

ASS. REC. BY: TQM

REF:

CS3/ALG21008022/Bqf 3

Shiau Chan

ASSIGNMENT

From: _____ Date: 18/8/2021

Veh No: CB 6997M Yr Regn: 22/3/2003

Estimated Cost: _____

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

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

To Inspect Vehicle No: CB 6997M

Make: Toyota Hiace c.c. 2985

at Workshop m/s Ann Joo Motor

Colour: Silver A/C: Insured / Std / NI / NA

of 170 Sin Ming Dr #02-17

Sp. Reading: 823778 T/Radio: Insured / Std / NI / NA

Insured: _____

Eng/No: 5L5304017

Policy No. _____

C/No: LH172-6112720

Claims No. 7601624388SG

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured: _____ Excess: _____

Steering: Order / Jammed / Leaked / Burnt or _____

(Client's Record)

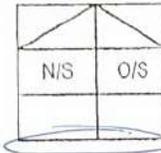
Brake: Order / Jammed / Leaked / Burnt or _____

Make of Veh: _____

Modi: N/Rim / S/Rim / STD / R/Rim or _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Tyre Size: F: 195/15 oh tsu

R: 195/15 Yoko

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

TOYO / YOKO or _____

Bal. or Market Value: 30,000/-

Front Rear

IDAC Accident Rpt: _____ Consistent? : Yes or No

R/Bal. 5 mm

GIA / PR Seen: _____ Consistent? : Yes or No

L/Bal. 5 mm

Est. Repairs: 3 days Res.: Yes or No

D.O.A. 27/7/2021 D.O.I. 18/8/2021

Lun Sum: _____ % 3 Val.: Yes or No

Survey held at Ann Joo

CA / REV / REP. / 24 HRS WP

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or _____

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

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

Date / Time	Action / Instruction
	Survey photos taken on Wed 18/8/2021 @ 11:58:12 AM
	Resurvey photos taken on Fri 20/8/2021 @ 15:07:04 PM
	After paint photos taken on Fri 20/8/2021 @ 3:09:52 PM
	<u>TQM</u>

Date/Time, File Pass to? : Prel. Report

Days Of Repair: 3

1) 25/10 Typist : Final Report

Resurvey No. of Trip: 2

Date/Time, File Return to?

Survey Fee:

2) _____

Add Fee: Site Insp (\$ 1)

Transportation:

Interview (\$ _____)

____ S + RS ____ SI

Tech. Invs (\$ _____)

Photos

Weekend (\$ _____)

Others

Report Format: MER-DAR

Lump Sum / L.S.I. / F

TOTAL

Condition (C/D)

(0)Dem (2)Distort (3)Distorted (4)Cracked (5)Cm (6)Scratched
 (07)Defamed (08)Biffed (09)Def-lol (10)Broken (11)Necessary
 (12)Missing (13)Torn (14)Unconfirmed (15)Not Working

ACTION (A/C)

(1)Replace (✓) (2)Repair (✓) (3)Check (✓)
 (4)Not Consistent (NC)

Aug 2015

VAN / LORRY (Rear)

Vehicle No: **CB6997M**

Rear Portion

NAC	INC	Item	CON	AC	Qty
1137	993626	Rear Number Plate			
1138	993627	Rear Number Plate Base			
2044	993628	Rear Number Plate Bracket			
1140	993632	Rear Number Plate Lamp			
1141	992958	Rear Bumper			
1142	993108	Rear Bumper Upper			
1143	993017	Rear Bumper Lower			
1144	993054	Rear Bumper Side			
1147	992976	Rear Bumper Bracket			
1148	993068	Rear Bumper Side Retainer			
1149	993045	Rear Bumper Reinforcement			
2045	993081	Rear Bumper Step Panel			
2046	993079	Rear Bumper Step Garnish			
2047	993186	Rear Crash Bar			
1158	994023	Reverse Sensor			
1159	993327	Rear End Panel			
1163	993851	Rear LH Taillamp	BR	✓	1
1164	993853	Rear LH Taillamp Garnish			
1165	993859	Rear LH Taillamp Panel			
1166	995116	Rear RH Taillamp	BR	✓	1
1167	993853	Rear RH Taillamp Garnish			
1168	993859	Rear RH Taillamp Panel			
1169	993554	Rear Apron Panel			
1289	995156	Rear LH Door			
1350	993201	Rear RH Door			
2048	991328	Rear Door Emblem			
2049	993274	Rear Door Outer Handle			
2050	993228	Rear Door Garnish			
2051	993294	Rear Door Rubber			
1291	995194	Rear LH Door Hinge			
1352	995307	Rear RH Door Hinge			
1301	993261	Rear LH Door Lock			
1362	993261	Rear RH Door Lock			
2052	993232	Rear Door Glass			
2053	993955	Rear Door Glass Sealant			
1248	994729	Third Brake Light			
1181	994543	Tailgate	DD	✓	
2054	993700	Rear Rubber Stopper			
2055	993701	Rear Rubber Stopper Bracket			
1182	991328	Tailgate Emblem	NGC	✓	1
1183	994643	Tailgate Outer Handle			
1185	994545	Tailgate Garnish			
1193	994602	Tailgate Glass			
1194	994606	Tailgate Glass Rubber			
1195	994604	Tailgate Glass Moulding			
1196	994607	Tailgate Glass Sealant			
2056	994597	Tailgate Extension Mirror			
1197	994629	Tailgate Lock	JM	✓	
1198	994651	Tailgate Rubber			
1199	994611	Tailgate Hinge			
1200	994594	Tailgate Damper			
1201	994613	Tailgate Inner Board			
2057	993992	Rear Wiper Arm			
2058	993995	Rear Wiper Blade			
2059	993997	Rear Wiper Motor			
2060	993484	Rear Floor Panel			
1204	995065	Spare Tyre			
2061	993785	Spare Tyre Bracket			
1212	993364	Rear Exhaust Pipe			
1214	993361	Rear Exhaust Mounting			
1216	995223	Rear LH Chassis Member			
1217	993165	Rear RH Chassis Member			

