

ASS 1020 811

Steve

7

CS/CTA 21010304/Ety3

ASSIGNMENT

From:

Date:

Estimated Cost:

QD / 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:

(Client's Record)

Make of Velt:

(Policy Condition)

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

Rel. or Market Value:

IDAC Accident Report

Consistent? : Yes or No

GIA / PR Seen

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum

%

3 Vol.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLK 7463R

Yr Regn: 25/4/17

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

Truck / Trailer or

Make:

Toyota

cc 1496

Colour:

Red

AJO: Insured / Std / NI / N

Sp. Reading

53398

T/Radio: Insured / Std / NI / N

Eng/No:

C/No:

NHPL777060333

Gen. Condi:

Good / Fair / Poor / Bupnt

Steering: In order / Jammed / Locked / Burnt or

Brakes: In order / Jammed / Locked / Burnt or

Modl: NII / SRim / STD A/Rim or

Tyre Size:

P: 185 / 6 R15

R:

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

TOYO / YOKO or

RYOANZ

Front

Rear

R/Bal:

4

mm

R/Bal:

4

mm

U/Bal:

4

mm

U/Bal:

4

mm

D.O.A.

30/9/21

O.C.I.

7/12/21

Survey held at

Lim City

Des. of Damages: Fnt / Rear / O/S / NIS / VIC / Roof/Top or

Front LH

The V/O / Chassis / frame / Body Structure affected due to collision

Date / Time Action / Instruction

MV-62K

lump sum 8400, 8days  
red: 7866.84:48%

Time/Time, File, Report

☐

Prell. Report

Time/Time, File, Report

☐

Final Report

Days Of Repair: 8

Resurvey No. of Trips

Survey Fee:

Transportation

Food

Drinks

Other

TOTAL

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Insp (\$

☐

VV&el'nd (\$

Time/Time, File, Report

Time/Time, File, Report

**Lion City Rentals Pte Ltd**  
**CARROS CENTER**  
**60 JALAN LAM HUAT #04-01 S(737869)**  
**Main +65 62524991**

MS China Taiping Insurance (Singapore) Pte Ltd  
 Date: 06/10/2021  
 Attn : MOTOR CLAIMS DEPT

**ESTIMATE**

VEHICLE NO: SLK7463B  
 CHASSIS NO : NHP1707060333  
 MAKE / MODEL : Toyota Sienta HYBRID 1.5X CVT  
 DATE OF ACCIDENT: 30/09/2021  
 YOUR INSURED VEHICLE NUMBER: YN4541J  
 MILEAGE: 53398 km

	<u>PARTS DISCRPTION</u>	<u>QTY</u>	<u>UNIT PRICE</u>	<u>LIST PRICE</u>
1	F/L fender / <i>DD</i>	1PC	\$ 924.00	\$ 924.00
2	F/L fender inner liner / <i>MIS</i>	1PC	\$ 234.00	\$ 234.00
3	Front headlamp (LH) / <i>BR</i>	1PC	\$ 990.00	\$ 990.00
4	Front bumper / <i>BR</i>	1PC	\$ 900.00	\$ 900.00
5	Front bumper LH protector / <i>MIS</i>	1PC	\$ 238.88	\$ 238.88
6	Front bumper LH side bracket / <i>MIS</i>	1PC	\$ 90.00	\$ 90.00
7	Front Bonnet / <i>DD</i>	1PC	\$ 1,288.50	\$ 1,288.50
8	Front bonnet hinge (LH) / <i>GT</i>	1PC	\$ 129.00	\$ 129.00
9	F/L door assy / <i>DD</i>	1PC	\$ 1,610.00	\$ 1,610.00
10	R/L taillamp X	1PC	\$ 550.00	\$ 550.00
11	R/L tailgate reflector X	1PC	\$ 380.00	\$ 380.00
12	Rear end panel X	1PC	\$ 828.00	\$ 828.00
13	Rear bumper cover / <i>DD</i>	1PC	\$ 900.00	\$ 900.00
14	Rear bumper LH side bracket / <i>BR</i>	1PC	\$ 105.00	\$ 105.00
15	Rear bumper LH seal	1PC	\$ 104.40	\$ 104.40
16	R/L sliding door assembly / <i>DD</i>	1PC	\$ 1,800.00	\$ 1,800.00
17	R/L door outer rubber protector / <i>MIS</i>	1PC	\$ 280.00	\$ 280.00
18	Rear sliding door motor LH X	1PC	\$ 3,200.00	\$ 3,200.00
19	R/L fender outer side garnish / <i>MIS</i>	1PC	\$ 480.00	\$ 480.00
20	R/L fender X <i>R</i>	1PC	\$ 924.00	\$ 924.00
21	Front bumper reinforcement / <i>DD</i>	1PC	\$ 380.00	\$ 380.00
22	Front bumper energy absorber / <i>BR</i>	1PC	\$ 120.00	\$ 120.00
			LIST TOTAL S\$:	\$ 16,455.78
			25%DISCOUNT S\$:	\$ 4,113.95
				\$ 12,341.84

