ACC DEC DV	- REF:	1011692/8943	Shian Chan
ASS. REC. BY: TOUM		SIGNMENT	
From:Estimated Cost:	Date: 17/11/2021	Type: M.Car / M.Cycle / Bus / Van / Lord	Yr Regn: 15/6/2015 ry /. Taxi / Prime Mover /
OD AP) WS ITP RES I OD RES I To Inspect Vehicle No: SKT at Workshop m/s King 3 of 176, Sin Aking Da Insured: Policy No. Claims No. S1MO3N Sum Insured: (Client's Record)	91/0 402-10	Make: Fond Focus HB  Colour White  Sp.Reading 105396  Eng/No: FK35283  C/No: KIFO5XXGC  Gen. Cond: Good/Foll/Poor/Burnt  Steering: Infrder/Jammed/Leaked/I  Brake: Infrder/Jammed/Leaked/I  Modi: NII/S/Rin/STDA/Rim or	T/Radio: Insured / Std / NI / NA  T/Radio: Insured / Std / NI / NA  CEFK 35283  Burnt or
IDAC Accident report	Consistent?: Yes or No Consistent?: Yes or No 's Res.: Yes or No 3 Val.: Yes or No Vehicle: IN/OU	Tyre Size: F: 205/55  R: 205/55  BS / DUN / EXNOVA / GY / FS / LIZA / TOYO / YOKO or  Fron!  R/Bal. 6 mm  D.O.A. 16 / 1/202    Survey held at Cine 5  Des. of Damages / Fr / Rear / ORS /	Rear R/Bal. 5 mm  U/Bal. 5 mm  D.O.I. 17/11/2021  N/S / U/C / Rooftop or
Survey Resurvey After paid MV 3	7000/2 - 8,000 vised to Chan Kian Ch photos taken on w photos taken on	Juan via Smart Claims. Sed 17/11/2021 @ 2:3 Avon 22/11/2021 @ 10	5:32 PM :34:10 AM :17:20 AM
12/01/22 Submit PR: Dote/Time, File Pass to?  1) 12/01 Typist  Dote/Time, File Return to?  2)	Preli. Report Final Report Add F	Days Of Repair: 7  Resurvey No. of Trip: 2  Fee: Site Insp (\$	Survey Fee: Transportation: )S + RSSI ) Photos ) Offices
Lump Sum/LEA: (5	CLAINS - PRS	: Weel and (\$	TOTAL

#### > Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	952H
Vehicle No.:	SKT5377U
Vehicle to be Exported:	No.
Intended Deregistration Date:	25 Dec 2021
Vehicle Make:	FORD MAN POLICE STATEMENT STATEMENT
Vehicle Model:	FOCUS HB TREND 1.6 TI-VCT A/T 5DR
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	FK35283
Chassis No.:	WF05XXGCC5FK35283
Maximum Power Output:	92.0 kW (123 bhp)
Open Market Value:	\$14,246,00
Original Registration Date:	15 lun 2015
First Registration Date:	15 Jun 2015
Transfer Count:	O souther security and the second section of the
Actual ARF Paid: Intended PARF Rebate Details	\$9,246.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Jun 2025
PARF Rebate Amount: Intended COE Rebate Details	\$6,009.00
COE Expiry Date:	14 Jun 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$55,397.00
COE Rebate Amount:	\$22,913.00
Total Rebate Amount:	\$28,922.00

The information contained herein is correct as at 25 Dec 2021

OK

MV 37,000/2 PV 28,922/2 NV 8,078/2

701 m Mmc 25/12/2021

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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 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.

Vehicle Registration Number

- Any false reporting may be referred to the Police for investigation.
   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.
   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 16/11/2021 12:11 (SGT) Date of Accident ... 16/11/2021 08:57 (SGT) Exact Location of Accident Loyang Ave, Singapore Additional Location Information Towards PIE (near Flora Drive) Country/State of Loss Singapore

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

SKT5377U

INSURED/POLICYHOLDER Is company?
Name Of Registered Owner No Yeo Sze Lin NRIC No Email Address S7515952H silin40@gmail.com Mobile Phone No ..... (Phone) +65-60127553412 Alternative Phone No +65-86518835

## VEHICLE PARTICULARS

Ford Model Focus Variant ..... Exact purpose for which vehicle was being used at time of Private hire Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private hire Transmission 1600 INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMHCSNW00010162100 Cover Note Number

#### DRIVER

Name of Driver Yeo Han Yuen NRIC No S7922252F

Date Of Birth 02/08/1979 Occupation Outdoor Date Of Driving Pass 09/03/2001 Driving experience 20 YEARS AND 8 MONTHS Gender Male Mobile Number (Phone) +65-86518835 Alt. Phone Number Email Address db.ivan@hotmail.sg Address Blk 740 Pasir Ris Street 71 #09-55 Address complement Postcode 510740 Is the driver the policyholder? If No, Relationship of the Driver with the Insured No Sibling Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver No Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Side Swipe 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? No Was any injured conveyed to hospital by ambulance? Was any other vehicle 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? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT Please refer to the sketch plan ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number Vehicle Manufacturer	SHC2229, Hyundai
Vehicle Model Vehicle Variant	-
Vehicle Colour	
NAME OF TAXABLE PARTY O	-
Vehicle Category	Taxi



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)

#### 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.
- 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 archaring 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)

funderstand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurence 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 mo or possessed by my insurer (collectively the "Porsonal 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 poice), 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
- (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.

Sketch Plan  (b) 11 21 (045am Personnel Angie Soh  Layawa AVE Toward PIE	Policyholder's Signature / Date & Time	Driver's S & Time	ignature (If drive		policyhokler) / Date	Witnessed by Personnel	Reporting Centre
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