CS/GRB21006539/Atf3 ASSIGNMENT SJE 6932B. Yr Regn: 2008, May. Veh No: Date: From: Type: M.Cap / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Estimated Cost: Truck / Trailer or OD / TP / WS / TP RES / OD RES / EVA / INV / MV 1496 Toysta Axio. Make: To Inspect Vehicle No: Insured / Std / NI / NA A/C: Colour at Workshop m/s T/Radio: Insured / Std / NI / NA 271580 Sp.Reading Eng/No: Insured: NZ£1416077749 * C/No: Policy No. Gen. Cond. Good / Fair / Poor / Burnt Claims No. Steering: Inorder / Jammed / Leaked / Burnt or Excess: Sum Insured: Inorder) Jammed / Leaked / Burnt or Brake: (Client's Record) Nil (S/Rim / STD A/Rim or Make of Veh: 185/70RIT. Tyre Size: 185/70R14 (Policy Condition) BS / DUN / EXNOVA / GY / FS / LIZA (MIC) OHTSU / PIR / SUMI / N/S 0/5 Remark: The veh had commenced its repair at the time of inspection. TOYO / YOKO or Rear Front Bal. or Market Value: 06 mm R/Bal. mm Consistent?: Yes or No IDAC Accident Rport: L/Bal. 06 mm L/Bal. mm Consistent?: Yes or No GIA / PR Seen: D.O.I. D.O.A. Res.: Yes or No Est. Repairs: days Antomobile 3 Val.: Yes or No Survey held at Lum Sum: Rear / O/S / N/S / U/C / Rooftop or Des. of Damages/ CA / REV / REP. / 24 HRS Vehicle: IN / OUT The U/C / Chassis frame / Body Structure affected due to collision.

Jate:	reison contacted.		The O/O / Officiality /	
Date / Time	Action / Instruction		WEE	piry: 04/05/28.
		se at lump sun 18205.20;57%		
ate/Time, File P	ass to? : Preli. Report	Day	s Of Repair: 18	
) ate/Time, File F	: Final Report	Res	urvey No. of Trip:	Survey Fee: Transportation:
()		Add Fee:	: Site Insp (\$: Interview (\$) S + RS SI) Pholos
Report For Lump Som			: Tech. Invs (8 : Weel end (5) Others
Seature Seat	T Separate S	Form		10101.

SN092167000B / National Assessment Centre Services [408933] ENTRY DATE & TIME: 07/06/2021 18:34 (SGT) SUBMITTED BY: Roslinda Binte A. Wahab VERSION: 1 (07/06/2021 18:34 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 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.
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

07/06/2021 18:34 (SGT) 06/06/2021 20:30 (SGT) Upper Paya Lebar Rd, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJE6932B

INSURED/POLICYHOLDER

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

No MR ANG KIAT SXXXX935E angjason78@gmail.com (Phone) +65-97572796 +65-97572796

VEHICLE PARTICULARS

Alternative Phone No

Manufacturer Model

Toyota Axio

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

Private use

No - Claiming third party Private car

Auto 1500

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy

Tokio Marine Insurance Singapore Ltd Comprehensive

21-MW003458-R06

DRIVER

Policy Number Cover Note Number

Name of Driver NRIC No

ANG WEE KIAN JASON(HONG WEIJIAN) SXXXX175E



Date Of Birth 01/11/1978 Occupation Indoor Date Of Driving Pass 11/11/2002 Driving experience 18 YEARS AND 7 MONTHS Gender Male Mobile Number (Phone) +65-96823078 Alt. Phone Number Email Address angjason78@gmail.com Address BLK 166 HOUGANG AVE 1 Address complement #05-1588 Postcode 530166 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child 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 5 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) 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 Serangoon Neighbourhood Police Centre Police Station Address 50 Serangoon Avenue 2 #01-02 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE POLICE REPORT:T/20210607/2067 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 SLL8507Y 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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLH800Z
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLM1871K
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SJC1819P
Vehicle Manufacturer	-
Vehicle Model	
Vehicle Variant	¥1
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)	-

INJURED PERSONS DETAILS

. INJURED 1

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

ANG WEE KIAN JASON(HONG WEIJIAN)

