Tech. Invs (3)

Weetend (\$

MER-TP

9100

Report Format:

Lump Sum / 1.E

Others

TOTAL

S10121400002 / 1ST AUTOWORKS PTE LTD ENTRY DATE & TIME: 24/04/2021 12:29 (SGT)
SUBMITTED BY: Mohammad Suhaimi Bin Mohd Suadi Ong VERSION: 1 (24/04/2021 12:29 (SGT))

SINGAPORE ACCIDENT STATEMENT

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
 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.
- 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

24/04/2021 12:29 (SGT) 23/04/2021 13:50 (SGT) Singapore AYE SLIP RD TO CORPORATION RD Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJQ1696C

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No Alternative Phone No

No SALLEHUDDIN BIN ABDUL WAHAB SXXXX875Z drivoq@gmail.com (Phone) +65-82224956 +65-82224956

VEHICLE PARTICULARS

Manufacturer Model 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 Transmission CC

Perodua Myvi

Private use

No - Claiming third party Private car Manual 1298

INSURANCE COMPANY

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

Direct Asia Insurance (Singapore) Pte Ltd ThirdParty No

DRIVER

Name of Driver NRIC No

PUTRA NUR HAIQAL BIN SALLEHUDDIN SXXXX796F

Date Of Birth
Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number

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

14/01/1999 Indoor 29/06/2017

3 YEARS AND 10 MONTHS

Male

(Phone) +65-82224956

drivoq@gmail.com

827A TAMPINES STREET 81 #07-354 SPORE 521827

-

No Child

No

-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface Collision - Head to Rear Clear

Dry

No

Yes

No

Yes

2

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?

No

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No

Alt. Police Station Phone No Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

Yes

Traffic Police (Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

No

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN/POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Reasons for not uploading a video of the accident

Was there any audio recorded?

Yes

Yes

VIDEO WITH OWNER

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour

XD6359X

_

_

-

Accident report S101214O0002

Page 2 of 18

Vehicle Category	Commercial vehicle
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

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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' 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;
- (ii) 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 firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

CORPORATION RD

346

Describe Circumstances of the Accident

	REF	TO POLIC	E KEPI	NOT T	20210424	1-101
						ME.
				-		20101
						1
claration						
declare the	foregoing particul	ars are true in every res	spect.			
		0			2	
Sh		11	1		1	
icyholder's Si	gnature / Date &	Driver's Signature (I & Time	driver is not the polic	yholder) / Date	Witnessed by Repo Personnel	orting Centre



T/20210424/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20210424/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/04/2021 11:23		Made:	Vide Report No.:	Station Diary No.:	
Informa	nt's Particu	ulars			
	Informant: NUR HAIQ UDDIN	AL BIN	Address: 827A TAMPINES STREET 81	#07-354 SINGAPORE 521827	
ID Type / ID No.: NRIC NO / S9900796F		96F	Contact No.: Home/Office:	Mobile: 82224956	
Nationali SINGAP	ty: ORE CITIZ	EN	Email: drivoq@GMAIL.COM		
Sex: Male	Age: 22	Date of Birth: 14/01/1999	Type of Informant: Driver		
Race: Malay			Language: Institution / School N English		
Occupation:			Driving Licence Information: Class: 3	Date of Expiry:	

Injury Others Type of Accident:		Drink Drive: No	Date/Time Accident: 23/04/2021	13:50 S	ype of Location lip road (from YE to Corporation Rd)
Location: JALAN AHMA	AD IBRAHIM				
Weather: Clear		Road Surface Dry	×.	Road S	Speed Limit:
		The second second	d:		Volume:

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJQ1696C	The state of the s					0
XD6359X	Lorry	MERCEDES BENZ		Orange		0



