

ASS. REC. BY:

REF:

## ASSIGNMENT

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: \_\_\_\_\_

(Policy Condition)

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: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: YN771M Yr Regn: 2009 NovType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Isuzu NQR C.C. 5193Colour: White A/C: Insured / Std / NI / NASp. Reading: 224888 T/Radio: Insured / Std / NI / NA

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

C/No: JAAXNR7SK97100058Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: NH / S/Rim / STD A/Rim orTyre Size: F: 215/75R17.5R: 215/75 R17.5

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

TOYO / YOKO or

Front \_\_\_\_\_ / Rear \_\_\_\_\_

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. \_\_\_\_\_ D.O.I. 17/05/21.Survey held at Xin Hua.Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop orFront n/s.

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

Date / Time	Action / Instruction
	<u>TP China.</u>
	<u>Power Gate, Refrigerator</u>
	<u>COE Expiry: 31/10/24.</u>
	<u>MV: 35K. Depreciation @ 10K x 3.5yr = 35K</u>
	<u>PV: 9K.</u>
	<u>Nett: 26K.</u>

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

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

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

3 + PS. \$

Photos

Others

TOTAL

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

Lump Sum / L.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	17/05/2021 13:59 (SGT)
Date of Accident	15/05/2021 14:35 (SGT)
Exact Location of Accident	Woodlands Ave 10, Singapore
Additional Location Information	WOODLANDS AVE 10
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN771M
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	FRESHDIRECT PTE LTD
Company Reg No	2XXXXX709Z
Email Address	shan.kuah@freshdirect.com.sg
Mobile Phone No	(Phone) +65-92716218
Alternative Phone No	+65-92716218

#### VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	NQR75UK5A
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?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	5193

#### INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	D20MTPCVE002990
Cover Note Number	-

#### DRIVER

Name of Driver	DONG ZHEN
Passport No/FIN	GXXXX638X

Date Of Birth	07/03/1982
Occupation	Outdoor
Date Of Driving Pass	22/06/2016
Driving experience	4 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96465918
Alt. Phone Number	-
Email Address	allanlimcc75@gmail.com
Address	47 JALAN BUROH 01-08 CWT MEGA LOGISTICS HUB
Address complement	-
Postcode	S(619491)
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Cross Junction
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?	Yes
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?	Yes
Police Station Name	Jurong East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008999999
Alt. Police Station Phone No	(Fax) +65-66655791
Police Station Address	No. 92 Boon Lay Way Singapore 609962
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

KINDLY REFER TO ATTACH POLICE REPORT & SKETCH PLAN.

#### 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	GBD3406Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
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



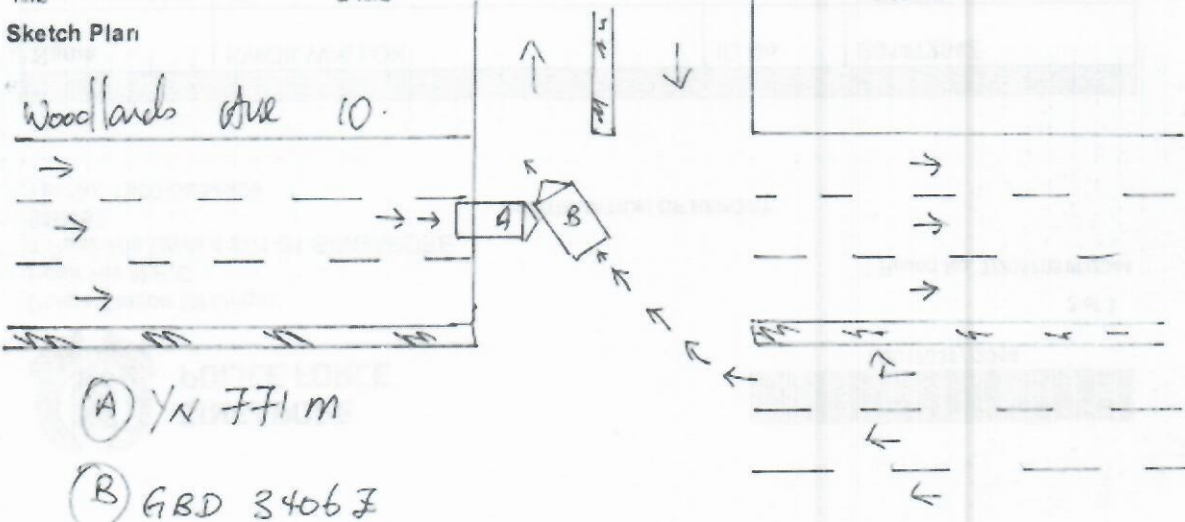
##### INJURED 1

Name of injured person DONG ZHEN  
Address -  
Address Complement -  
Post Code -  
Approximate Age Years Old -  
Injuries Sustained -  
Injured person in which vehicle? YN771M  
Were seat belts worn? -  
Was this injured conveyed to hospital by ambulance? Yes

## 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 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 Don ZHEN	Witnessed by Reporting Centre Personnel 
<p><b>Sketch Plan</b></p> <p>Woodlands Ave 10.</p>  <p>(A) YN 771 M (B) GRD 3406 J</p>		

Describe Circumstances of the Accident

As Police Report : T/20210516/2075

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

Don ZHEN

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

*[Signature]*

Witnessed by Reporting Centre Personnel





**SINGAPORE  
POLICE FORCE**



T/20210516/2075

Police Station Of Origin:  
Jurong East N.P.C.  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

1 of 3

Report No: T/20210516/2075

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made 16/05/2021 22 46	Vide Report No L/20210515/0097	Station Diary No. 50
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**Informant's Particulars**