NAC	INC	Item	CON	AC	Qty
2062	993748	Rear Sidegate			
2063	994225	Rear Sidegate Lock			
2064	993749	Rear Sidegate Hinge			
2065	994226	Sidegate Lower Panel			
2066	994227	Sidegate Railing			
2067	994208	Side Cover Hook			
2068	991965	Side Step Panel			
2069	994496	Side Step Panel Stopper			
2070	992857	Rear Body Panel			
2071	992866	Rear Body Panel Inner			
2072	995329	Sliding Door LH			
2073	995328	Sliding Door RH			
2074	994295	Sliding Door Handle			
2075	994300	Sliding Door Lock			
2076	994313	Sliding Door Rubber			
2077	994291	Sliding Door Bottom Roller			
2078	994317	Sliding Door Top Roller			
2079	994306	Sliding Door Rail			
2080	994315	Sliding Door Stepboard			
2081	994316	Sliding Door Stepboard Garnish			
1224	993621	Rear LH Mudflap			
1225	993933	Rear LH Wheel Rim			
1226	994025	Rear LH Rim Cover			
1227	995065	Rear LH Tyre			
1234	993622	Rear RH Mudflap			
1235	993934	Rear RH Wheel Rim			
1236	994025	Rear RH Rim Cover			
1237	995065	Rear RH Tyre			
1252	992179	Fuel Tank			
1253	992184	Fuel Tank Bracket			
1136	990247	Sticker			
		Tailgate lock cover	BR	✓	
		Sticker, 60 km/h	NGC	✓	1

No of Items: 7

Assessor: Tom

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	981W
Vehicle Details	
Vehicle No.:	CB6997M
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Oct 2021
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE
Primary Colour:	White
Manufacturing Year:	2003
Engine No.:	5L5304017
Chassis No.:	LH1726112720
Maximum Power Output:	-
Open Market Value:	\$18,568.00
Original Registration Date:	22 Mar 2003
First Registration Date:	22 Mar 2003
Transfer Count:	4
Actual ARF Paid:	\$929.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Rebate Amount:	\$0.00
Total Rebate Amount:	\$0.00

The information contained herein is correct as at 25 Oct 2021

OK

MV 30,000/2

Totally fine



Toyota Hiace 2.5M (COE till 01/2025) \$34,800 \$10,690 /yr 26-Jan-2005 2,494 cc - Bus Available

Fuel Type: Diesel

Good Condition, Well Maintained, Regular Service. Cheap HDB Carpark 1800Kg. CB Plate Can Be Able For Exchange, 11 Seaters, Lifespan Till 01/2025. Flexible Loan, Call For Arrange For Viewing.

Posted: 14-Sep-2021 Tags: 2005 Toyota Hiace, Toyota Hiace, Toyota, Hiace



Toyota Hiace 3.0M \$33,800 N/A 16-Jun-2003 2,985 cc - Bus Available

Fuel Type: Diesel

CB Plate Toyota Hiace 11 Seater. Left 20 Month To Drive But Cb Plates Able To Use Again For 20years! Just Buy Another New Hiace Body Price Only No Coe Needed. Super Worth It! Call Us Now Before It Gone

Net Link Partners Pte Ltd

Posted: 18-Oct-2021 Tags: 2003 Toyota Hiace, Toyota Hiace, Toyota, Hiace

PREMIUM AD



Toyota Hiace Commuter 2.0M (COE till 03/2028) \$49,000 \$7,610 /yr 23-Apr-1998 1,998 cc - MPV Available

B632. Flexible And Attractive Loan Available. Trade-In Available For Your Car! No Hidden Costs. For Further Information Or If You Have Any Questions Please Do Not Hesitate To Contact Us.

