

REF: CS/SMO2101121/Aqf3

ASS. REQ. BY:

ASSIGNMENT

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. **CMTD2103232/MYE**

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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: 7 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: SGX7S86X Yr Regn: 2007, Sept

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

Truck / Trailer or

Make: Honda Stream c.c. 1799

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

Sp. Reading: 177779 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JHMRN68407S200586

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: 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 Tourador

Front _____ Rear _____

R/Bal. 06 mm R/Bal. 06 mm

L/Bal. 06 mm L/Bal. 06 mm

D.O.A. _____ D.O.I. 01/11/21

Survey held at F1 Auto Clinic

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
	<u>TP Sample</u>
	<u>COE Expiry: 04/09/22</u>
02/11/21 @ 3.04pm	Informed Melvin Ye, we are pending for estimate from repairer.
12/11/21 @ 1.50pm	Melvin informed that they will repudiate the claim.
	<u>MV: 8.5K</u>
	<u>PV: 4.3K</u>
	<u>Nett: 4.2K</u>
07/12/21	Submit Preli. Report. (LS \$3800)

Date/Time, File Pass to?

: Preli. Report

: Final Report

1) 07/12 Typist

Date/Time, File Return to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

Add Fee: : Site Insp (\$)

: Interview (\$)

: Tech. Invs (\$)

: Weekend (\$)

____ \$ + PS. ____ SI

Photos

Others

Report Format: _____

Equip. Sum / I.E.I: (\$)

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 29/10/2021 18:04 (SGT)
Date of Accident 28/10/2021 23:07 (SGT)
Exact Location of Accident Sims Ave, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGX7586X

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner AMARJIT SINGH NARWAL S/O BANTA SINGH
NRIC No SXXXX439I
Email Address khushpreetkaur1994@gmail.com
Mobile Phone No (Phone) +65-81862854
Alternative Phone No +65-81862854

VEHICLE PARTICULARS

Manufacturer Honda
Model Stream
Variant -
Exact purpose for which vehicle was being used at time of accident Private use
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1800

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number DMPCSNW00166032100
Cover Note Number -

DRIVER

Name of Driver KHUSHPREET KAUR NARWAL D/O AMARJIT SINGH NARWAL
NRIC No SXXXX441J

Date Of Birth 09/11/1994
 Occupation Indoor
 Date Of Driving Pass 12/09/2020
 Driving experience 1 YEAR AND 1 MONTH
 Gender Female
 Mobile Number (Phone) +65-81139275
 Alt. Phone Number -
 Email Address khushpreetkaur1994@gmail.com
 Address BLK 373 TAMPINES STREET 34
 Address complement #02-38
 Postcode 520373
 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 - Head to Rear
 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 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 NURSEHA BINTE ABDULLAH
 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

PLS REFER TO THE POLICE REPORT:T/20211029/2053

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 SGZ9973M
 Vehicle Manufacturer -

Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 Name of Driver SEOW SWEE ZHI
 NRIC No SXXXX096B
 Contact Number (Phone) +65-87761368
 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 KHUSHPREET KAUR NARWAL D/O AMARJIT SINGH NARWAL
 Gender Female
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained SLIGHT
 Injured person in which vehicle? SGX7586X
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person NURSEHA BINTE ABDULLAH
 Gender Female
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained SLIGHT
 Injured person in which vehicle? SGX7586X
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

WITNESS DETAILS

WITNESS 1

Name CHRIS
 Phone (Phone) +65-86066887
 Email -

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 willful 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 under stand, 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

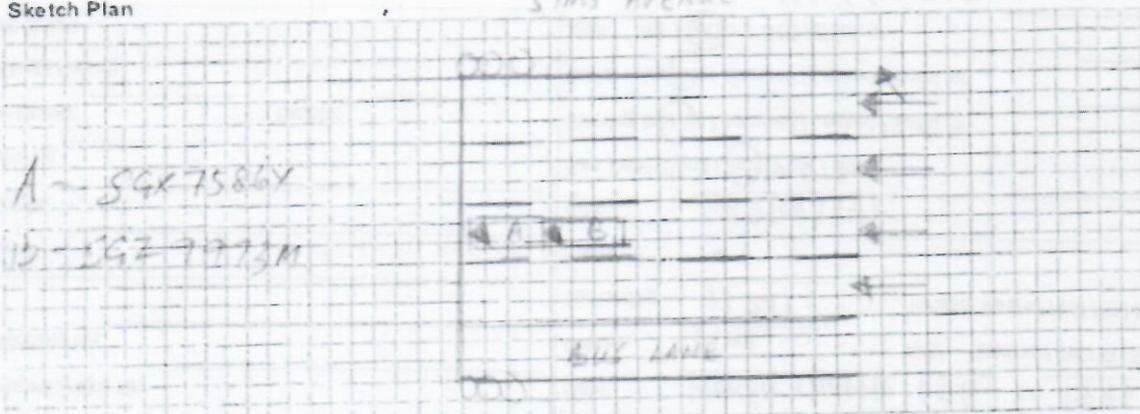
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including, their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

