

(08/11/13) wef

A.S.S. REC. BY: John

REF:

CS3/AH 21004136/RV F3

206K

ASSIGNMENT

COG + PIRY: 2021 MAY

From:

Date:

Estimated Cost:

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

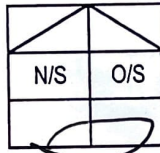
To Inspect Vehicle No: SGH 499ITat Workshop m/s: TOY CARZ AUTO REPAIRINGof 210, TURF CLUB RD LOT B70 B671 (287995)Insured: AH SMT 7613BPolicy No. 2070106271Claims No. 0492098602SG

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: 8.00

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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

SGH 499ITYr Regn: 2006 / MAYType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

TOYOTA WISH 1.8X Ac.c 1794

Colour:

BLUEA/C: Insured / Std / NI / NA

Sp. Reading

251420T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

2NE100304208Gen. Cond: Good / Fair / Poor / BurntSteering: inorder / Jammed / Leaked / Burnt orBrake: inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

185/60R15

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

WESTLAK

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

27/02/21

D.O.I:

31/03/21

Survey held at

TOY CARZDes. 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 / Unit - 250

6/4/21

Submit ext T/L : MV:\$800 LTA: \$559 NV:\$241

Date/Time, File Pass to?



Preli. Report

1)



Final Report

Date/Time, File Return to?

2) 6/4/21-Typist

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

S + RS, SI

Photos

Others

Report Format :

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 13:06 (SGT)
Date of Accident 27/03/2021 19:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information SIMEI ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGG4991T

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner LEISURE LEASING PTE LTD
Company Reg No 2XXXXXX206K
Email Address ADMIN@MCTTRADER.COM
Mobile Phone No (Phone) +65-64648880
Alternative Phone No (Office) +65-64648880

VEHICLE PARTICULARS

Manufacturer Toyota
Model Wish
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 0

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 5108754771-02 (TP)
Cover Note Number -

DRIVER

Name of Driver WANG GUIDONG
Passport No/FIN GXXXX844T



Date Of Birth 17/11/1976
 Occupation Outdoor
 Date Of Driving Pass 17/11/2016
 Driving experience 4 YEARS AND 4 MONTHS
 Gender Male
 Mobile Number (Phone) +65-86159531
 Alt. Phone Number
 Email Address WANGDS.1976@GMAIL.COM
 Address 62A TANJONG KATONG ROAD
 Address complement
 Postcode 436955
 Is the driver the policyholder? No
 If No, Relationship of the Driver with the Insured Hirer
 Does Driver Own Other Vehicles? No
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

Regn:
 Prime Mover I

C.C
 ed / Std /
 d / Std

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 3
 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) 1
 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? No
 Was notice of intended Prosecution given? No
 If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO STATEMENT ATTACH

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 SMT7613B
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category Private car
 Name of Driver SRINIVASAN RAVI
 Passport No/FIN GXXXX745L
 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 SMU520B
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) -

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.



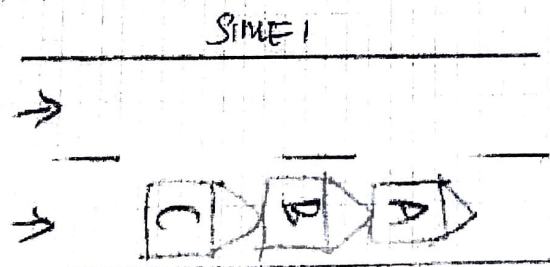
Policyholder's Signature / Date & Time

[Handwritten Signature]

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

[Handwritten Signature]
Witnessed by Reporting Centre Personnel

Sketch Plan



A - SGG 4991T

B - SMT 7613B

C - SMU 52013

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	206K
Vehicle No.:	SGG4991T
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Apr 2021
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8X A
Primary Colour:	Blue
Manufacturing Year:	2006
Engine No.:	1ZZ2557872
Chassis No.:	ZNE100304208
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$21,282.00
Original Registration Date:	15 May 2006
First Registration Date:	15 May 2006
Transfer Count:	3
Actual ARF Paid:	\$23,411.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	14 May 2021
COE Category:	B - Car (1601cc & above)
COE Period(Years):	5
PQP Paid:	\$23,024.00
COE Rebate Amount:	\$559.00
Total Rebate Amount:	\$559.00

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 05 Apr 2021

OK

Toyota Wish 1.8A (COE till 10/2021)

[Overview](#)[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

Price \$5,000

Depreciation ⓘ \$9,970 /yr

Reg Date 06-Oct-2006
(6mths COE left)

Mileage N.A.

Manufactured ⓘ 2006

Road Tax ⓘ \$1,458 /yr

Transmission Auto

Dereg Value ⓘ \$2,845 as of today (change)

OMV ⓘ \$18,198

COE ⓘ \$28,376

ARF ⓘ \$20,018

Engine Cap 1,794 cc

Power 97.0 kW (130 bhp)

Curb Weight ⓘ 1,300 kg

No. of Owners ⓘ 3

Type of Vehicle MPV

Features
STD

Accessories
MPV 7 Seater

Description
Drive Till The End With Good Body Value When Scrap!

Category
COE 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 the market value of your existing car for free. Get started

Posted on: 04-Apr-2021 | Last Updated on: 04-Apr-2021

Upfront Payment

[» more Financial info](#)

Transfer **SHORTLISTED** **HISTORY**

\$25

Do **Compare** ⓘ



\$1,500 (change) Maximum 70% Loan



♡ Shortlist

⋮ More

Seller Information

Sanctuary Motor

Customer Reviews

4.8 ★★★★★

March 30

★★★★★

Definitely good
experience
Kiern. Very

March 23

★★★★★

It was a pleasure
working with
is very efficient

