	100 9873 1KV
Genneth ASS	SIGNMENT
From: Date:	
Estimated Cost:	Veh No: Stake 33805 Yr Regn: Of, Of
OD TP WS ITP RES I OD RES I EVA I INV I MY	M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
To Inspect Vehicle No:	Truck / Trailer or
and the second s	Make: Itando Civic c.c 1799
of Pon Sian Sean Sean	Colour M. Gold AC: Insured/Std/NI/NA
Insured:	Sp.Reading /24802 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No. Clauli 791 (1)	C/No: JIAMF0163065211280
Sum Inquired:	Gen. Cond: Good / Fair / Poor / Burnt
(Client's Record)	Steering: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Brake: Ingrder / Jammed / Leaked / Burnt or
	Modi: NII / S/RIm / ST.D A/Rim or
(Policy Condition)	Tyre Size: F: 205/55R16
Pemark: The year had assessed to	R:
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA MIC OHTSU / PIR / SUMI /
Bal, or Market Value:	TOYO/YOKO or
	Front Rear
Martin Andrew Con September and	R/Bal. 6 mm R/Bal. 3 mm
Cli	L/Bal. 6 mm L/Bal. 3 mm
7	D.O.A. 20/9/21 D.O.I. 22/9/202
O Val Tes of No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	013184
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
3018 CI Em & 28001 Carforns (Red 3416-30, 5479
Oate/Time, File Pass to?	
Day	s Of Repair:
1) : Final Report Res	urvey No. of Trip: - Survey Fee:
- 8/10/21-typist	Transportation:
Add Fee:	: Site Insp (\$)s - RS,SI
Report Format : TP	: Interview (\$) First
Lump Sum / I.B.I. (\$ 2800	Tech Invs (\$) Others
3 2000	Weekend (\$
	ICTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Owner ID:

Vehicle Details Vehicle No.:

Vehicle to be Exported:

Intended Deregistration Date:

Vehicle Make:

Vehicle Model:

Primary Colour:

Manufacturing Year:

Engine No.: Chassis No.:

Maximum Power Output:

Open Market Value:

Original Registration Date:

First Registration Date:

Transfer Count:

Actual ARF Paid:

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

PARF Rebate Amount:

Intended COE Rebate Details

COE Expiry Date:

COE Category:

COE Period(Years):

PQP Paid:

COE Rebate Amount:

Total Rebate Amount:

The information contained herein is correct as at 21 Sep 2021

Singapore NRIC

483A

SGK3380S

Yes

21 Sep 2021

HONDA

CIVIC 1.8LA

Beige

2006

R18A11037997

JHMFD16306S211290

103.0 kW (138 bhp)

\$21,168.00

07 Aug 2006

07 Aug 2006

07 Aug 2000

-

\$23,285.00

Forfeited

-

\$0.00

30 Jun 2026

B - Car (1601cc & above)

10

\$48,479.00

\$23,148.00

\$23,148.00

OK



Certificate of Insurance

Cover : Third Party

: JHMFD16306S211290

YEANG CHUAN CHIAT

: SGK3380S

: 07 Aug 2021

: 06 Aug 2022

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189). MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5067990322-07

1. Index mark and Registration Number of Vehicle Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance

4. Expery Date of Insurance

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business
- (d) Use for any purpose in connection with the Motor Trade.
 - # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: YES (FREE)
PRIMARY DRIVER	: YEANG CHUAN CHIAT
NAMED DRIVER (1)	: YEANG HUI EN AMANDA CLAIRE
NAMED DRIVER (2)	: YEANG HAO ZHONG DANIEL
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency

: ARK INSURANCE AGENCY (00000615246)

Date of Issue

: 05 Aug 2021 10.03 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

SS02219L0008 / S & H Motor Pte Ltd ENTRY DATE & TIME: 21/09/2021 17:16 (SGT) SUBMITTED BY: Wong Kee Nyuk VERSION: 1 (21/09/2021 17:16 (SGT))

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 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

21/09/2021 17:16 (SGT) 20/09/2021 14:05 (SGT) 480 Lor 6 Toa Payoh, Singapore 310480 HDB Hub Basement carpark Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SGK3380S

INSURED/POLICYHOLDER

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

VEHICLE PARTICULARS

Manufacturer Model 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?