SUBJECT

ANG WEE KIAN JASON(HONG WEIJIAN)

Yes

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report oprrecity the details of the accident to speed up the claims process.
- 2. The Formmust 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
- 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 at 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
- (s) 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 malling of correspondence, statements, involces, 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
- (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 & Driver's Signature (# driver is not the policyholder) / Date Witnessand by Reporting Centre & Time Sketch Plan A - 51E6931B UPP PAYA LEBAR DOAD B - 54185074 (- SLH800Z D - SIMETIK F - SK 1819P

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Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129 CONTINUATION OF REPORT

Report No. T/20210607/2067

2013

Tel No: 1800-4880999

Brief Details.

On 06/06/2021 at about 2030hrs, I was driving my vehicle bearing SJE6932B along Upper Paya Lebar Road towards Boundary Road. I stopped my vehicle at the traffic junction of Upper Paya Lebar Road and Upper Serangoon Road as the traffic light was red.

Suddenly. I felt three impact from the rear and that caused my vehicle to collide onto the rear of the vehicle bearing SLM1871K which was in front of mine.

After the impact, I heard a revving engine noise from another vehicle. So, I waited for the engine noise to cease before I alight to make a check. After alighting, I discovered 2 vehicles (SLH800Z and SLL8507Y) had likely collided onto the rear of my vehicle while another damaged vehicle (SJC1819P) swerved to the left side of the road. In total, 5 vehicles (including my own) were involved in the traffic accident.

SCDF. Traffic police and ambulance were at scene to assist. I was not conveyed by ambulance but after the accident, I went for a medical check-up as I felt pain on my back and was granted 3 days Outpatient Sick Leave dated 07/06/2021 to 09/06/2021.

Traffic police officer then advised me to lodge a traffic accident report with reference to F/20210606/0273. I do not have any in-car camera installed in my vehicle. That is all.





Report No. 1/20210607/2067

1 of 3

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129

Tel No: 1800-4880999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/06/2021 14:57		Made:	Vide Report No.: F/20210606/0273	Station Diary No.: 27	
Informa	nt's Partic	ulars			
	f Informant: EE KIAN JA		Address: APT BLK 166 HOUGANG AV 530166	ENUE 1 #05-1588 SINGAPORE	
ID Type / ID No.: NRIC NO / \$7833175E			Contact No.: Home/Office:	Mobile: 96823078	
Nationality: SINGAPORE CITIZEN		ŒN	Email:		
Sex: Male	Age: 42	Date of Birth: 01/11/1978	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: CDD ASSURANCE SPECIALIST			Driving Licence Information: Class: 3	Date of Expiry	

Type of Accident:	Injury Conveyed By Ambula	Drink nce Drive:	Date/Time of Accident: 06/06/2021 20:		Type of Location X-Junction	
	LEBAR ROAD					
Weather: Clear	1	Road Surface: Dry		Road	Speed Limit:	
Traffic Flow: Traffic		Traffic Control:	ic Control: ic Light - Working		Traffic Volume: Moderate	
		Traffic Light - W	lorking	Moder	ate	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SJC1819P	Car				Seriously Damaged	The same of the sa
SJE6932B	Car			A CONTRACTOR OF THE CONTRACTOR	Seriously Damaged	0
SLH800Z	Car			and the second s	Seriously Damaged	0
SLL8507Y	Car				Seriously Damaged	0
SLM1871K	Car				Seriously Damaged	0





Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE CONTINUATION OF REPORT

Report No. T/20210607/2067

Brief Details.

Tel No: 1800-4880999

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Traffic police officer then advised me to lodge a traffic accident report with reference to F/20210606/0273. I do not have any in-car camera installed in my vehicle. That is all.





Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129 CONTINUATION OF REPORT

Report No. T/20210607/2067

Tel No: 1800-4880999

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: F / Sgt 3 TOH RUI YUN	Signature Of Informant.
Signature Of Interpreter: Not applicable	Date/Time: 07/06/2021 14:57
Officer In Charge Of Case TP / GIT / Sgt 3 MUHAMMAD SYARIFUDDIN MUHAMMAD AJMAIN Contact No.: 65476367	Classification Of Case.
Authentication Stamp	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	OL NIDIC
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	935E
Vehicle No.:	SJE6932B
Vehicle to be Exported:	No
Intended Deregistration Date:	09 Jun 2021
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA AXIO 1.5X A
Primary Colour:	Blue
Manufacturing Year:	2008
Engine No.:	1NZD008126
Chassis No.:	NZE1416077749
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$12,909.00
Original Registration Date:	05 May 2008
First Registration Date:	05 May 2008
Transfer Count:	0
Actual ARF Paid:	\$12,909.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	*
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	- An Article States
COE Expiry Date:	04 May 2028
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$38,192.00
COE Rebale Amount:	\$26,361.00
Total Rebate Amount:	\$26,361.00
The information contained herein is correct as at 09 Jun 2021	

The information contained herein is correct as at 09 Jun 2021

OK

13

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Rental Cars

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Forum

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ANNOUNCING Benefit Auto

as sgCarMart Premium Dealer for the 7th Consecutive Year





Depreciation

> 10 year(: V

Vehicle Type

Used Car Comparison

--- Comparing 4 Vehicles ---

Toyota Corolla Axio 1.5A X (COE till 05/2028)



Toyota Corolla Axio 1.5A X (COE till 07/2028)



Toyota Corolla Axio 1.5A X (COE till 12/2028)



Toyota Corolla Axio 1. Edition (COE till 01/2



Clear All

Add all to Shortlist

Back to search result

Add to Shortlist

Add to Shortlist

Add to Shortlist

CAP DETAILS

CAR DETAILS			\$48,800	\$47,500
Price	\$43,800	\$46,800	\$40,000	NA.
Instalment	N.A.	N.A.	N.A.	N.A.
	08-Ma /-2008	29-Jul-2008	24-Dec-2008	09-Jan-2009
Registration Date		2008	2008	2008
Manufactured	2008			144,454 km
Mileage		•	Auto	Auto
Transmission	Auto	Auto		1,496 cc
Engine Cap	1,496 cc	1,496 cc	1,496 cc	
	\$955 /yr	\$887 /yr	\$887 /yr	\$887 /yr
Road Tax		81.0 kW (108 bhp)	81.0 kW (108 bhp)	81.0 kW (108 bhp)
Power	81.0 kW (108 bhp)	1,130 kg	1,130 kg	1,130 kg
Curb Weight	1,130 kg	1,130 kg		1.5L DOHC VVT-I E
Features				Auto Transmission, Super Low Fuel Co Trimming.
Accessories				Digital Air-con Con Pioneer DVD Playe Camera/Sensors, R Mirrors/Indicators,

Description

COE

OMV

ARF

Depreciation

No. of Owners

Road Tax Renew 6 Months. Original Condition. In House Loan Or Bank Loan Available. Fast And Easy Loan Approval.

\$0 Down And Full Loan Available. 100% \$0 Down And Full Loan Available. 100% Approval. Car From \$600 Monthly Only. Bad Credit And Discharged Bankruptcy Accepted. All Cars With Warranty. Loan Amount Stated. We Have Interest From 1.88%. Open Daily Till 11 PM Including Sunday And Ph. Call/Whatsapp To Set An Appointment. Online Pre-loan Submissions Available Submissions Available.

\$37,165

\$12,339

\$12,339

Sedan

\$6,550 /yr

\$27,571 \$12,046

\$3,974

Sedan

Available.

\$6,470 /yr

\$0 Down & Full Loan Available. 100% Approval. Car Fr. \$600/mth Only. Bad

Approval. Carl T. Book Approval. Caredit & Discharged Bankruptcy
Accepted. All Cars With Warranty. Loan
Amt Stated. We Have Interest Fro.

1.88%. Open Daily Till 11pm Including Sunday & PH. Call/Whatsapp To Set Appt. Online Pre-loan Submissions

Well Kept By Previo Available! Contact An Viewing.

\$26,047

\$16,580

\$16,580

\$6,260 /yr

5

Sedan

Type of Vehicle https://www.sncarmart.com/used_cars/usedcars_compare.php

3

Sedan

\$38,192

\$12,411

\$10,344

\$6,330 /yr