ASS. REC. BY: RAM. REF: CC4 A16 210	03888 Ripa3 114B
	<u>GNMENT</u>
From: Date:	Veh No: G67 2585P Yr Regn: 2019 / PGB
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Corry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: GBJ 2585P	Make: 1040TA 04NA 1505MT C.C 2982
at Workshop m/s	Colour BUE A/C: Insured / Std / NI / NA
of S3, usi que 1	Sp.Reading 7595 T/Radio: Insured / Std / NI / NA
Insured: ML	Eng/No:
Policy No.	C/No: JTFAT35430K211975
Claims No.	Gen. Cond: Good /Fair Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NiL S/Rim / STD A/Rim or
	Tyre Size: F: 19575RIS
(Policy Condition)	R: 155-R12C
	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 7 mm R/Bal. 5/5 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. T mm L/Bal. 5/3 mm
	D.O.A. 22/03/21 D.O.I. 13/04/21
	1311/21
Lum Sum: % 3 Val.: Yes or No	Survey held at Tempwork
CA / REV / REP. / 24 HRS  Vehicle: IN / OUT	Des. of Damages: Frt / Rear / 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 I mit - 71K	
	Control of the Contro
	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
Add Fee	: Site Insp (\$)S+RS,SI
	: Interview (\$ ) Photos
	Tech. Invs (\$ ) Others
Report Format :	: Weekend (\$)
Lump Sum / I.B.I: (\$)	TOTAL
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## 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 witholding of material facts may allow insurance companies to repudiate 3. Information provided must be as truthful and accurate as possible. Any willul misrepresentation of water 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	00/00/0004 40 40 (00T)
Date of Accident	23/03/2021 16:48 (SGT)
Date of Accident	22/03/2021 20:45 (SGT)
Exact Location of Accident	Sims Ave, Singapore
Additional Location Information	Sillis Ave, Sillgapore
Country 10: 1	- 1
Country/State of Loss	Singapore

#### **DETAILS OF OWN VEHICLE**

Toyota

venicle Registration Number	 GBJ2585P

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SHINE HUP FURNITURE
Company Reg No	-
Email Address	SHAWNTZJ@GMAIL.COM
Mobile Phone No	(Phone) +65-92268773
Alternative Phone No	+65-92268773

#### VEHICLE PARTICULARS

Manufacturer

Model	Dyna
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	Commercial vehicle
Transmission	Manual
CC	3000

## INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
1,700	No
	2070012946-01
Policy Number	20/0012340 01
Cover Note Number	-

## DRIVER

Name of Driver	SHAWN TAN ZHENG JIE
Name of Driver	 SXXXX122E
NDIC No	 3//// 122L

Date Of Birth 09/11/1997 Occupation Indoor Date Of Driving Pass 18/01/2017 Driving experience 4 YEARS AND 2 MONTHS Gender Male Mobile Number (Phone) +65-92268773 Alt. Phone Number Email Address ..... SHAWNTZJ@GMAIL.COM Address **BLK 123 PAYA LEBAR WAY #12-2913** Address complement Postcode 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 Hit and run / Vandalism / Damaged whilst parked Weather Conditions Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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? Yes **Police Station Name** Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT T/20210323/7025 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No No Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1 **GBK4100L** Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Commercial vehicle Vehicle Category

Polic

Clair

Sun

Ma

Name of Driver	_
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)	-

## WITNESS DETAILS

WITNESS	. 1

 Name
 MR CHEN

 Phone
 (Phone) +65-98298062

 Email

#### SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please 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. 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 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)

Lunderstand, acknowledge, agree and consent that

- (a) My insurer, my w orkshop 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' 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 law yers/law (tirms); which may be sited outside of Singapore, for one or more of the above Purposes.

Gints Avenue Centr Singapore 387603 Tot 6747 1012 Policyholder's Signature / Date 8 Troe	Stan	river is not the policyholder) / Date	Witnessed by Reporting Centro Personnel
Sketch Plan	S Time		resounce
		A shareholder	
		(4	
	L + _+ .		
A: GBJ 2585P			
B: GBK 4100L			
	1	SIMS AVENU	Ε
		BUS LANE	

con tim POLICE REPORT





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

Report No. T/20210323/7025

## REPORT OF A TRAFFIC ACCIDENT

Date/Time 23/03/202	e Report M 21 16:00	ade:	Vide Report No.:	Station Diary No.:
Informan	t's Particu	lars	· 图 "是一家"的第三人	
	Informant: TAN ZHEN	G JIE	Address: 123 PAYA LEBAR WAY	#12-2913 SINGAPORE 381123
ID Type / NRIC NO	ID No.: / S974012	2E	Contact No.: Home/Office:	Mobile: 92268773
Nationalit SINGAPO	y: DRE CITIZE	EN .	Email: shawntzj@gmail.com	
Sex: Male	Age: 23	Date of Birth: 09/11/1997	Type of Informant: Driver	value of the second
Race: Chinese		Language: Institution / School Name: English		
Occupation DRIVER	on:		Driving Licence Informa Class:	tion: Date of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/03/2021 20:45	Type of Location	
SIMS AVENU	JE				
Weather:	,	Road Surface:		Road Speed Limit:	
Traffic Flow:		Traffic Control:		Traffic Volume:	
				Anyone conveyed by	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBJ2585P	Lorry					0
GBK4100L	Lorry					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT #2





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20210323/7025

#### **CONTINUATION OF REPORT**

Driver	All of the second	F1150 (1175)		FREE PROPERTY AND A STATE	e de maranes de la companya de la c	
Name	SHAWN TAN ZHENG JIE			ID No.	S9740122E	
Related Vehicle	GBJ2585P (Lorry)			Contact No.	92268773	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL Date		Date	NIL		
No. of Days granted Medical Leave NIL			Degree of	NIL		

## Brief Details.

On the stated date and time, my lorry (GBJ2585P) was parked stationary along 540 Sims Avenue at the parallel parking lot. When I went back to my lorry, I realized there was damages on the front left portion of my lorry. There is a witness told me that he saw a lorry (GBK4100L) hit onto my lorry when he was trying to park into the parking lot in front of my vehicle.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20210323/7025

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 23/03/2021 16:00
Officer In Charge Of Case: TP / TPIB /	Classification Of Case:
KALESWARI PALANI Contact No.: 65476902	
uthentication Stamp	

Back to OneMotoring

coauire PARF/COE Rebate for Registered Vehicle

nguir of the selection	
Owner ID Type:	Business
owner ID:	114B
Condition of the Condit	是一种一种的原则的是一种,这种种种的,但是一种种种的,但是一种种种的。
Vehicle No.:	GBJ2585P
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Apr 2021
Vehicle Make:	TOYOTA
Vehicle Model:	DYNA 150 5MT
Primary Colour:	Blue
Manufacturing Year:	2018
Engine No.:	1KD2833244
Chassis No.:	JTFAT35Y30K211975
Maximum Power Output:	
Open Market Value:	\$27,082.00
Original Registration Date:	25 Feb 2019
First Registration Date:	25 Feb 2019
Transfer Count:	0
Actual ARF Paid:	\$1,355.00
mended Paris repercedants	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount:	\$0.00
मिलाविस्ट्रिके स्वान्तिक विकास	
COE Expiry Date:	24 Feb 2029
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$13,526.00
COE Rebate Amount:	\$10,635.00
Total Rebate Amount:	\$10,635.00

The information contained herein is correct as at 14 Apr 2021

▶ SEARCH Toyota Dyna Home » Used Cars » Car (S) Pte Ltd » Toyota Dyna 150 3.0M

# Toyota Dyna 150 3.0M

Overview

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al

**Financial** 

Accessories

Similar

Research

**Photos** 

Map

Vehicle Type



25-Feb-2039 Lifespan \$82,800 **Price** 26-Feb-2019 **Reg Date** \$10,520 /yr Depreciation (?) (7yrs 10mths 11days COE left) View models with similar depre Manufactured ⑦ 2018 25,696 km (12.1k /yr) Mileage **Transmission** Manual N.A. Road Tax (2) OMV (?) \$27,082 \$20,388 as of today (change) Dereg Value (?) ARF (2) \$1,355 \$25,893 COE (2) No. of Owners (?) 2,982 cc **Engine Cap** Curb Weight (?) 1,720 kg Type of Vehicle Truck

#### **Features**

View specs of the Toyota Dyna 150 Diesel (2014)

#### **Accessories**

Factory Radio Setting.

## Description

1 Owner Unit 2019 Model. 1 Stop Service For Your Business Needs. Trade In Most Welcomed. Low Depre And Low Mileage For Your Peace Of Mind. Exclusive Warranty Will Be Given Upon Handover. Kindly Pm For Test Drive And Viewing Now!

## Category

Premium Ad Car

## **Status**

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

## Resources



Car Valuation - Free

Find out the market value of your existing car for free. Get started



tion

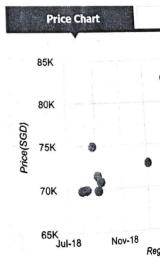
? Request to have this car evaluated professionally. Find out more https://www.sgcarmart.com/used\_cars/info.php?ID=971356&DL=2976

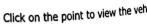












Shortlist

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Seller Information

Car (S) Pte Ltd