[Signature] 29/10/21
Policyholder's Signature / Date & Time

[Signature] 29 October 2021
Driver's Signature (if driver is not the policyholder) / Date & Time

[Signature] 29/10/21
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Please refer to the police report T/20311029/2023

Declaration

We declare the foregoing particulars are true in every respect.

[Signature] 29/10/21
Policyholder's Signature / Date & Time

[Signature] 29 October 2021
Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature] 29/10/21
Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE
 Police Station Of Origin:
 Traffic Police
 12 Ulu Avenue 3 SINGAPORE 488625
 Tel No: 65470000



Form No: 1001 (REV 03/02)
 Page No: 1001 (REV 03/02)

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/11/2011 15:12
 Date/Time of Accident: 20/11/2011 22:00

Reportant's Particulars

Name of Informant: KUNZHEWEE T KALIN	Address: 471 BLK 373 DAMPING STREET 34 #01-38 SINGAPORE 430373
ID Type / ID No.: NRIC NO: S54K1411	Contact No.: Home/Cell: Mobile: 9715277
Nationality: SINGAPORE CITIZEN	E-Mail:
Sex: Female Age: 25 Date of Birth: 09/11/1984	Type of Informant: Driver Institution / School Name:
Language: English	Driving License Information: Class: SA Date of Expiry:

General Information of the Accident

Type of Accident: Priority	Advised by Police: No	Date/Time of Accident: 20/11/2011 22:00	Type of Location: Straight Road
Location: DOREAVENUE			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear	Anyone Injured by Ambulance: No		

Details of Vehicles Involved

Vehicle No.	Type	Make	Model	Color	Condition	Insured
SGK75W E	Car	HONDA	STREAM	Blue		1
SG2973M	Car	HONDA	CIVIC 1.8 VTEC AUTO	Black		0

Investigation Particulars

Any Pedestrian Involved: No	Date of Incident on Crossing: NA
No. of Pedestrians Injured: NA	

SINGAPORE POLICE FORCE

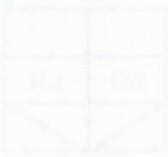
Police Station of Origin
Traffic Police
10 Ulu Avenue 3 SINGAPORE 438665
Tel No: 69470000

Continuation of Report

Name	KHILDIRI ET RAJA	ID No.	5864412
Registered Vehicle	SGZ786X (Car)	Contact No.	8713275
Hospital/Clinic	RAFFLES MEDICAL	Class of Driving License & Expiry Date	Class: SA Date of Expiry: Nil
Date of Discharge	26/10/2021	Date of Discharge	26/10/2021
No. of Days granted Medical Leave	Nil	Expiry of Injury	Nil

Name	DEON DAW J. ZHANG	ID No.	96340560
Registered Vehicle	SGZ943M (Car)	Contact No.	8776306
Hospital/Clinic	Nil	Class of Driving License & Expiry Date	Class: Nil Date of Expiry: Nil
Date of Discharge	Nil	Date of Discharge	Nil
No. of Days granted Medical Leave	Nil	Expiry of Injury	Nil

Brief Details
ON 26/10/2021 AT 2200hrs I was driving along Serangoon Avenue as I was at stationary position at a T-Junction. The traffic light was red and I start to slow down my vehicle till to the point of about 230m got hit by leaving vehicle (SGZ943M) on the rear left side of the my vehicle. I was stunned for few secs and I got off from the vehicle and give a check on the party to see if he requires any ambulance, which after I asked my dad and proceed to called the ambulance and police for assistance on scene. The next day I make way to TP42 to lodge a police report accordingly. That's all.



SINGAPORE POLICE FORCE

Police Station Of Origin
Traffic Police
10 Ulu Areal 3 SINGAPORE 439815
Tel No: 65470900

Page No: 130-132(2011)

CONTINUATION OF REPORT

Switch Plan
Informant is not able to provide switch plan

IMPORTANT: Please attach a copy of your vehicle's insurance Certificate to this report. If you do not have the certificate with you now, please fax a copy to 65470900, quoting the report number as reference.

