(68/11/13) wef REF: C \$3/A	16210.05745/Uuf3
	SSIGNMENT
AS	
From: Date: Estimated Cost:	Veh No: GUS 381C Yr Regn: 11 SOS
OD / PWS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: 6 45-381C	Make: KIA Andpio 2-7M c.c 2665
at Workshop m/s Sianghu;	Colour 3 hr A/C: Insured / Std / NI / NA
of	Sp.Reading 251978 T/Radio: Insured / Std / NI / NA
Insured: YQ 706L	Eng/No:
Policy No.	C/No: KNCTB24/257/95047
Claims No. 7389321251SG	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Ingreder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Increer / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Niji S/Rim / STD A/Rim or
	Tyre Size: F: 181-214
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value:	Front habilead Rear Vanmex
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. \$ mm R/Bal. \$ mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 1 mm L/Bal. 1 mm
Est. Repairs: / O days Res.: Yes or No	D.O.A. 29(4/2) D.O.I. 12/5/21
Lum Sum: % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS 2573) Vehicle: IN / Ol	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: 3	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
Here rime Action instruction P25. 4/1/2 Coe, until 30-4-2025 27	4,30
45/1 Subart 30-4-1013 17	A & 96V
17/5/2021 Submit DAR, 10 repair days.	
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 10
1) 17/5 TYPIST : Final Report	Resurvey No. of Trip: 1 Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add F	ee: : Site Insp (\$)s+Rs,sl
	: Interview (\$) Photos
Report Format : MER-DAR	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$:Weekend (\$

TOTAL

2	
GY5381C	Date No.
Reer windscreen moulding	Nec /
Ta:/gote	sedy po -
274 Tailgote reflectors	cna
En: (gote outer chrome	Cra _
Tailsole uner locle	JM -
to: (pote care trin	ton -
at Tailgote now tom clips	lec /
Tailgote 70 km/h St.che	ree /
Toilgale 9 pax Stocke	Me -
Ren hugan	Des -
then bigan blan	serf -
set Ren burger Clips	ner-
Ru Gonzer setam nls	Cre
An hupper pad	Dis —
Rec weotherstrig	Twisted -
Reer ent gone/ outer	20 —
ta: (and n/s	cre _
Rear floor gard	Regain X
alear fender 1/5	Repair
Bonnet	Dis -
Bonnet logo	1er-
Front gille	cre -
frest bruge.	Dis
Broof hunge lamp MIS	300
frest hunge hear	2erf
Test front huge class	der
Frent licence plate	500/
heedlang nls	311
frest corner gard 165	705
frest windscreen	Cre ~
frent windsomen moulding	1er
	POP bazic™
nextrage	

Frent door My Frent door My Frent door Pellor Ms Frent Windsomen Sectors Rear wind Screen Sectors But -Rejair X Nec -LKK Auto Consultants hence notify the Repairer of the following: • To resurvey before/after spray painting To display damaged part(s) during resurvey Parts prices are subject to confirmation • Third party survey is on a "Without Prejudice" basis No illegal modification(s) is allowed Supplementary item(s) must be resurveyed <u>and</u> is subject to final approval from Insurance Company Acknowledged by Repairer Signature: Date:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

wner ID Type:	Business
Owner ID:	253D
ehicle Details	
ehicle No.:	GY5381C
ehicle to be Exported:	No
ntended Deregistration Date:	12 May 2021
ehicle Make:	KIA
ehicle Model:	PREGIO 2.7M
rimary Colour:	Silver
Nanufacturing Year:	2005
ngine No.:	J2410837
Chassis No.:	KNCTB241257195047
Aaximum Power Output:	
)pen Market Value:	\$12,756.00
Original Registration Date:	11 May 2005
irst Registration Date:	11 May 2005
ransfer Count:	4
actual ARF Paid:	\$638.00
ntended PARF Rebate Details	
ARF Eligibility:	No
ARF Eligibility Expiry Date:	-
ARF Rebate Amount:	\$0.00
ntended COE Rebate Details	
COE Expiry Date:	30 Apr 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
QP Paid:	\$12,136.00
COE Rebate Amount:	\$9,627.00
otal Rebate Amount:	\$9,627.00
Message	

The information contained herein is correct as at 12 May 2021

OK

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kia pregio

Ways of Selling

Model

Price

Any

Depreciation

Reg Date

Eng Cap

Mileage

✓ 20 results/page

Submit (

Search Selection

0 vehicles

Post an Ad

kia pregio

Advertiser Login

Make

Any

Any

Advanced Search

Sort by Date Posted

Available

Sorry, there are no search results for your following query. Please refine your search fields, or try searching for it in our Expired ads.

Basic Search Criteria

Keyword(s): kia pregio **Depreciation**: Any

Veh Type

Price Range

Availability

Eng Cap

: -: -

: Available

Reg Date

Category

: -

Mileage : -

: All Categories

You may also wish to save these search fields to be notified whenever a vehicle is added.

Make

Model

Depreciation

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Veh Type

✓ results/page

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SINGAPORE ACCIDENT STATEMENT

- Please report correctly the details of the accident to speed up the claims process.
- 1. Please report correctly the details or 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 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.

 5. 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 A A MONTH OF THE CONTRACT OF T 30/04/2021 12:16 (SGT) Exact Location of Accident 29/04/2021 17:30 (SGT) Additional Location Information Yishun, Singapore Country/State of Loss YISHUN INDUSTRIAL PARK A INFRONT OF BLOCK 1024 Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GY5381C

INSURED/POLICYHOLDER

is company? Name Of Registered Owner Company Reg No RHK ENTERPRISE Email Address
Mobile Phone No 52891253D RHK99@SINGNET.COM.SG Alternative Phone No (Phone) +65-90280891 +65-90280891

VEHICLE PARTICULARS

Manufacturer Model Kia Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to Employment your vehicle? ... Vehicle Category No - Claiming third party Transmission Commercial vehicle Manual 2700 INSURANCE COMPANY

Name of Insurance Company Type of Coverage NTUC Income Insurance Co-operative Ltd Fleet Policy ThirdPartyFireTheft Policy Number Cover Note Number 5117847145 -000001 12/06/2020 - 06/06/2021 DRIVER

Name of Driver NRIC No MEGAT OMAR BIN ISMAIL S1750552A

	2204400	
Date Of Birth	27/03/1966	
Occupation	Outdoor	
Date Of Driving Pass	08/12/2000	
Driving experience	20 YEARS AND 4 MONTHS	*
Gender	Male	
Mobile Number	(Phone) +65-88069426	
Alt. Phone Number		
Email Address	RPUL.SG@GMAIL.COM	4745
Address	BLK 151 BEDOK RESERVOIR ROAD #02-	1745
Address complement	-	
Postcode	470151	
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	4	
insulance Company of Other Vehicle Owned by Briver		*
GENERAL INFORMATION OF THE ACCIDENT		
		i
Type of Accident	Chain Collision	
Weather Conditions	Raining	
Road Surface	Wet	
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 in the Accident: Was any injured conveyed to hospital by ambulance?	-	
Was any other material or property damaged?	Yes	
Number of Passengers (Including Driver)	2	
Has the driver been approached by unknown person(s)	-	
soliciting/offering accident claims assistance?	No	
PASSENGER 1		
Name	PASSENGER	
Gender	Male	
DETAILS OF POLICE ACTION		
DETAILS OF FOLIOL ACTION		
the standard to the police?	No	
Was the accident reported to the police?	No	
Was notice of intended Prosecution given? If yes, against whom?		
If yes, against whom?	•	
CIRCUMSTANCES OF ACCIDENT		
I SIGNALLED TO TURN RIGHT INTO YISHUN INDUSTRIAL PA ONTO MY VEHICLE FRONT PORTION. A FEW SECONDS LAT WAS INJURED.	ARK A. VEHICLE B FROM OPPOSITE TRAFF TER, VEHICLE C HIT ONTO MY VEHICLE RE	FIC DIRECTION HIT EAR PORTION. NO ONE
ATTACHMENT(S)		
Are accident photos available for attachment?	Yes	
Was there any video captured by Car Camera?	No	
Was there any audio recorded?	No	
was there any audio recorded:	110	
	DATE DE DESCRIPTIVA	
DETAILS OF OTHE	R VEHICLE PROPERTY 1	
Vehicle Registration Number	YQ706L	
Vehicle Manufacturer	Mitsubishi	
Vehicle Model	Fuso	

Vehicle Variant

Vehicle Colour Vehicle Category	
Vehicle Category Name of Driver	51
Name of Driver	
Contact Number	Commercial vehicle
Address	MALE DRIVER
Address Address complement	-
Address complement Postcode	-
occode	-
Insurance Company Name	-
Details of property	
No. Of Passenger (Including Driver) PASSENGER 1	
(wisidding Driver)	FRONT PORTION
PASSENGER 1	2
Name	
	PASSENGER
the same course was the same of the same o	
	Male

DETAILS OF OTHER VEHICLE PROPERTY 2

	ER VEHICLE PROPERTY 2
Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property decrees	SKR8129K Toyota Vios
Details of property damaged in accident No. Of Passenger (Including Driver)	FRONT RIGHT PORTION

VILC Income Motor Service Contre

Vehicle No. 6 453810 Make Mistel KICA PULSIL

Report Date: 30/4/2021 | Start Line; 12:05 PM

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 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)

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 cever 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 Porsonal 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.
- (d) my Personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonable required for the purposes stated, or

(ii) for complying with requirements under any regulations, law or court orders

30:4/2021 12:05

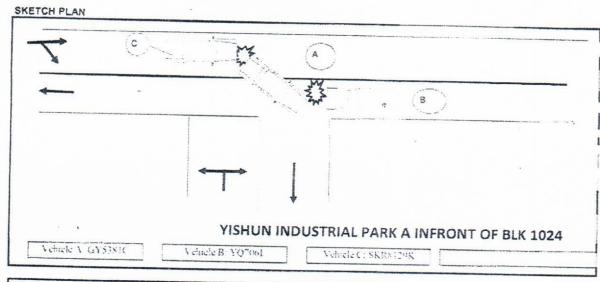
30/4/2021 12:05

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

Reporting Centre Personnel's Signature Name: Chen JunLiang

Policyholder's Signature

Date & Time:



I SIGNALLED TO TURN RIGHT INTO YISHUN INDUSTRIAL PARK A. VEHICLE B FROM OPPOSHIE TRAFFIC DIRECTION HIT ONTO MY VEHICLE FRONT PORTION, A FEW SECONDS LATER, VEHICLE C HIT ONTO MY VEHICLE REAR PORTION, NO ONE WAS INJURED.

DECLARATION

I'We declare the foregoing particulars are true in every respect

30/4/2021 12:05

30 4 2021 12:05

Policyholder's Signature

Date & Time:

Driver's Signature (If driver is not the policyhalder) Date & Time:

Reporting Centre Personnel's Signature Name: Chen Juntuang