**SPECIAL NETT**

1	Front bumper clips / <i>11"</i>	1 SET	\$ 80.00	<i>30</i>
2	Rear bumper clips / <i>11"</i>	1 SET	\$ 80.00	<i>30</i>
3	Front fender inner linear clips X	1 SET	\$ 80.00	
4	Rear reverse sensor X	1 SET	\$ 250.00	
5	R/L wheel cap / <i>MIS</i>	1 SET	\$ 260.00	
			Special Nett Total S\$:	\$ 750.00

### LABOUR CHARGES

1	To labour charge for removing out F/L fender, Front headlamp (LH), Front bumper, F/L and R/L door and Front bonnet out to facilitate repairs and replacement of damaged parts.	\$	1,250.00	1000
2	To respray F/L fender, Front bumper, Front bonnet, Front LH tyre rim, Front LH door and Rear LH door <i>rear bumper</i>	\$	1,600.00	1300
3	To apply rustproofing on all replacement parts	\$	100.00	30
4	To conduct a standard of operating procedures post repairs scan test as a requirements upon completion of collision repairs	\$	300.00	200
5	To deactivate and active high voltage battery as a safety precautions	\$	300.00	120
LABOUR TOTAL S\$:		\$	3,550.00	
TOTAL S\$:		\$	16,266.84	
7% GST		\$	1,138.68	
GRAND TOTAL S\$:		\$	17,405.51	

Steve (LKK)  
7/10/21, 19.30hr

ML PL  
L/S  
My PL Sy  
8 djs

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:



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	621K
Vehicle No.:	SLK7463B
Vehicle to be Exported:	Yes
Intended Deregistration Date:	27 Oct 2021
Vehicle Make:	TOYOTA
Vehicle Model:	SIENTA 1.5X HYBRID AT ABS D/AIRBAG 2WD
Primary Colour:	Red
Manufacturing Year:	2016
Engine No.:	1NZ9201855
Chassis No.:	NHP1707060333
Maximum Power Output:	73.0 kW (97 bhp)
Open Market Value:	\$26,710.00
Original Registration Date:	25 Jan 2017
First Registration Date:	25 Jan 2017
Transfer Count:	2
Actual ARF Paid:	\$5,000.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Jan 2027
PARF Rebate Amount:	\$3,750.00

COE Expiry Date:	24 Jan 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$51,507.00
COE Rebate Amount:	\$26,999.00
Total Rebate Amount:	\$30,749.00

The information contained herein is correct as at 01 Oct 2021

OK

## 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	04/10/2021 09:59 (SGT)
Date of Accident	30/09/2021 21:15 (SGT)
Exact Location of Accident	Stevens Rd, Singapore
Additional Location Information	PIE CHANGI(AFTER STEVENS RS EXIT)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK7463B
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LION CITY RENTALS PTE LTD
Company Reg No	2XXXXX621K
Email Address	lcrarc@lioncityrentals.com.sg
Mobile Phone No	(Phone) +65-62525525
Alternative Phone No	(Office) +65-62525525

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
Variant	HYBRID
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1500

#### INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	21-MM000080-R00
Cover Note Number	-

#### DRIVER

Name of Driver	HAIRI HUDAIBI BIN APISMAIL
NRIC No	XXXX5722

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

Collision - Change/cross lane

Clear

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)

2

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No

#### PASSENGER 1

Name

NA

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

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 SKETCH PLAN

#### 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

YN4541J

Vehicle Manufacturer

-





**SINGAPORE  
POLICE FORCE**



T/20211001/7019

1 of 4

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

Report No. T/20211001/7019

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 01/10/2021 14:49		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: AMAT JUMAIDI BIN ARISMAIL			Address: [REDACTED] 795 SINGAPORE		
ID Type / ID No.: NRIC NO [REDACTED]			Contact No.: Home/Office: [REDACTED]		Mobile: [REDACTED]
Nationality: SINGAPORE CITIZEN			Email: AMAT_BECK@HOTMAIL.COM		
Sex: Male	Age: [REDACTED]	Date of Birth: [REDACTED]	Type of Informant: Driver		
Race: Javanese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 2B,2A,3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 30/09/2021 21:15	Type of Location: Straight Road
Location:  PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 80 Km/h	
Traffic Flow: One Way		Traffic Control: Controlled by Others e.g. Workmen		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLK7463B	Car	TOYOTA	TOYOTA SIENTA	Red	Totally Damaged	1
YN4541J	Lorry			Blue	Slightly Damaged	0