Name of Informant: DCONG ZHEN			Address: 47 Jalan Buroh #01-08 CWT Mega Logistics Hub SINGAPORE 619491		
ID Type / ID No: FIN NO / G2596638X			Contact No: Home/Office Mobile 96465918		
Nationality: CHINESE			Email:		
Sex: Male	Age: 39	Date of Birth: 07/03/1982	Type of Informant: Driver		
Race: Chinese			Language: Chinese	Institution / School Name:	
Occupation: Driver			Driving Licence Information: Class 3 4		Date of Expiry: 16/06/2025

**General Information of the Accident**

Type of Accident	Injury Attended by Police	Drink Drive No	Date/Time of Accident 15/05/2021 14:35	Type of Location X-Junction
Location WOODLANDS AVENUE 10				
Weather Clear		Road Surface Dry		Road Speed Limit
Traffic Flow Two Way		Traffic Control Traffic Light - Working		Traffic Volume Moderate
Type of Collision Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD3406Z	Lorry				Seriously Damaged	1
YN771M	Lorry				Seriously Damaged	0

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20210516/2075

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

2 of 3

Report No: T/20210516/2075

## CONTINUATION OF REPORT

Driver			
Name	DONG ZHEN	ID No	G2596638X
Related Vehicle	YN771M (Lorry)	Contact No	96465918
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3.4 Date of Expiry: 16/06/2025
Date Treatment	15/05/2021	Date Discharge	15/05/2021
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On 15/05/21, at about 1435hrs, I was driving my company lorry bearing plate number YN771M along Woodlands Avenue 10 towards Woodlands Avenue 12, as I was driving towards the junction of Woodlands Avenue 10 and Sembawang Way, green light was in my favour. Meanwhile at said junction, a lorry bearing plate number GBD3406Z from opposite side towards Admiralty Road East made a right turn into Sembawang way, however I was unable to stop in time and I hit onto said vehicle.

- The head of my vehicle collided with the left side of the other vehicle. Both of our vehicles had serious damage. To my knowledge, the other vehicle had one passenger, who was also conveyed by ambulance, however I am unsure of the injuries he sustained.

After the collision, I felt headache and wanted to vomit, subsequently I was conveyed to Khoo Teck Puat hospital. I have been given 3 days MC from 15/05/2021 to 17/05/2021.





**SINGAPORE  
POLICE FORCE**



T/20210516/2075

3 of 3

Police Station Of Origin:  
Jurong East N P C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

Report No. T/20210516/2075

## CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report.

D/

Sgt 3 MIAO TIAN

Signature Of Informant

D/ ZHEN

Signature Of Interpreter

Not applicable

Date/Time

16/05/2021 22:46

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt NG BEIFENG

Contact No: 65476845

Classification Of Case:

Authentication Stamp

NP168

SN 34

SIGNATURE

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	709Z
Vehicle Details	
Vehicle No.:	YN771M
Vehicle to be Exported:	Yes
Intended Deregistration Date:	17 May 2021
Vehicle Make:	ISUZU
Vehicle Model:	NQR75UK5A
Primary Colour:	White
Manufacturing Year:	2009
Engine No.:	4HK1750188
Chassis No.:	JAAN1R75K97100058
Maximum Power Output:	-
Open Market Value:	\$43,865.00
Original Registration Date:	04 Nov 2009
First Registration Date:	04 Nov 2009
Transfer Count:	1
Actual ARF Paid:	\$2,194.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Oct 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$12,921.00
COE Rebate Amount:	\$8,926.00
<b>Total Rebate Amount:</b>	<b>\$8,926.00</b>
Message	

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 17 May 2021

OK





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ISUZU NPR

Price Range

Depreciation

&gt; 10 year(s)

Vehicle Type

Advanced Search

## Used Car Comparison

--- Comparing 2 Vehicles ---

Isuzu NPR85 (COE till 03/2024)

Isuzu NPR85 (COE till 04/2024)



Clear All

Add all to Shortlist

Add to Shortlist

Add to Shortlist

Back to search result

Use search bar above to select another car to compare.

Use search bar above to select another car to compare.

## CAR DETAILS

Price	\$25,180	\$28,800	-
Instalment	N.A.	N.A.	-
Registration Date	11-Mar-2009	09-Nov-2009	-
Manufactured	2008	2009	-
Mileage	-	-	-
Transmission	Manual	Manual	-
Engine Cap	2,999 cc	2,999 cc	-
Road Tax	-	-	-
Power	-	-	-
Curb Weight	2,500 kg	2,460 kg	-
Features	Really Good Condition. View To Believe.	-	-
Accessories	-	-	-
Description	In Good Condition, New Clutch Assembly. New Battery. New Tyres. Lucky No 9. Can Renew COE For Another 10 Years.	14FT Lorry With Canopy, New Paintwork, Well Maintained By Previous Owner, High Loan High Trade In, Call Now For Viewing!	-
COE	\$13,378	\$13,380	-
OMV	\$40,696	\$36,706	-
ARF	\$2,035	\$1,836	-
Depreciation	\$8,940 /yr	\$9,740 /yr	-
No. of Owners	2	4	-
Type of Vehicle	Truck	Truck	-
Category	COE Car, Direct Owner Sale	COE Car	-
Availability	Available	Available	-
Remarks	Fuel type Diesel COE expiry date 2024-04-30	Fuel type Diesel COE expiry date 2024-04-30	-

## SELLER INFORMATION

[https://www.sgcarmart.com/used\\_cars/usedcars\\_compare.php](https://www.sgcarmart.com/used_cars/usedcars_compare.php)