T/20210424/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20210424/7011

CONTINUATION OF REPORT

Details of Perso	n Involved	THE PERSON NAMED IN	lo Pall College	15511250	BARTON BOOK STATE	
Any Pedestrian In	rvolved: No					
No. of Pedestrian	s Injured: NIL		Use of Pe	Use of Pedestrian Crossing: NA		
Driver						
Name	PUTRA NUR HAIQA	AL BIN SAI	ID No.	S9900796F		
Related Vehicle	SJQ1696C (Car)			Contact No	82224956	
Hospital/Clinic	CHANGI GENERAL HOSPITAL			Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL	
Date	23/04/2021		Date	23/04/2021		
No. of Days gran	nted Medical Leave 03 Degree			of Serious		
Driver						
Name	BALASUNDRAN VIJAYAN			ID No.	G6468796X	
Related Vehicle	NIL			Contact No	86523222	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL		Date	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	f NIL		

Brief Details.

On the above mentioned date, time and place I had an accident with a tipper truck bearing the plate number XD6359X. I was driving along the AYE exiting towards Corporation Road slip road (where a zebra crossing is available, but no pedestrians were using it) when the tipper truck hit me from the rear. I recalled the location happened opposite of Jebsen and Jessen building. I am the driver of the car bearing the plate number of SJQ1696C. I was injured at scene. I have a video proof (front and back) of the incident (please contact me for the video proof as file is large). There is also a witness when the accident occurred.



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



3 of 3 Report No. T/20210424/7011

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / TPIB / BOON YEN KIAN Contact No.: 65476172

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time: 24/04/2021 11:23

Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	875Z
Vehicle No.:	SJQ1696C
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Apr 2021
Vehicle Make:	PERODUA
Vehicle Model:	MYVI SX 1.3L MT 2WD 5DR
Primary Colour:	Red
Manufacturing Year:	2009
Engine No.:	E81B40J
Chassis No.:	PM2M301S002284062
Maximum Power Output:	64.0 kW (85 bhp)
Open Market Value:	\$8,290.00
Original Registration Date:	27 Apr 2009
First Registration Date:	27 Apr 2009
Transfer Count:	2
Actual ARF Paid: Intended PARF Rebate Details	\$0.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	26 Apr 2024
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$13,088.00
COE Rebate Amount:	\$7,859.00
Total Rebate Amount: Message	\$7,859.00

The information contained herein is correct as at 27 Apr 2021

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Mileage Eng Cap

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27-Apr-2009

1.298 cc

Any

Anv

Perodua Myvi 1.3A EZI (COE till 04/2024)

\$18.888

\$6,310 /vr

Hatchback

Available

Well Maintained, Full Loan Available! Flexible Bank/In House Loan Available, Try Loan Welcome! 100% Accident-Free! Welcome Trade In, Please Call For Appointment Or WhatsApp!

Posted: 19-Apr-2021 Tags: 2009 Perodua Mvvl, Perodua Mvvl, Perodua, Mvvl



Perodua Myvi 1.3A EZI (OPC) (COE till 04/2029)

\$46,809

\$5,850 /yr

13-Jul-2009

1,298 cc

126,000 km

Hatchback

Available

COE Till 04/2029, High Loan Available. Kindly Call For Viewing. Before This Budget Car Is Gone Myvi

Posted: 16-Apr-2021 Tags: 2009 Perodua Myvi, Perodua Myvi, Perodua, Myvi



Perodua Myvi 1.3A EZI (New 5-yr COE)

\$31,800

\$6,360 /yr

13-May-2011

1,298 cc

143,000 km

Hatchback

Available

Well Maintained, Full Loan Available! Flexible Bank/In House Loan Available, Try Loan Welcome! 100% Accident-Free! Welcome Trade In, Please Call For Appointment Now For A Non-Obligation Viewing.

Posted: 28-Apr-2021 Tags: 2011 Perodua Myvi, Perodua Myvi, Perodua, Myvi

PREMIUM AD

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

Model

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Depreciation

Reg Date

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Mileage

Veh Type

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