

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: \_\_\_\_\_

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

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

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SJB6002B, Yr Regn: 2008 Jan

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

Truck / Trailer or

Make: Honda Stream. C.C. 1789

Colour Silver A/C: Insured / Std / NI / NA

Sp. Reading 216427. T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: RN61040161 \*

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: 205/60R16

R: 25/6046

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. 06 mm

D.O.A. D.O.I. 26/03/21

Survey held at MG Solution.

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

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

Date / Time	Action / Instruction
	TP AXA.
	COE Expiry: 30/11/27.
	MV : 4AK.
	PV : 33.5K
	Nett : 10.5K.

Date/Time, File Pass to?

☐ : Prel. Report  
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Date/Time, File Return to?

2)

Add Fee:  : Site Insp (\$
$$S + PS_2 \rightleftharpoons S_2$$

} Photos

	Others
--	--------

Report Format :

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

☐ : Site Insp (\$

☐ Interview (\$

☐ Tech. Invs (6)

☐ Weekend (\$)

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	26/03/2021 13:03 (SGT)
Date of Accident	25/03/2021 12:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNC OF CHANGI ROAD & JOO CHIAT ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJB6002B
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ABDUL RAZAK BIN MD YATIM
NRIC No	SXXXX229B
Email Address	abdulrazak.ar817@gmail.com
Mobile Phone No	(Phone) +65-97332253
Alternative Phone No	+65-97332253

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	HONDA / STREAM 1.8 A
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1800

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5118699287
Cover Note Number	-

#### DRIVER

Name of Driver	ABDUL RAZAK BIN MD YATIM
NRIC No	SXXXX229B



Date Of Birth 11/02/1961  
Occupation Outdoor  
Date Of Driving Pass 14/10/1980  
Driving experience 40 YEARS AND 5 MONTHS  
Gender Male  
Mobile Number (Phone) +65-97332253  
Alt. Phone Number +65-97332253  
Email Address abdulrazak.ar817@gmail.com  
Address BLK 920 #13-79 JURONG WEST STREET 92  
Address complement -  
Postcode 640920

Is the driver the policyholder? ☒ Yes  
If No, Relationship of the Driver with the Insured ☐ No  
Does Driver Own Other Vehicles? ☒ Yes  
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? Yes  
Was any injured conveyed to hospital by ambulance? No  
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? I was travelling alone TPE towards Changi

#### CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT No. T/20210325/7029

#### 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 SHB3421T  
Vehicle Manufacturer Hyundai  
Vehicle Model HYUNDAI / AE IONIQ HEV FL 1.6 DCT  
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) -

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJT9817C  
 Vehicle Manufacturer Suzuki  
 Vehicle Model SUZUKI / SWIFT 1.5 AT ABS AIRBAG 2WD  
 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 ABDUL RAZAK BIN MD YATIM  
 Address BLK 920 #13-79 JURONG WEST STREET 92  
 Address Complement -  
 Post Code 640920  
 Approximate Age Years Old 60  
 Injuries Sustained -  
 Injured person in which vehicle? SJB6002B  
 Were seat belts worn? Yes  
 Was this injured conveyed to hospital by ambulance? No