Vehicle Category Transmission CC

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

DRIVER

Name of Driver NRIC No

No

Yeang Chuan Chiat S1352483A cyeang@gmail.com (Phone) +65-88331718 (Home) +65-88331718

Honda Civic

Private use

No - Claiming third party Private car Auto 1800

NTUC Income Insurance Co-operative Ltd **ThirdParty** No 5067990322-07

Yeang Chuan Chiat S1352483A

Date Of Birth Occupation

Date Of Driving Pass

Driving experience

Gender

Mobile Number Alt. Phone Number **Email Address**

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

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 Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

refer attached report.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour

Vehicle Category Name of Driver

NRIC No

Contact Number

Address

SKK2347Z

17/11/1959

19/08/1983

38 YEARS AND 1 MONTH

(Phone) +65-88331718

(Home) +65-88331718

8 Angklong Lane #14-06

Collision - Cross Junction

cyeang@gmail.com

Indoor

Male

579981

Yes

No

Clear

Dry

No

2

No

Yes

No

No

No

Honda

Jazz

Private car

Tay Shilin Selene

S8305919B

(Phone) +65-88581801



Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

Describe Circumstances of the Accident
On 20 Sep 21, at about 2:05pm. I divove into Fool layon HDB HUB Basement I Car Park to park my vehicle (SGK33805) As I was driving along the orteral lane, a car, though lazz (SKK23478), driven by Selene Tay Shi Lin, came out of a
HDB Hub Rasement I Can Part to part with land and
AS I was driving about the act of the My vehicle (SGE33305)
(CCK 23477) diver by salary (ave, a car, Hoyaa Jazz
Side lone.
Side lane.
Listend of etapinal I dillo lit of the
(as clearly in 1977) serving the write stop line of the lane,
Instead of stapping behind the white stop line of the lane. (as shown in photos attached) to give way to my vehicle (as I had the right of way), she did not stop. but continued driving and collided into the front right of my vehicle.
but actioned desires and collision to the
vielet of my delices
is you of my vanite.
We both out out and inspected and trate of
We both got out and inspected and took photos of the damage to our cars and took down each other
particulars and mable numbers.
La transa and make hours.
Declaration
VWe declare the foregoing particulars are true in every respect.

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

Palicyholder's Signature / Date & Time

Witnessed by Reporting Centre Personnel

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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)

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' 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 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' law yers/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 & Time & Time

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

Witnessed by Reporting Centre Personnel

LOUNTION:

THE PAYON

A STOPLINE

A SG K 3380 S

B S S K X 234 7 X

WAY



方 商 昭 喷 漆 POON SIANG SEOW

Sin Ming Autocity, No. 160 Sin Ming Drive, #05-13, Singapore 575722.

Tel: 6453 7511 Fax: 6453 8046 Email: sitti1@singnet.com.sg Regn. No. 05396600K

YEANG CHUAN CHIAT 8 ANGKLONG LANE SINGAPORE 579981 Not Nothain

CISy & 2800h

Rewry After Painy

Eday,

Dear sir

Estimate cost of repair to vehicle no. SGK 3380S

To supply

suht	121 60	10
1.	Front fender right 537.50	537.50
2.	Front fender garish	∫m 102.00 Å
3.	Front bumper 638	MgcM/Bu 638.00
4.	Front bumper retainer right	Diy 48.00 -
5.	Front bumper reinforcement	∧ 235.60 X
6.	Front fog lamp right	∫∽ 250.20 X
7.	Head lamp HID 1505.60	CM 1,505.60
8.	Head lamp bracket	Piy 96.00
9.	Front bonnet	№ 590.20 X
10.	Front bonnet rubber	101.30 X
11.	Front grille	2 as mgcm 151.90 2
		001

Labour charge Rustproofing Panel beating Spray painting Total

100.00 30/. 980.00 5006 880.00 60d

6216.30

Your faithfully

ALBERT POON

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 and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date: