KEF:	2.5. 2.1(2.12
ASS. REC. BY: Sun Pin CS3/GRB210	GNMENT
From: Date:	Veh No: SJN 5649K Yr Regn: 18/02 1/2009 Type(M.Can / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Truck / Trailer or
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Make: Tayota Corolla Axio cc 1496
To Inspect Vehicle No:	Colour Blue. A/C: Insured / Std / N/ NA
at Workshop m/s	Sp.Reading 16 3174 T/Radio: Insured / Std / NI / NA
of	Eng/No:
Insured:	C/No: NZE1416095733
Policy No.	Gen. Cond: Good / Fair / Poor / Burnt
Claims No	Steering: Inorder / Jammed / Leaked / Burnt or
Sulli insuled.	Brake: Inorder / Jammed / Leaked / Burnt or
(Client's Record) Make of Veh:	Modi: Nil /S/Rim / STD A/Rim or
mano of Your	Tyre Size: F: \\\ \{\\$5\/\ 70\\ R\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
(Policy Condition)	R: 185170 R14
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or West a ke.
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm / R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 17/03/2021 D.O.I. 22/03/2021
Lum Sum: % 3 Val.: Yes or No	Survey held at Omega Auto
CA / REV / REP. / 24 HRS Vehicle: IN / OU	Des. of Damages : Frt / Rean / O/S / N/S / U/C / Rooftop or
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	Repair Day 7 days
MV: 19,000	Repair Range.
	\$4,000-\$5,000
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
; Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add F	ee: : Site Insp (\$)s+Rssi
· · · · · · · · · · · · · · · · · · ·	: Interview (\$) Photos
RepetiFormsi:	:Tech. Invs (\$) Others
Lump Sum / LBJ: (%)	: Weelrend (\$
	TOTAL

SS21213I0003 / STA Inspection Pte Ltd[575627] ENTRY DATE & TIME: 18/03/2021 16:32 (SGT) SUBMITTED BY: Mohamed Farez Bin Jalii VERSION: 1 (18/03/2021 16:32 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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

18/03/2021 16:32 (SGT) 17/03/2021 12:40 (SGT) Ang Mo Kio Ave 3, Singapore TRAFFIC JUNCTION OF ANG MO KIO AVENUE 3 TOWARDS HOUGANG Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJN5049K INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner OMEGA AUTO LEASING PTE LTD Company Reg No 2XXXXX724W **Email Address** simjojo3354@gmail.com Mobile Phone No (Phone) +65-90024371 Alternative Phone No (Office) +65-90024371 VEHICLE PARTICULARS

Manufacturer Toyota Model Axio 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

Employment

No - Claiming third party Private hire

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

DRIVER

Name of Driver NRIC No Date Of Birth

NTUC Comprehensive No

5118867310

LIM HWEE PENG SXXXX171J 21/10/1967

Occupation

Date Of Driving Pass

25/04/2006 Driving experience 14 YEARS AND 11 MONTHS

Outdoor

Female

550106

No

No

Hirer

Clear

Dry

No

Yes

Nο

Yes

1

Nο

No

No

(Phone) +65-86081231

lim.ann10@yahoo.com

Collision - Head to Rear

APT BLOCK 106 SERANGOON NORTH AVENUE 1 #07-731

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

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 ATTACHED; REMARKS: TYPE OF ACCIDENT PLEASE REFER TO ATTACHED AND ATTACHED STATEMENT

ATTACHMENT(S)

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

Was there any audio recorded?

Yes No

Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **SLP8874R**

Vehicle Manufacturer Vehicle Model Vehicle Variant

Vehicle Colour

Vehicle Category Name of Driver **Contact Number**

Address Address complement

Postcode

Private car LEUNG KA MUN (Phone) +65-91333452

Accident report SS21213I0003

Page 2 of 17

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

REFER TO ATTACHED REFER TO ATTACHED

INJURED PERSONS DETAILS

INJURED 1

Name of injured person

Address

Address Complement

Post Code

Approximate Age Years Old

Injuries Sustained

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

LIM HWEE PENG

APT BLOCK 106 SERANGOON NORTH AVENUE 1 #07-731

-

550106

53

REFER TO ATTACHED; MC 2 DAYS

SJN5049K

Yes

No

SKETCH PLAN

IMPORTANT NOTICE

- 1. Rease report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver
- 3. Internation 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 GA 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 ladgement 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 (oil insurer(s) with 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;

& Time

- (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 backages), 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 hisurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be seed outside of Singapore, for one or more of the above Purposes

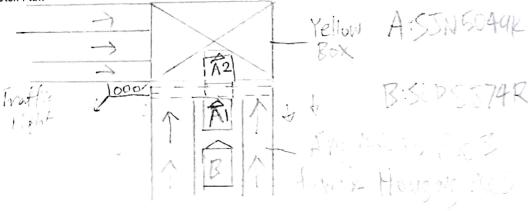


Policyholder's Signature / Dute &

Orwer's Signature (If driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident		
On 17/3/21 12:45, I was My vechicle stop at a traffic light, Subjety my		
vection was a list by a year a cause my vished to move forward into the		
yellow box I went to a near by chair to and was given 2 days of MC.		
	_	
	_	

Declaration

WWe declare the foregoing particulars are true in every respect.

s Signature / Date &

Witnessed by Reporting Centre Personnel

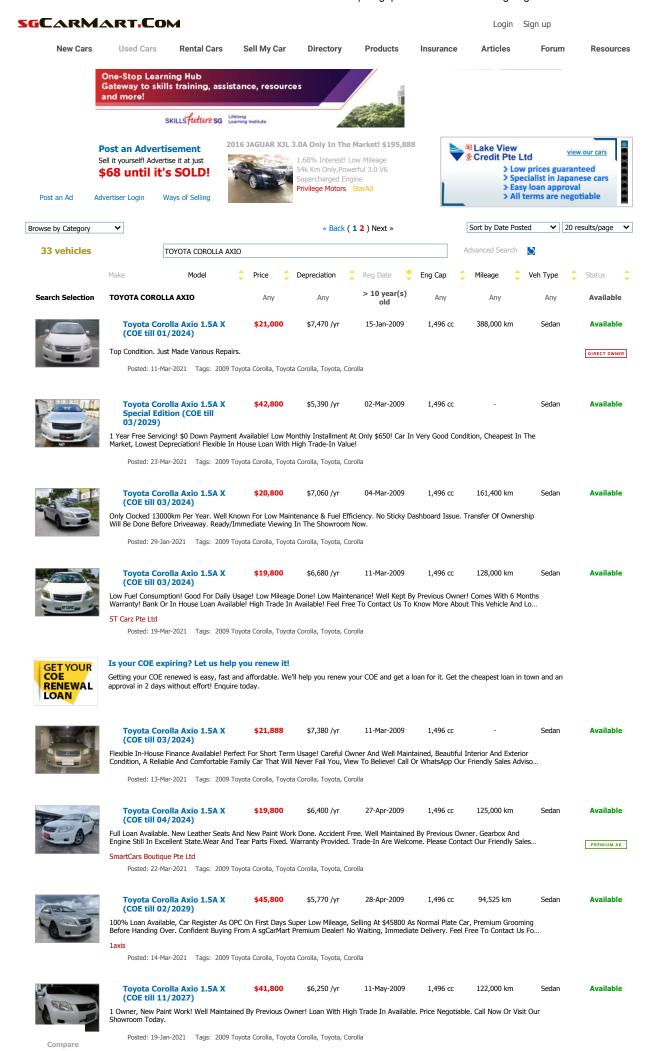
> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	724W
Vehicle No.:	SJN5049K
Vehicle to be Exported:	No
ntended Deregistration Date:	24 Mar 2021
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA AXIO 1.5X A
Primary Colour:	Blue
Manufacturing Year:	2008
Engine No.:	1NZD179745
Chassis No.:	NZE1416095733
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$12,465.00
Original Registration Date:	18 Feb 2009
First Registration Date:	18 Feb 2009
Fransfer Count:	4
Actual ARF Paid:	\$3,148.00
ntended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
ntended COE Rebate Details	
COE Expiry Date:	31 Jan 2024
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$13,024.00
COE Rebate Amount:	\$7,429.00
otal Rebate Amount: Message	\$7,429.00

vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 24 Mar 2021







Toyota Corolla Axio 1.5A X (COE till 08/2024) \$23,800 \$6,990 /vr 18-Aug-2009 1.496 cc Available Sedan

Low Fuel Consumption Toyota Axio 1.5A, Very Good For Daily Usage, Low Yearly Depreciation, Low Mileage Done, Excellent Condition, Low Maintenance, Well Kept By Previous Owner, No Repairs Needed, Bank And In House Loan Available, \$0 Downpayment, Low-Interest.

Posted: 20-Mar-2021 Tags: 2009 Toyota Corolla, Toyota Corolla, Toyota, Corolla



Toyota Corolla Axio 1.5A X \$25,388 \$7,330 /yr 10-Sep-2009 1,496 cc Sedan Available (COE till 09/2024)

ery Well Maintain, Interior And Exterior Taken Very Well, Very Good Condition, Hassle Free Car, Quick Give Us A Call To Know More

PREMIUM AD

SG Motor Link Pte Ltd

Posted: 23-Mar-2021 Tags: 2009 Toyota Corolla, Toyota Corolla, Toyota, Corolla



Toyota Corolla Axio 1.5A X \$34,000 \$6,800 /vr 01-Sep-2010 1.496 cc Sedan Available (New 5-yr COE)

Value Buy! Superb Fuel Consumption. Easy Drive. Flexi Loan. Well Maintained Unit. Call Now For Viewing. Thank You.

Posted: 20-Feb-2021 Tags: 2010 Toyota Corolla, Toyota Corolla, Toyota, Corolla

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

Depreciation
Reg Date
Eng Cap Make Mileage Veh Type

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