	mm	R/Bal.	06	mm
L/Bal.	06	mm	L/Bal.	05	mm
D.O.A.			D.O.I.	05/03/21.	

Survey held at

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

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

N/S	O/S

Date / Time	Action / Instruction
	TPAXA.
	mV : 78K.
	PV : 20.6K
	Nett : 57.4K

☐ : Prel. Report
☐ : Final Report

1)

Date/Time, File Return to?

2)

Report Format :

Lump Sum / LBJ: (\$)

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

Photos

Others

TOTAL

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	03/03/2021 15:03 (SGT)
Date of Accident	02/03/2021 17:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SENGKANG WEST WAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC8622Y
-----------------------------	---------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SCHOOLBER PTE LTD
Company Reg No	2XXXXX149R
Email Address	charlemagne@schoolber.com.sg
Mobile Phone No	(Phone) +65-92994806
Alternative Phone No	+65-92994806

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	TOYOTA / HIACE COMMUTER GL 2.8 AT 2WD 4DR LWB
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	Bus

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5115420682-01
Cover Note Number	-

DRIVER

Name of Driver	CHEONG HAI FOOK
NRIC No	SXXXX037J
Date Of Birth	25/04/1950
Occupation	Outdoor

Date Of Driving Pass	22/01/1968
Driving experience	53 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93297818
Alt. Phone Number	-
Email Address	charlemagne@schoolber.com.sg
Address	BLK 366 YISHUN RING ROAD #09-1506
Address complement	-
Postcode	760366
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	Side Swipe
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?	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

THE INCIDENT TOOK PLACE ON THE ABOVEMENTIONED LOCATION. AFTER THE TRAFFIC LIGHT TURN GREEN TO MY FAVOUR. I THEN MOVE OFF, THAT IS WHEN VEHICLE SH8896L MAKE A SUDDEN RIGHT AND THUS THE COLLISION TOOK PLACE.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH8896L
Vehicle Manufacturer	Hyundai
Vehicle Model	HYUNDAI / I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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)**

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' 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;

(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 & Time

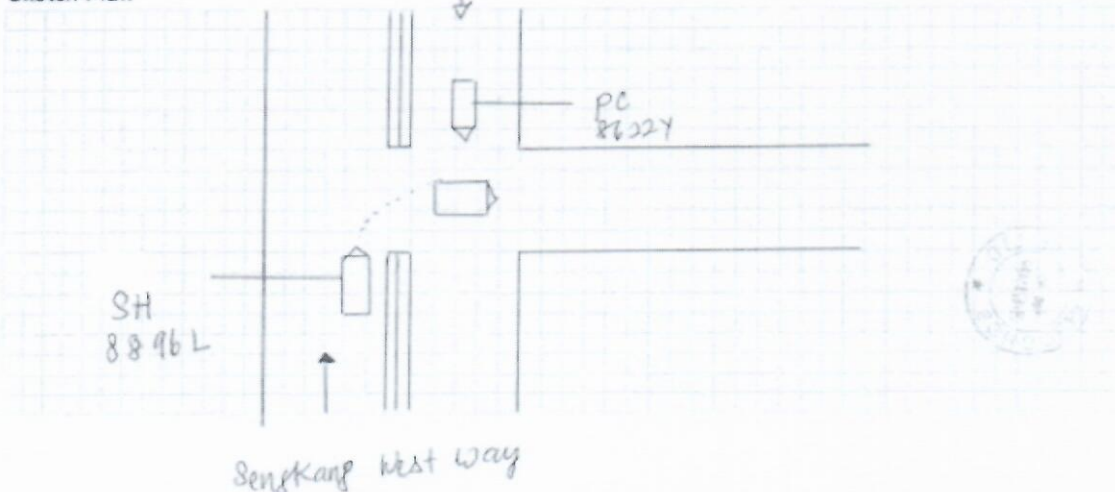
Driver's Signature (if driver is not the policyholder) / Date & Time

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg


Witnessed by Reporting Centre
Personnel

03 MAR 2021

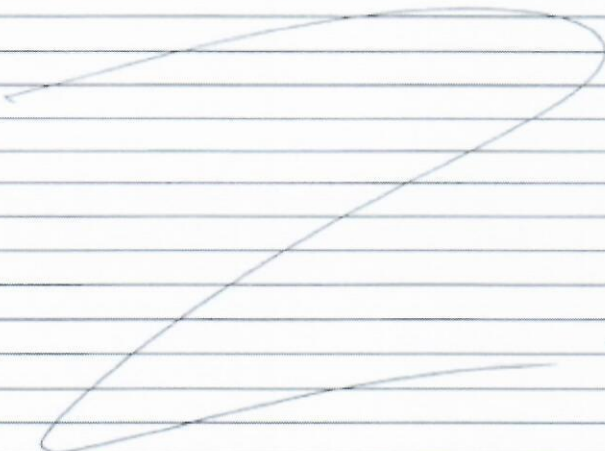

Sketch Plan



Describe Circumstances of the Accident



Ref
e-file

Declaration

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



IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg

Witnessed by Reporting Centre Personnel

03 MAR 2021

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	149R
Vehicle Details	
Vehicle No.:	PC8622Y
Vehicle to be Exported:	No
Intended Deregistration Date:	06 Mar 2021
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE COMMUTER GL 2.8 AT 2WD 4DR LWB
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	1GD8431988
Chassis No.:	GDH2232001955
Maximum Power Output:	-
Open Market Value:	\$46,690.00
Original Registration Date:	17 Jan 2020
First Registration Date:	17 Jan 2020
Transfer Count:	0
Actual ARF Paid:	\$2,335.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	16 Jan 2030
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$23,200.00
COE Rebate Amount:	\$20,555.00
Total Rebate Amount:	\$20,555.00

The information contained herein is correct as at 06 Mar 2021

OK

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\$768, 2.89%pa, 2 yr Warranty
by GV Motorworks
GV Credit Pte Ltd [StarAd](#)



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20 results/page






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Advanced Search

190 vehicles

hiace

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	hiace	Any	Any	< 2 year(s) old	Any	Any	Any	Available
	Toyota Hiace 2.8A GL	\$102,800	\$11,640 /yr	02-Jan-2020	2,755 cc	-	Van	Available
Fuel Type: Diesel LATEST NEW HIACE LWB VAN VARIANTS! More Than 20 Units Available On Hand Ready For Immediate Delivery. Plenty Of Different Models On Hand To Serve The Commercial Vehicles Market! Highest Specs, Premium Safety Features Inclusive. Guaranteed Package Pri...								PREMIUM AD
Car (S) Pte Ltd Posted: 02-Mar-2021 Tags: 2020 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace 3.0M	\$83,800	\$9,480 /yr	07-Jan-2020	2,982 cc	-	Van	Available
Fuel Type: Diesel Cheapest Deal In The Market!, Sincere Seller, Brand New Toyota Hiace Euro6 Borneo Unit When You Purchase, 100% Strictly No Gimmicks, Genuine Price Including GST, Guaranteed Package! Your No.1 Choice Of Van For All Successful Business Owners! Toyota Bor...								
KSL Automotive Pte Ltd Posted: 05-Feb-2021 Tags: 2020 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
	Toyota Hiace Commuter 2.8A GL	\$79,800	\$9,020 /yr	09-Jan-2020	2,754 cc	-	Bus	Available
Fuel Type: Diesel 2020 Toyota Hiace Commuter High Roof 14 Seaters, New Engine, Low Consumption, Under Warranty. Think One Automobile & Trading Posted: 17-Feb-2021 Tags: 2020 Toyota Hiace, Toyota Hiace, Toyota, Hiace								PREMIUM AD
	Toyota Hiace Commuter 2.8A GL High Roof	\$78,800	\$8,890 /yr	13-Jan-2020	2,754 cc	29,254 km	Bus	Available
Fuel Type: Diesel 1 Owner Only, 100% No Gimmick On Price Viewing At Our Showroom Now, 100% Accident Free Bonus Smoke Free, Super Low Mileage. Totally Like New Condition, Hurry Bring Yr Old Lousy Bus To Trade This Wonderful Excellent Outstanding Iron Horse Back Home Now. T... Posted: 19-Feb-2021 Tags: 2020 Toyota Hiace, Toyota Hiace, Toyota, Hiace								
GET YOUR COE RENEWAL LOAN 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 Hiace Commuter 2.8A GL	\$79,000	\$8,890 /yr	21-Jan-2020	2,754 cc	30,000 km	Bus	Available
Fuel Type: Diesel Almost Brand New. Direct Owner. PM To Find Out More. Call Me Now. Posted: 27-Feb-2021 Tags: 2020 Toyota Hiace, Toyota Hiace, Toyota, Hiace								DIRECT OWNER

Compare [4]

Select used cars to Compare or Add to Alert



Toyota Hiace
Commuter 2.8A GL
01-Aug-2019



Toyota Hiace
Commuter 2.8A GL
25-Nov-2019



Toyota Hiace
Commuter 2.8A GL
09-Dec-2019



Toyota Hiace
Commuter 2.8A GL
09-Jan-2020

Shortlist [4]

Add to Shortlist

Compare Now

Clear All

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 03 Mar 2021 / 14:21:38

Receipt Date/Time : 03 Mar 2021 / 14:21:21

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210303-002313

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
	Result of Insurance Enquiry - SH8896L			
	As at 02 Mar 2021/18:00:00			
	Insurance Co: AXA INSURANCE PTE LTD			
1	Insurance Enquiry - SH8896L			
	Enquiry Fee	7.00	0.49	7.49
	20210303141959999044			
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	20210303142024140	Direct Debit: eNETS Debit (Internet 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.