Signature Of Officer Processing The Report TP / IC ABU HEBARAH BIN ANOM TALIB	Signature Of Informant 
Signature Of Inmate If applicable	Date/Time 24/10/2011 18:10
Officer In Charge Of Case TP / GSI / Sgt 3 INTAN WALLANDARI RUDDY SANTOSO Contact No: 65470415	Classification Of Case 

Authentication Stamp
4714

> [Back to C neMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	439I
Vehicle Details	
Vehicle No.:	SGX7586X
Vehicle to be Exported:	No
Intended Deregistration Date:	01 Nov 2021
Vehicle Make:	HONDA
Vehicle Model:	STREAM SUNROOF 1.8L A
Primary Colour:	Blue
Manufacturing Year:	2007
Engine No.:	R18A11700536
Chassis No.:	JHMRN684075200536
Maximum Power Output:	103.0 kW (138 bhp)
Open Market Value:	\$20,528.00
Original Registration Date:	05 Sep 2007
First Registration Date:	05 Sep 2007
Transfer Count:	3
Actual ARF Paid:	\$22,581.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	04 Sep 2022
COE Category:	B - Car (1601cc & above)
COE Period(Years):	5
PQP Paid:	\$25,178.00
COE Rebate Amount:	\$4,238.00
Total Rebate Amount:	\$4,238.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 01 Nov 2021

OK



10 YEAR ANNIVERSARY SALE



\$5,000 DISCOUNT ON ALL MODELS

[Get offer](#)

Price Range
Depreciation
> 10 year(s) old
Vehicle Type

Used Car Comparison

--- Comparing 4 Vehicles ---

Honda Stream 1.8A RSZ (COE till 05/2022)

Honda Stream 1.8A (COE till 07/2022)

Honda Stream 1.8A (COE till 07/2022)

Honda Stream 1.8A (COE till 09/2022)



Clear All

Add all to Shortlist

Back to search result

Add to Shortlist

Add to Shortlist

Add to Shortlist

Add to Shortlist

CAR DETAILS

	Honda Stream 1.8A RSZ (COE till 05/2022)	Honda Stream 1.8A (COE till 07/2022)	Honda Stream 1.8A (COE till 07/2022)	Honda Stream 1.8A (COE till 09/2022)
Price	\$8,800	\$8,400	\$9,800	\$8,300
Instalment	N.A.	N.A.	N.A.	N.A.
Registration Date	25-May-2007	31-Jul-2007	20-Sep-2007	25-Sep-2007
Manufactured	2007	2007	2007	2007
Mileage	180,000 km	-	133,000 km	-
Transmission	Auto	Auto	Auto	Auto
Engine Cap	1,799 cc	1,799 cc	1,799 cc	1,799 cc
Road Tax	\$1,467 /yr	\$1,467 /yr	\$1,467 /yr	\$1,467 /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	1,350 kg	1,350 kg	1,370 kg
Features	Powerful 1.8L 16V I-VTEC Engine, 5 Speed Auto, Dual Airbags, Multi Function Steering, Climatic Aircon Contfol, Retractable Side Mirrors.	Powerful And Responsive 1.8L I-VTEC Engine, Smooth 5 Speed Auto Transmission, ABS Braking System, SRS Airbags, Auto Retractable Side Mirrors. View Spe	-	Fuel-Efficient And F VTEC Engine Mater Speed Automatic T Retractable Side M Airbags
Accessories	Original Leather Seats, Sport Rim, Reverse Sensor, DVD Player, Paddle Shifters, Rear Disc Brake, Solarfilm.	Digital Climatic Aircon, Leather Seats, Sports Rims.	-	Leather Seats, Retr Audio Player, Rever Knockdown Rear S
Description	Careful Owner, Low Mileage, Low Depreciation, Well Maintained, Easy Financing, Flexible Loan Available, Accident-Free, 6 Months Free Servicing By Reputable Workshop With 40 Years Experience In The Market For A Peace Of Mind, Call For Viewing/Test Drive Now.	100% Loan Available! Zero Repairs Needed, 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.	Excellent Condition. Brand New Paintwork. No Repairs Needed As Wear And Tear Parts Just Changed. Well Maintained. New Steering Wheel. Able To Secure Full Loan If Needed.	Brand New Point W House Interest Rat Monthly Installmen Rates From 2.88% Condition With No Vehicles Undergone Inspection Check T Worthy. High Trade Vehicle!
COE	\$26,246	\$26,237	\$25,178	\$25,178
OMV	\$17,186	\$16,586	\$16,657	\$20,017
ARF	\$18,905	\$18,245	\$18,323	\$22,019
Depreciation	\$15,750 /yr	\$11,310 /yr	\$11,110 /yr	\$9,260 /yr
No. of Owners	4	6	3	5
Type of Vehicle	MPV	MPV	MPV	MPV