

REF:

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: _____

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: STK8827C Yr Regn: 2008 / Nov

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

Truck / Trailer or

Make: Harde Stream C.C. 1799

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

Sp. Reading: 167959 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: RN6084875

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Model: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 225/45R17.

R: 225/45R17.

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

TOYO / YOKO or

Front

R/Bal. 06 mm

L/Bal. 06 mm

D.O.A.

Rear

R/Bal. 06 mm

L/Bal. 06 mm

D.O.I. 29/09/21.

*Survey held at KT Motorwerk

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

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

Date / Time	Action / Instruction
	TP III
	COE Expiry: 06/11/28.
	MV : 51K
	PV : 22-9K
	Nett : 28.1K.

Date/Time, File Pass to?

11

: Prelim. Report

1)

11

: Final Report

Date/Time, File Return to?

2)

Report Format :

Long Sum / LBJ: 6

Days Of Repair:

Resurvey No. of Trip:

Add Fee: : Site Insp (\$

: Site Insp (\$

1

Interview (\$



Tech. Invs 63

Weekend (5)

Survey Fee:

Transportation:

$$S + RS_2 \rightleftharpoons S_2$$

5 | Photos

1	Others	1
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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	27/09/2021 17:10 (SGT)
Date of Accident	26/09/2021 00:55 (SGT)
Exact Location of Accident	Near 511 Nicoll Dr, Singapore 498990
Additional Location Information	TELOK PAKU ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJK8827C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SHABIR AHMAD SHAH
NRIC No	S2571174B
Email Address	ashahscarpet@yahoo.com
Mobile Phone No	(Phone) +65-91445509
Alternative Phone No	+65-91445509

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Stream
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	Private car
Transmission	Auto
CC	1799

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5064324620-07
Cover Note Number	07/11/2020 - 06/11/2021

DRIVER

Name of Driver	MAHMUD FARIS BIN MOHAMED ISMAIL
NRIC No	S8515427C

Date Of Birth	10/05/1985
Occupation	Outdoor
Date Of Driving Pass	12/07/2005
Driving experience	16 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90253691
Alt. Phone Number	-
Email Address	mahmudfaris_vito@hotmail.sg
Address	BLK126 BEDOK NORTH STREET 2
Address complement	#13-76
Postcode	460126
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 - Major/Minor Rd
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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	MOHAMED LUQMANUL HAKIM BIN THAHA
Gender	Male

PASSENGER 2

Name	MUHAMMAD YUSAINI BIN ROSLI
Gender	Male

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

I WAS DRIVING A BLACK STREAM WITH 2 PASSENGERS ALONG TELOK PAKU ROAD TOWARDS NICOLL DRIVE WHEN VEHICLE B (SMA5637X) COMING OUT FROM CHANGI BEACH CARPARK 2 TRTING TO MAKE RIGHT TURN TO TELOK PAKU ROADS TOWARDS LOYANG AVE DASH OUT WITHOUT CHECKING CLEAR WHICH CAUSE ME TO REACT IMMEDIATELY AND JAM MY BREAK BUT WAS TOO CLOSE AND CAUSE THE ACCIDENT. I HIT HEAD ON THE RIGHT SIDE OF THE VEHICLE B WITH MY VEHICLE. AMBULANCE AND TRAFFIC POLICE WERE CALL IN, I THE DRIVER WAS TAKEN TO CGH AFTER FEELING NAUSE A CAUSE BY THE IMPACT OF AIRBAGS AND HITTING THE STEERING WHEELS AND MY FRONT PASSENGER HAD A FRACTURE THUMB. THE BACK PASSENGER FORTUNATELY JUST ESCAPE WITH JUST A LIP BRUISE.

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	SMA5637X
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	MAHMUD FARIS BIN MOHAMED ISMAIL
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJK8827C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	MUHAMMAD YUSAINI BIN ROSLI
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJK8827C
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.
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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' 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

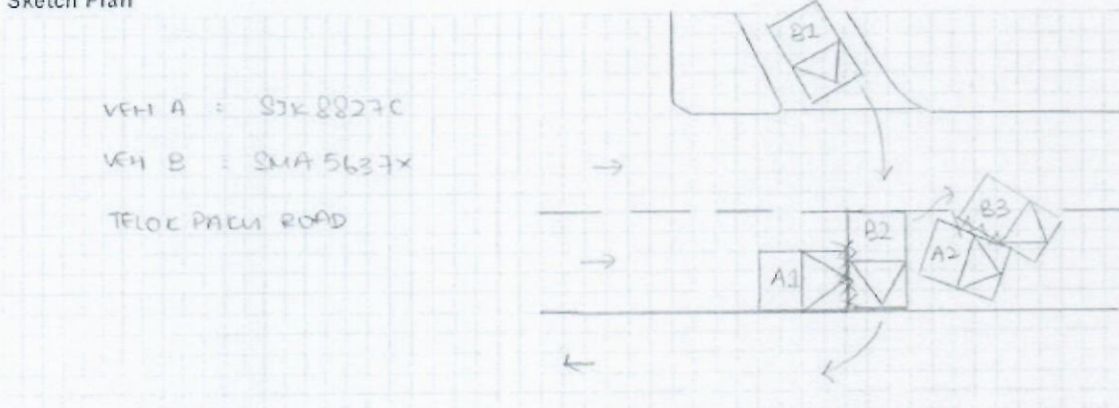
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

REFER TO GIA REPORT

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a Fourteen (14) days clause whereby the claim must be made within the stipulated time-frame from the day of occurrence.

Reporting Only
Claim OD
Claim TP
Claim OD/TP at other workshop

REFER TO GIA REPORT

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a Fourteen (14) days clause whereby the claim must be made within the stipulated time-frame from the day of occurrence.

Reporting Only

Claim OD

Claim TP

Claim OD/TP at other workshop

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel

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

Owner ID Type:	Singapore NRIC
Owner ID:	174B

Vehicle Details

Vehicle No.:	SJK8827C
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Sep 2021
Vehicle Make:	HONDA
Vehicle Model:	STREAM 1.8X A
Primary Colour:	Black
Manufacturing Year:	2008
Engine No.:	R18A1794114
Chassis No.:	RN61084875
Maximum Power Output:	103.0 kW (138 bhp)
Open Market Value:	\$17,446.00
Original Registration Date:	07 Nov 2008
First Registration Date:	07 Nov 2008
Transfer Count:	2
Actual ARF Paid:	\$17,446.00

Intended PARF Rebate Details

PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

Intended COE Rebate Details

COE Expiry Date:	06 Nov 2028
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$32,121.00
COE Rebate Amount:	\$22,823.00
Total Rebate Amount:	\$22,823.00

The information contained herein is correct as at 29 Sep 2021

OK



honda stream

Price Range



Depreciation



> 10 year(s) old



Vehicle Type



Search

Advanced Search

Used Car Comparison

--- Comparing 4 Vehicles ---

Honda Stream 1.8A (COE till 07/2028)


Clear All

Add all to Shortlist

Back to search result

Add to Shortlist

Honda Stream 1.8A RSZ (COE till 07/2028)


Add to Shortlist

Honda Stream 1.8A X (COE till 10/2028)


Add to Shortlist

Honda Stream 1.8A X (COE till 09/2028)


Add to Shortlist

CAR DETAILS

Price	\$47,800	\$46,800	\$52,800	\$50,800
Instalment	N.A.	N.A.	N.A.	N.A.
Registration Date	18-Jul-2008	28-Jul-2008	13-Oct-2008	15-Oct-2008
Manufactured	2008	2007	2008	2008
Mileage	-	-	130,800 km	118,000 km
Transmission	Auto	Auto	Auto	Auto
Engine Cap	1,799 cc	1,799 cc	1,799 cc	1,799 cc
Road Tax	\$1,369 /yr	\$1,369 /yr	\$1,271 /yr	\$1,271 /yr
Power	103.0 kW (138 bhp)	103.0 kW (138 bhp)	103.0 kW (138 bhp)	103.0 kW (138 bhp)
Curb Weight	1,370 kg	1,370 kg	1,350 kg	1,350 kg
Features	Powerful And Responsive 1.8L I-VTEC Engine, Smooth 5 Speed Auto Transmission, ABS Braking System, SRS Airbags, Auto Retractable Side Mirrors.	Fuel-Efficient 1.8L DOHC 16V I-VTEC Engine, 5 Speed Auto Transmission, ABS, SRS Airbags, Digital Climatic Aircon Control. View Specs Of The Honda Stream	-	Reliable 1.8L SOHC Smooth 5 Speed Auto Transmission, ABS, SRS Airbags, Auto Retractable Side Mirrors.
Accessories	Reverse Sensors And Camera, Digital Climatic Aircon, Leather Seats, Sports Rims.	Leather Seats, Sports Rims, Reverse Sensors, Audio Player, Auto Retractable Side Mirrors, Knockdown Rear Seats.	-	Leather Seats, DVC Reverse Camera, R Mirror Indicators, K Seats.
Description	100% Loan Available! Low Interest Rate! Immediate Approval! Bank Loan, In House Loan Welcome, Excellent Condition! Fully Serviced And Maintained. High Approval Rate. Please Contact Us For An Viewing Appointment. Trade In Welcome! Don't Miss It!	Guaranteed Cheapest In Town! 100% Accident Free! Genuine Mileage With Full Service Record. Very Well Taken Care Of. Superb Condition, View To Believe. All Trade-In/Consignment Are Welcome. In-house Loan Available. Don't Miss This Good Deal. Viewing Strictly By Appointment Basis Only Due To Safe-Distancing Measures!	Just Arrived! Well Maintained By Previous Owner! Loan With High Trade In Available. Price Negotiable. Call Now Or Visit Our Showroom Today.	100% Loan Available! Japanese MPV Known For Efficiency, Flexible Arrangement! Trade To Believe, Hurry To Salesman For More Before Is Gone!
COE	\$36,888	\$36,888	\$32,279	\$33,377
OMV	\$19,860	\$20,000	\$16,523	\$17,446
ARF	\$19,860	\$20,000	\$16,523	\$14,859
Depreciation	\$7,030 /yr	\$6,850 /yr	\$7,500 /yr	\$7,250 /yr
No. of Owners	3	6	3	2
Type of Vehicle	MPV	MPV	MPV	MPV