

(08/11/13) wef

ASS. REC. BY: PANAL

REF:

CS3/ASM21003497/Rt/f3

6577

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD (TP) / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: SJP924at Workshop m/s CARZONRENTof 53, UBI AVE 1 #05-15Insured: AXA

Policy No. _____

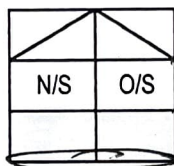
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 119K

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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SJP924 Yr Regn: 2019 / NOVType: (M)Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: TOYOTA CAMRY HYBRID 2.5 c.c 2487Colour: BROWN A/C: Insured / Std / NI / NASp. Reading: 28900 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: AXUH 701023545Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 215/55R17R: 215/55R17BS / DUN / EXNOVA / GY / FS / LIZA / (MIC) / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 11/03/21 D.O.I. 17/03/21Survey held at CARZONRENTDes. of Damages: Frt (Rear) / O/S / N/S / U/C / Rooftop or

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

Date / Time _____ Action / Instruction _____

Repair 1m7 - 59kESTIMATE RANGE OF REPAIR - (5k - 6k) / 7 days

submit PRS REPORT

Date/Time, File Pass to?

1) 19/3

Date/Time, File Return to?

2) _____

Report Format: _____

Lump Sum / I.B.I: (\$ _____)

☐

Preli. Report

☐

Final Report

Days Of Repair: 7

Resurvey No. of Trip: _____

Add Fee:

☐

Site Insp (\$ _____)

☐

Interview (\$ _____)

☐

Tech. Invs (\$ _____)

☐

Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS, SI

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 11/03/2021 17:18 (SGT)
Date of Accident 11/03/2021 15:05 (SGT)
Exact Location of Accident KPE, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJP92G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ENG LI HIANG
NRIC No S7812659J
Email Address ENGVIVIEN17@GMAIL.COM
Mobile Phone No (Phone) +65-96671343
Alternative Phone No +65-90094098

VEHICLE PARTICULARS

Manufacturer Toyota
Model Camry
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? No - Claiming third party
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company Axa
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA555244
Cover Note Number -

DRIVER

Name of Driver ONG PENG HOCK
NRIC No S7346121I
Date Of Birth 23/11/1973
Occupation Indoor

Date Of Driving Pass	29/07/1994
Driving experience	26 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90094098
Alt. Phone Number	-
Email Address	ENGIVIVEN17@GMAIL.COM
Address	32 JALAN HIKAYAT
Address complement	-
Postcode	769876
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Head to Rear
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	ENG LI HIANG
Gender	Female

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

REFER TO THE ATTACH
STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

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	SLA2744B
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)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person ENG LI HIANG
 Address
 Address Complement
 Post Code
 Approximate Age Years Old
 Injuries Sustained
 Injured person in which vehicle?
 Were seat belts worn? SJP92G
 Was this injured conveyed to hospital by ambulance?

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' 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.

Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

11/3/21

KPE

EUAPS LINK

A-B

A-SJP92G
B-SLA2744B

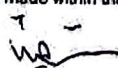
Describe Circumstances of the Accident

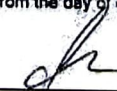
I WAS driving from CPE Slip road towards Eunos Link. Before turning out to the main road, I stopped my car to check traffic for oncoming vehicle. After stopped about 3-5 second, I felt an impact from behind and realise there was a car B(SLA 2744B) hit my car from the back.

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.


Policyholder's Signature / Date & Time
4/03/21


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

Witnessed by Reporting Centre Personnel

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	659J
Vehicle No.:	SJP92G
Vehicle to be Exported:	No
Intended Deregistration Date:	18 Mar 2021
Vehicle Make:	TOYOTA
Vehicle Model:	CAMRY HYBRID 2.5G CVT
Primary Colour:	Grey
Manufacturing Year:	2018
Engine No.:	A25A0118751
Chassis No.:	AXVH701023545
Maximum Power Output:	155.0 kW (207 bhp)
Open Market Value:	\$36,546.00
Original Registration Date:	11 Nov 2019
First Registration Date:	11 Nov 2019
Transfer Count:	0
Actual ARF Paid:	\$33,165.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	10 Nov 2029
PARF Rebate Amount:	\$24,873.00
COE Expiry Date:	10 Nov 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$40,009.00
COE Rebate Amount:	\$34,592.00
Total Rebate Amount:	\$59,465.00

The information contained herein is correct as at 18 Mar 2021

OK

Toyota Camry Hybrid 2.5A G

Overview

Financial

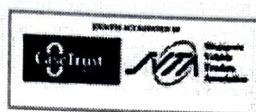
Accessories

Similar

Research

Photos

Map



Price	\$113,800	Fuel Type	Petrol-Electric
Depreciation ?	\$11,630 /yr View models with similar depre	Reg Date	31-May-2019 (8yrs 2mths 12days COE left)
Mileage	13,903 km (7.7k /yr)	Manufactured ?	2018
Road Tax ?	\$1,784 /yr	Transmission	Auto
Dereg Value ?	\$62,461 as of today (change)	OMV ?	\$39,081
COE ?	\$42,564	ARF ?	\$36,714
Engine Cap	2,487 cc	Power	155.0 kW (207 bhp)
Curb Weight ?	1,570 kg	No. of Owners ?	1
Type of Vehicle	Luxury Sedan		

Features

Original Condition. View specs of the Toyota Camry Hybrid (2017)

Accessories

Factory Fitted Interior.

Description

(GAC Certified Pre Owned!) Exclusive High Spec Hybrid G Series. Elegance And Sleek Looking Briarwood Pearl In Colour. Enjoy The Ultimate Drive Of Class Leading Category Defying Luxury Sedan With 1 Year Certified Engine/Gearbox/H-Battery Warranty Supported By 24/7 Roadside Assistance Coverage. Price Stated Are Final With Premium Grooming Included. STA Evaluation Friendly.

Category

PARF Car, Premium Ad Car, Low Mileage Car, Hybrid Cars

Status

Available for sale. Shortlist this car to get alerted whenever the price or availability changes

Location

Price

120K
118K
115K
113K
110K
108K
Jan-19

Click on the