# SKETCH PLAN

## IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. The 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.

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4 #02-02

Singapore 415933

Tel: 67416697 Fax: 67492305

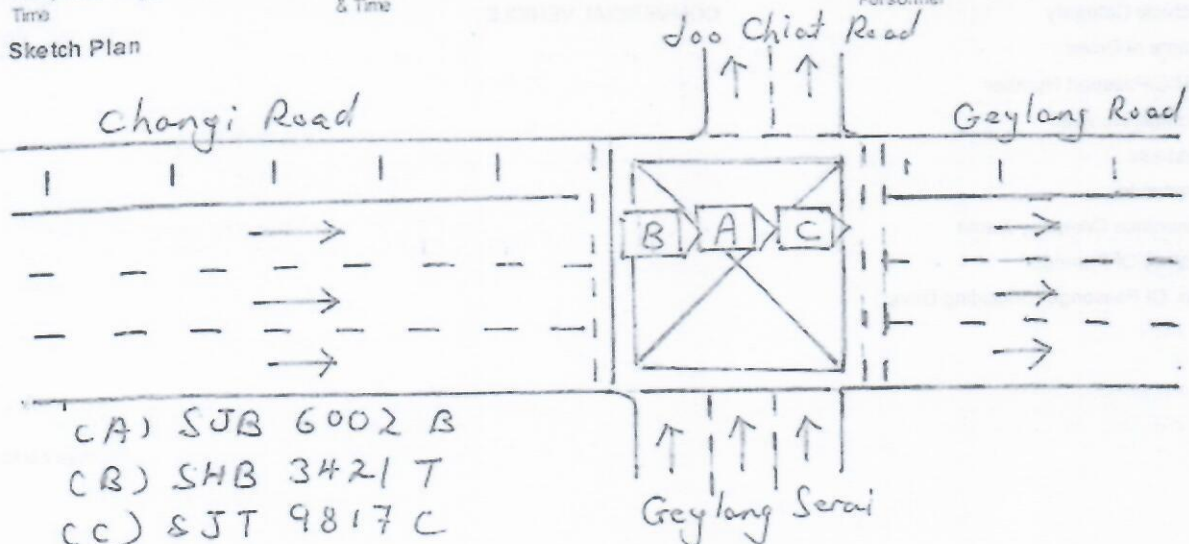
Email: vackb@vicom.com.sg

Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Attached -  
TP Police Report No: 7/2021 0325/7029



Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

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



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	229B
<b>Vehicle Details</b>	
Vehicle No.:	SJB6002B
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Mar 2021
Vehicle Make:	HONDA
Vehicle Model:	STREAM 1.8 A
Primary Colour:	Black
Manufacturing Year:	2007
Engine No.:	R18A1745920
Chassis No.:	RN61040761
Maximum Power Output:	103.0 kW (138 bhp)
Open Market Value:	\$17,537.00
Original Registration Date:	17 Jan 2008
First Registration Date:	17 Jan 2008
Transfer Count:	4
Actual ARF Paid:	\$19,291.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	30 Nov 2027
COE Category:	E - Open Category
COE Period(Years):	10
PQP Paid:	\$50,168.00
COE Rebate Amount:	\$33,473.00
<b>Total Rebate Amount:</b>	<b>\$33,473.00</b>

The information contained herein is correct as at 28 Mar 2021

OK



*[Handwritten signature]*

honda stream

Price Range

Depreciation

> 10 year

Vehicle Type

Advanced Search

Used Car Comparison

--- Comparing 3 Vehicles ---

Honda Stream 1.8A X (COE till 11/2027)



Add to Shortlist

Honda Stream 1.8A (COE till 12/2027)



Add to Shortlist

Honda Stream 1.8A RSZ (COE till 04/2028)



Add to Shortlist



Use search bar above to search to compare.

Clear All

Add all to Shortlist

Back to search result

CAR DETAILS

Price	\$42,800	\$48,888	\$46,959
Instalment	N.A.	N.A.	N.A.
Registration Date	24-Dec-2007	01-Apr-2008	02-Apr-2008
Manufactured	2007	2007	2008
Mileage	-	139,000 km	-
Transmission	Auto	Auto	Auto
Engine Cap	1,799 cc	1,799 cc	1,799 cc
Road Tax	\$1,369 /yr	\$1,271 /yr	\$1,271 /yr
Power	103.0 kW (138 bhp)	103.0 kW (138 bhp)	103.0 kW (138 bhp)
Curb Weight	1,370 kg	1,370 kg	1,370 kg
Features	-	1.8L I-VTEC Engine, 5 Speed Automatic Transmission, Dual Airbags, Electric Retractable Side Mirrors, ABS, Knockdown Rear Seats, Climate Control Aircon	-
Accessories	-	Leather Seats, Solar Film, Reverse Sensors, Retractable Side Mirrors, Front And Rear Disc Brakes.	-
Description	Well Kept. No Repairs Needed. Low Depreciation. Excellent 7 Seater MPV For Daily Usage. Powerful Engine, Sporty Look And Highly Reliable. Bank Loans And In-house Financing Available. View Now!	Good Size Family Car. Well Maintained In Good Condition. Reliable Runabout. Lady Owner Car, Selling As Working From Home Permanently. Call To Arrange Viewing.	-
COE	\$50,168	\$51,850	\$40,881
OMV	\$20,799	\$20,815	\$17,966
ARF	\$22,879	\$22,897	\$17,966
Depreciation	\$6,410 /yr	\$7,230 /yr	\$6,690 /yr
No. of Owners	2	3	4
Type of Vehicle	MPV	MPV	MPV
Category	COE Car, Premium Ad Car	COE Car, Direct Owner Sale	COE Car, Premium Ad Car
Availability	Available	Available	Available
Remarks	COE expiry date 2028-04-01	COE expiry date 2028-04-01	COE expiry date 2028-04-01

SELLER INFORMATION