Posted: 08-Oct-2021 Tags: 1998 Toyota Hiace, Toyota Hiace, Toyota, Hiace

COMBINATION

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

Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

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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 27/07/2021 17:05 (SGT)
Date of Accident 27/07/2021 06:30 (SGT)
Exact Location of Accident Tampines Ave 12, Singapore
Additional Location Information ALONG TAMPINES AVENUE 12 TOWARDS TPE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number CB6997M

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner ELITE TRANSPORT SERVICES
Company Reg No 53073981W
Email Address LONGJIE_91@HOTMAIL.COM
Mobile Phone No (Phone) +65-96375640
Alternative Phone No (Office) +65-96375640

VEHICLE PARTICULARS

Manufacturer Toyota
Model Dyna
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Manual
CC 2982

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMB1SNW00009572000
Cover Note Number -

DRIVER

Name of Driver FOO CHIN PHAT
NRIC No S1248253A

Date Of Birth 18/08/1957
 Occupation Outdoor
 Date Of Driving Pass 27/07/1979
 Driving experience 42 YEARS
 Gender Male
 Mobile Number (Phone) +65-96968904
 Alt. Phone Number -
 Email Address LONGJIE_91@HOTMAIL.COM
 Address BLK 259A COMPASSVALE ROAD #09-599 SINGAPORE
 Address complement -
 Postcode 541259
 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 Chain Collision
 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 vehicle or property damaged? Yes
 Number of Passengers (Including Driver) 8
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

PASSENGER 1

Name VALLIAMMAI
 Gender Female

PASSENGER 2

Name LOW KAH YENN
 Gender Female

PASSENGER 3

Name NITHYABHARATHI
 Gender Female

PASSENGER 4

Name ANGELINE KOH
 Gender Female

PASSENGER 5

Name AILEEN LEE
 Gender Female

PASSENGER 6

Name FAITH HOON EN
 Gender Female

PASSENGER 7

Name AURA HGIDIJA
 Gender Female

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

PLEASE REFER TO THE SKETCH PLAN.

ATTACHMENT(S)

Are accident photos available for attachment? No
Was there any video captured by Car Camera? No
Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

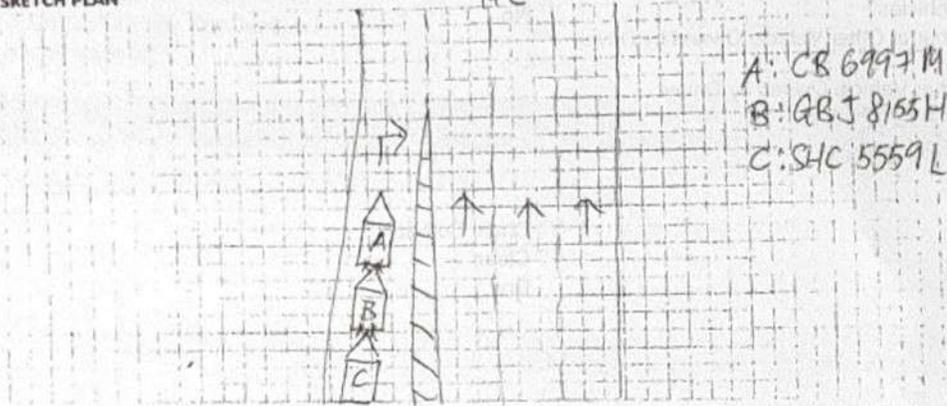
Vehicle Registration Number GBJ8155H
Vehicle Manufacturer Toyota
Vehicle Model Dyna
Vehicle Variant -
Vehicle Colour -
Vehicle Category Goods vehicle
Name of Driver WANG BO
Passport No/FIN G8737936T
Contact Number -
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHC5559L
Vehicle Manufacturer Toyota
Vehicle Model Prius
Vehicle Variant -
Vehicle Colour -
Vehicle Category Taxi
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

TPE



A: CB 6997M
 B: GBJ 8155H
 C: SHC 5559L

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/07/2021 at about 06:30hrs along Tampines Ave 12 entering TPE.

The vehicle which was in front of me stopped, I stopped with distance. When my vehicle 'A' (CB 6997M) ^{was} stationary in my lane out of a sudden there's an impact at my rear. I checked on my passengers to see they are all right and ~~went~~ ^{went} down to checked on my vehicle 'A' rear. I saw vehicle 'B' (GBJ 8155H) collided onto my vehicle 'A'. Vehicle 'B' driver told me that vehicle 'C' (SHC 5559L) hit his vehicle then he collided onto my vehicle 'A'.

No one were injured on the accident scene.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

倪桂芬



Policyholder's Signature
 Date & Time

[Signature]

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

[Signature]



Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

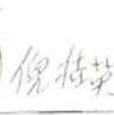
SECTION 1 OF 4 - THE FORM

IMPORTANT NOTICE

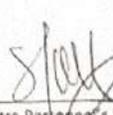
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 lodgment 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.
- (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 reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

 
 Policyholder's Signature
 Date & Time:


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

 
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.: