	ASSIC	<u>GNMENT</u>	, /
Doto		Veh No: Skp 1791	D Yr Regn: 21/8/14
From: Date: Estimated Cost:		Type: M.Car / M.Cycle / Bus / Van /	
OD / TP WS / TP RES / OD RES / EVA / I			
	117915	Make: Tous to 26	in c Alphaco 1797
		Colour Mar 40	ins Alphaco 1797  A/C: Insured / Std / NI / NA
	AUG 03-37	, , ,	T/Radio: Insured / Std / NI / NA
of C O	CILLA	Sp.Reading _ 5-/82 9	Titadio. Illustrati eta Fitti illi
Insured: SLN9	8416	Eng/No:	anc7
Policy No.		C/No: tvw40	000 9083
Claims No. MT/1130386-002		Gen. Cond. Good / Fair / Poor / Bu	
Sum Insured: Exce	SS:	Steering: Incoder / Jammed / Leake	
(Client's Record)		Brake: Inorder / Jammed / Leake	
Make of Veh:		Modi: Nil / S/Rim / STD A/Rim	
	1	Tyre Size: $F: 21$	5/60216
(Policy Condition)	X	R:	
Remark: The veh had commenced its	N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZ	_
repair at the time of inspection		TOYO / YOKO or	FIRENZA
Bal. or Market Value:	9 K.	Front	Rear 6
IDAC Accident Rport: Consiste	ent?: Yes or No	R/Bal. mm	R/Bal. mm
GIA / PR Seen: Consiste	ent? : Yes or No	L/Bal. 6 mm	L/Bal. 6 mm
Est. Repairs: $\checkmark$ days Re	es.: Yes or No	D.O.A. 3/5/2	_ D.O.I. 575/4
Lum Sum: 20 % 3	Val.: Yes or No	Survey held at	
CA / REV / REP. / 24 HRS	B 251D	Des. of Damages : Frt / Rear / O/	/S / N/S / U/C / Rooftop or
,	Vehicle: IN / OUT	fit	o(s.
Date: Person Contacted:	poplov.	The U/C / Chassis frame / Bo	ody Structure affected due to collision
Date / Time Action / Instruction	10C 1-10 C 3)	חדר	
10/21 3 Estimole	ARS LYA \$ 32 Submit	011	
	Submit		
12/5/2021 Submit PRS.			
40/0/0004 0 1 11 /0 00	2000 4 ' !		
16/8/2021 Submit L/S \$3	oouu, 4 repair day	S.	
(RED \$5200)	59%)		
Date/Time, File Pass to? : Preli. R	eport [	Days Of Repair: 4	
	-	Resurvey No. of Trip:	Survey Fee:
1) 16/8 TYPIST : Final R Date/Time, File Return to?	oport .		Transportation:
2)	Add Fee	: Site Insp (\$	)S +RS,SI
*/		: Interview (\$	) Photos
		: Tech. Invs (\$	

: Weekend (\$

TOTAL

Lump Sum / H.B.H: (\$ 3600

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**VALUE FOR MONEY VALUE FOR TIME** A PEACE OF MIND 9997 HOTLINE: 6741

Browse by Category V

Ways of Selling

Toyota Prius

Model

Price

2017 Volvo V60 T2 @ \$94,800

Depreciation

Reg Date

Eng Cap

Mileage

Advanced Search

Sort by Date Posted

Veh Type

Submit (

Search Selection

0 vehicles

Post an Ad

**Toyota Prius** 

Advertiser Login

Make

Any

Any

2014

Any

Available

✓ 20 results/page

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** 

Veh Type

Keyword(s) : Toyota Prius Depreciation: Any

: Any

**Price Range Eng Cap** Availability

: -

: Available

Reg Date

Category

: 2014

Mileage : -

: All Categories

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

Make

Model

Depreciation

Reg Date

Eng Cap

Mileage

Veh Type

For old advertisements, view Expired ads

✓ results/page

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Browse by Category

Advertiser Login

V

Make

Ways of Selling

Toyota Prius

Model

Price

Depreciation Reg Date

Eng Cap

Mileage

Advanced Search

Sort by Date Posted

Veh Type

Submit (

Status Available

✓ 20 results/page ✓

Search Selection

2 vehicles

**Toyota Prius** 

Any

\$10,530 /yr

Any

03-Aug-2015

1,497 cc

73,000 km

Toyota Prius C Hybrid 1.5A

\$47,200

2015

Hatchback

Available

Fuel Type: Petrol-Electric Most Popular And Reliable Japan Made Hybrid Hatchback, Super Saving Low Fuel Consumption. Stylish Looking Prius C, High Trade In Ar..

AutoPrestige Gallery Pte Ltd

Posted: 02-May-2021 Tags: 2015 Toyota Prius, Toyota Prius, Toyota, Prius

Toyota Prius C Hybrid 1.5A

\$40,699

\$9,930 /vr

10-Mar-2015

1,497 cc

92,000 km

Available Hatchback

Fuel Type: Petrol-Electric

Please Contact Me Via WhatsApp Only. Hybrid Battery Warranty With Borneo Motors. Low Mileage And All Components Are In Good Con..

DIRECT OWNER

Posted: 15-Mar-2021 Tags: 2015 Toyota Prius, Toyota Prius, Toyota, Prius

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

Make

Model

Depreciation

Reg Date

Eng Cap

Mileage

Veh Type

Status

✓ results/page

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**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	251D
Vehicle Details	
Vehicle No.:	SKP1791D
Vehicle to be Exported:	No
Intended Deregistration Date:	05 May 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS ALPHA HYBRID 1.8S A
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	2ZRD290026
Chassis No.:	ZVW400009083
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$30,415.00
Original Registration Date:	21 Aug 2014
First Registration Date:	21 Aug 2014
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$14,581.00 7290
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Aug 2024
PARF Rebate Amount: Intended COE Rebate Details	\$9,477.00
COE Expiry Date:	20 Aug 2024
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$69,001.00
COE Rebate Amount:	\$22,600.00
Total Rebate Amount:	\$32,077.00

The information contained herein is correct as at 05 May 2021

OK

SY0A21530009 / YEW TEE AUTOMOBILE TECH PTE LTD [417800] ENTRY DATE & TIME: 04/05/2021 12:11 (SGT) SUBMITTED BY: TOH LEI MING VERSION: 1 (04/05/2021 12:11 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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.

- 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	04/05/2021 12:11 (SGT)
Date of Accident	03/05/2021 12:15 (SGT)
Exact Location of Accident	Boon Tat St, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number	SKP1791D
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LIMA LIMO TRANSPORT SERVICES
Company Reg No	5XXXX251D
Email Address	LIMOLIMOTRANSPORT@GMAIL.COM
Mobile Phone No	(Phone) +65-94578433
Alternative Phone No	(Home) +65-94578433

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident  Are you claiming under your own insurance policy for repair to	Private use
your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1600

#### INSURANCE COMPANY

Name of Insurance Company Type of Coverage	NTUC Income Insurance Co-operative Ltd
Fleet Policy	Comprehensive No
Policy Number	5100416989-03
Cover Note Number	-

#### DRIVER

Name of Driver	MAHFUD BIN IDRIS
NRIC No	SXXXX164D

Date Of Birth 13/07/1959 Occupation Outdoor Date Of Driving Pass 08/04/2003 Driving experience 18 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-94578433 Alt. Phone Number Email Address LIMOLIMOTRANSPORT@GMAIL.COM Address APT BLK 523D TAMPINES CENTRAL 7 #17-115 Address complement Postcode 524523 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Other Does Driver Own Other Vehicles? 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? 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 PASSENGER 1 Name UNKNOWN Gender Female **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO ATTACHED

### ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Yes

Reasons for not uploading a video of the accident Was there any audio recorded?

WITH DRIVER No

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SLN9841P



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)	-

#### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person Address	MAHFUD BIN IDRIS
Address Complement	-
Post Code	
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKP1791D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No
INJURED 2	
Name of injured person	UNKNOWN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKP1791D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

#### 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
- By the ladgment 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)

Lunderstand, 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)
  - (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.

time Limo ransport Services n No: 332042519 rsport Gomelicop

Policyholder's Signature

Date & Time:

Oriver's Signature

(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name NRIC/FIN No.:

KETCH PLAN				
	111			A= SXP 17910
4	*			B= SLN9841P
	<b>ST</b>			
+ /	Polains	un Roud		
	Street 1			
SCRIBE CIRCUMSTANCES				
m 3/5/2021	. I was towelling	alung bull	I At STREET.	
I continued	to towal strong	A as the	twatte tight	s grun.
uddmly I fet	an impact on my	funt and	realised th	at vehicle 8
ha collided on my	velmole-			
1			. 0 1	
R a rown	my car sustrimed	omes of	the trent and	Mant Partium -
Was Mrs Mills well	I but made pai	n and back	baju.	
			**************************************	
ECLARATION				
asport Services,	ticulars are true in every respo	Ol. L		K
Reg No: 33204253D Emotransport@orgal.com Sicyholder's Sigoeture	Driver's Signature		Resourting Vantra	Personnel's Signature
ate & Times	(If driver is not the po	licyholder)	Mame: Name:/FIN No.:	
Proceedings of the Control of the Co	The second second second			





Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20210503/7045

# REPORT OF A TRAFFIC ACCIDENT Date/Time Report Made:

	03/05/2021 16:30		Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars		
	Informant: D BIN IDRI		Address: 492E TAMPINES STR	REET 45 #09-648 SINGAPORE 525492
ID Type / ID No.: NRIC NO / S1370164D		Contact No.; Home/Office: Mobile: 94578433		
National SINGAP	ity: ORE CITIZ	EN	Email: LIMALIMOTRANSPOR	RT@GMAIL.COM
Sex: Male	Age: 61	Date of Birth: 13/07/1959		
Race: Javanese		Language: English	Institution / School Name:	
Occupation: PRIVATE HIRER		Driving Licence Inform Class:	ation: Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/05/2021 12:15	Type of Location
Location: BOON TAT S	TREET			
Weather:		Poad Surface:		Pood Coood Limit
Weather: Clear		Road Surface: Dry	F	Road Speed Limit:
				Road Speed Limit:

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SKP1791D	Car	TOYOTA	PRIUS	White		1
SLN9841P	Car	NISSAN	PULSAR	Silver		1

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



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



3 of 3

Report No. T/20210503/7045

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

Signature	Of	Officer	Recording	The	Report:
Not applie	ohl	۵			

Signature Of Interpreter: Not applicable

Officer in Charge Of Case: TP / TPIB / MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204

Authentication Stamp

Signature Of Informant:

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

Date/Time: 03/05/2021 16:30

Classification Of Case:



Tel No: 65470000

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 T/20210503/7045

2 of 3 Report No. T/20210503/7045

#### CONTINUATION OF REPORT

Passenger				100		
Name	Unknown Passenger					NIL
Related Vehicle	SKP1791D (Car)			Contact No.		NIL
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date	NIL Date			I NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	f NIL		
Driver					************************	
Name	MAHFUD BIN IDRIS			ID No.		S1370164D
Related Vehicle	SKP1791D (Car)			Contact No.		94578433
Hospital/Clinic	K L TAY CLINIC & SURGERY			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date	03/05/2021 Date				NIL	
No, of Days gran	03	Degree of	Degree of Sligh			

#### Brief Details

On 03/05/2021, I was travelling along Boon Tat Street.
I continued to travel straight as the traffic light is green.
Suddenly I felt an impact on my front and realised that vehicle B has collided on my vehicle.
As a result my car sustained damages on the front and right portion.
After the incident, I felt neck pain and back pain.