

(08/11/13) wef

ASS. REC. BY: PAME

REF:

CS3/SMO21003999/RuUff3

2490

COB XPRVH 12028/NOV

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SKX 26635at Workshop m/s: GARAGE 13of 8 KAKI BUKIT RVE 4 #03-127Insured: SMO

Policy No. \_\_\_\_\_

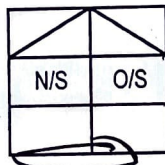
Claims No. \_\_\_\_\_

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: 47K

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: SKX 26635Yr Regn: 2008 / NOVType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda Stream 1.8XAc.c. 1799Colour: GREY

A/C: Insured / Std / NI / NA

Sp. Reading: 225089

T/Radio: Insured / Std / NI / NA

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

C/No: RN61087583

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195/68R15R: 16BS: DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 26/03/21D.O.I. 29/03/21Survey held at GARAGE 13Des. 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 limit - 22KESTIMATE RANGE OF REPAIR / NO. OF DAYS - (6K-8K) / 8 days

SUBMIT PRS REPORT

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

Days Of Repair: 8

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

Add Fee: ☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

) Photos

) Others

Report Format : \_\_\_\_\_

Lump Sum / I.B.I. (\$) \_\_\_\_\_



# 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 ..... 29/03/2021 12:41 (SGT)  
Date of Accident ..... 26/03/2021 17:20 (SGT)  
Exact Location of Accident ..... Expo Dr, Singapore  
Additional Location Information ..... TOWARDS UPPER CHANGI ROAD ESAT  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKX2663S

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... KOH SIEW ENG  
NRIC No ..... SXXXX249D  
Email Address ..... c-weisheng@hotmail.com  
Mobile Phone No ..... (Phone) +65-98305035  
Alternative Phone No ..... +65-98305035

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Stream  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... Private use  
Are you claiming under your own insurance policy for repair to your vehicle? ..... No - Claiming third party  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1799

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5076446515-05  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... NG KEN HUAT  
NRIC No ..... SXXXX250H



Date Of Birth .....	13/04/1965
Occupation .....	Indoor
Date Of Driving Pass .....	16/02/2020
Driving experience .....	1 YEAR AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-98305035
Alt. Phone Number .....	-
Email Address .....	ngkenhuat@gmail.com
Address .....	BLK 305 JURONG EAST STREET 32 #11-150
Address complement .....	-
Postcode .....	600305
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) .....	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	FELIX ENG
Gender .....	Male

#### PASSENGER 2

Name .....	WEI PING
Gender .....	Female

#### PASSENGER 3

Name .....	MISS YEO
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

PLEASE REFER TO SKETCH PLAN

#### ATTACHMENT(S)

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

# DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	PA7517K
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	TAN KIM HUAT
Contact Number .....	(Phone) +65-91275596
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 .....	NG KEN HUAT
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SKX2663S
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

### INJURED 2

Name of injured person .....	FELIX ENG
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SKX2663S
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

### INJURED 3

Name of injured person .....	WEI PING
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SKX2663S
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

### INJURED 4

Name of injured person .....	MISS YEO
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SKX2663S
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. 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

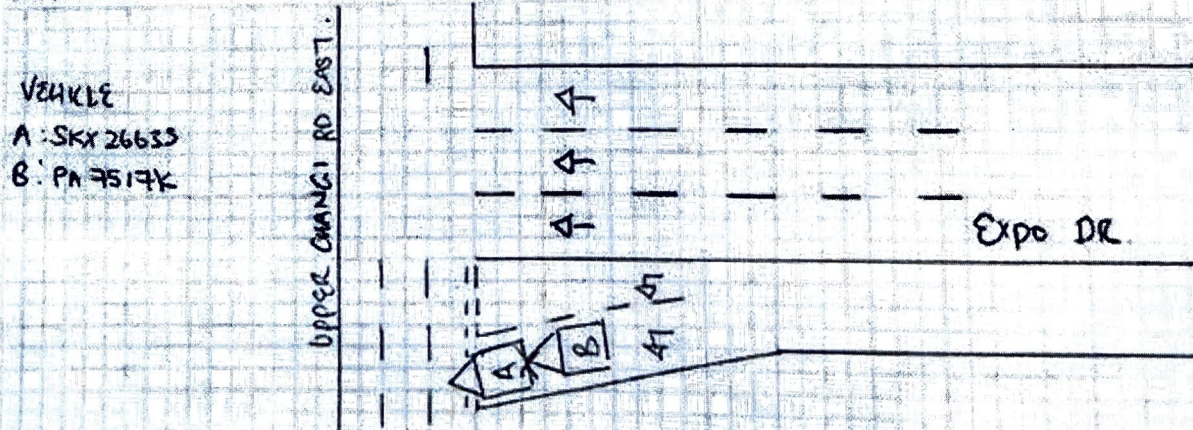
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date & Time

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

 29/03/2021  
Witnessed by Reporting Centre Personnel

#### Sketch Plan







Describe Circumstances of the Accident

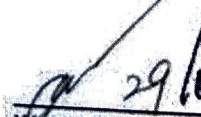
ON THE MENTION DATE, TIME AND LOCATION. I WAS TRAVELING  
ON EXPO DRIVE TURNING LEFT TO UPPER CHANGI RD EAST AT THE  
SLIP ROAD. I SLOW DOWN AND CAME TO A STOP TO LOOK OUT  
FOR ON COMING VEHICLE. ALL OF A SUDDEN THERE WAS A HUGE  
IMPACT COLLIDED ONTO MY VEHICLE REAR AND FORCE MY VEHICLE TO  
MOVE FORWARD. WE EXCHANG DETAILS AND MOVE ON.

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

 29/03/2021  
Witnessed by Reporting Centre  
Personnel



## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	249D
Vehicle No.:	SKX2663S
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Mar 2021
Vehicle Make:	HONDA
Vehicle Model:	STREAM 1.8X A
Primary Colour:	Grey
Manufacturing Year:	2008
Engine No.:	R18A1797067
Chassis No.:	RN61087583
Maximum Power Output:	103.0 kW (138 bhp)
Open Market Value:	\$17,446.00
Original Registration Date:	20 Nov 2008
First Registration Date:	20 Nov 2008
Transfer Count:	2
Actual ARF Paid:	\$17,446.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	19 Nov 2028
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$32,121.00
COE Rebate Amount:	\$24,536.00
Total Rebate Amount:	\$24,536.00

The information contained herein is correct as at 30 Mar 2021

OK



# Honda Stream 1.8A X (COE till 11/2028)

Overview Financial Accessories Similar Research Photos Map

**Price** \$47,800

**Depreciation** ? \$6,260 /yr **Reg Date** 17-Nov-2008  
(7yrs 7mths 17days COE left)

**Mileage** 135,000 km (10.9k /yr) **Manufactured** ? 2008

**Road Tax** ? \$1,271 /yr **Transmission** Auto

**Dereg Value** ? \$24,535 as of today (change) **OMV** ? \$20,565

**COE** ? \$32,121 **ARF** ? \$20,565

**Engine Cap** 1,799 cc **Power** 103.0 kW (138 bhp)

**Curb Weight** ? 1,370 kg **No. of Owners** ? 3

**Type of Vehicle** MPV

## Features

Powerful Yet Fuel Efficient/Reliable 1.8L I-VTEC Engine Mated To 5 Speed Automatic Transmission. Digital Climate Control, Retractable Side Mirrors. View specs of the Honda Stream (2007-2014)

## Accessories

Leather Seats, Sports Rims, Reverse Sensors, Audio Player, Auto Retractable Side Mirrors, Knockdown Rear Seats. Sports Rims.

## Description

Full Loan Monthly \$700 Plus Only! Low Mileage, Premium 2K Cement Gray Colour. Well Maintained. No Repair Needed. Buy With Confidence! Immediate Transfer Of Ownership! In House Loan Or Bank Loan Available! Fast And Easy Loan Approval! Accident-Free! No Worries! Open Daily Including Weekends And Public Holiday. Don't Miss It! Call Now Before It's Gone Again.

## Category

COE Car, Premium Ad Car

## Status

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

## Resources



### Vehicle Evaluation

Afraid of lemons? Request to have this car evaluated professionally. Find out more



### Car Valuation - Free

Find out more



Shortlist

More

## Seller Info

### PG Motoring

17 vehicles

200 J

Textile

Search

Paul

Vin N

Josep

Johns