# SINGAPORE POLICE FORCE



T/20211001/7019

2 of 4

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

Report No. T/20211001/7019

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLK7463B	TOKIO MARINE INSURANCE SINGAPORE LTD.	21-MM000080-R00	25/02/2021	24/02/2022

Details of Person Involved				
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA		
No. of Pedestrians Injured: NIL				
<b>Driver</b>				
Name	AMAT JUMAIDI BIN ARISMAIL	ID No.	[REDACTED]	
Related Vehicle	SLK7463B (Car)	Contact No.	[REDACTED]	
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: 2B,2A,3 Date of Expiry: NIL	
Date	30/09/2021	Date	01/10/2021	
No. of Days granted Medical Leave	05	Degree of	Slight	
<b>Passenger</b>				
Name	Unknown Passenger	ID No.	NIL	
Related Vehicle	SLK7463B (Car)	Contact No.	[REDACTED]	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL	
Date	NIL	Date	NIL	
No. of Days granted Medical Leave	NIL	Degree of	NIL	
<b>Driver</b>				
Name	LI WEN	ID No.	[REDACTED]	
Related Vehicle	YN4541J (Lorry)	Contact No.	NIL	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: 26/10/2025	
Date	NIL	Date	NIL	
No. of Days granted Medical Leave	NIL	Degree of	NIL	





**SINGAPORE  
POLICE FORCE**



T/20211001/7019

3 of 4

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

Report No. T/20211001/7019

**CONTINUATION OF REPORT**

Brief Details.

On 30th September 2021 at 2115hrs, I was driving on the first lane at the speed of 70-80km/h at PIE towards Changi after Stevens Road exit. As the cars started to slow down due to traffic ahead, I reduced my speed gradually. Suddenly, a tow truck (YN4541J) which is towing a car (SJR2819D) swerve into my lane abruptly. I had no time to react despite me pressing on the brake pedal fully. I have a video footage that is exceeding 2MB and also the accident's photos.

During the journey, I was sending my passenger, who booked via Grab apps (job details: A-216LN5IWWHBS) to Changi Village. My passenger claimed that he has no injury during the accident. However, I suffered a lower back pain and was traumatized. Grab activated the ambulance and Aetos to the accident scene. I was brought to SGH A&E via ambulance for further checks. I was given 5 days MC and a referral to see the Orthopaedic.



**SINGAPORE  
POLICE FORCE**



T/20211001/7019

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

4 of 4

Report No. T/20211001/7019

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
ABDUL MUHAJMIN BIN HUSSAIN  
Contact No.: 65476090

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

Date/Time:  
01/10/2021 14:49

Classification Of Case:

NP168

## SKETCH PLAN

### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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.
- 6. 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.



Policyholder's Signature / Date & Time

Sketch Plan

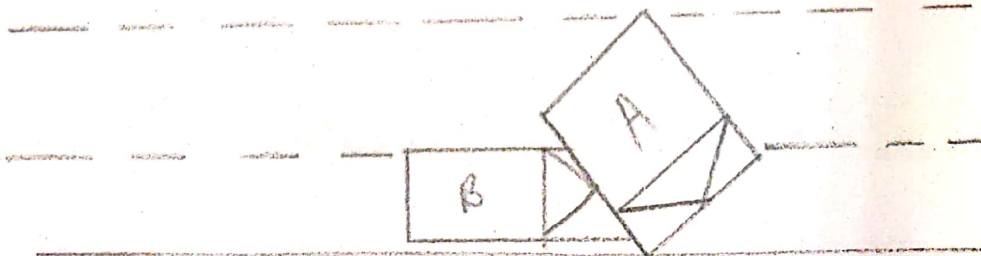
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

PIE CHANGE (AFTER STEVENS RD EXIT)

7-4N45415

B-SLK7463B





Describe Circumstances of the Accident


On 30 September 2021 at around 9:15pm, I was driving on PIE Changi on the first lane. I was gradually slowing down when suddenly another vehicle (YNH5413) swerve into my lane. I ~~had~~ press my brake but to no avail. My car (SLK7463B) did not manage to stop on time although I have kept a safe 2-3 car distance. I was slightly injured at that point of time. I was given 5 days MC for back pain. I had a passenger as I was on a Grab trip. He did not report any injury as of now.

Declaration

I/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