"HE CC3 AIGZION 985/ca3 Me Me in: Thruan ASSIGNMENT From Veli No: SHD 1052C Yr Rogn: 2111
Type: M.Car I M.Cycle I Bus I Van I Lorry I (ax) Printo Mover Cale. Estimated Cost: OD/TP/WS/TP RES/OD RES/EVA/INY/MV Truck / Traller or To Inspect Vehicle No: hia optima Moko: ul Workshop m/s Colour AC: . Insurad/Std/NI/NA 699404. Sp.Reading T/Radlo: Insured / Std / NI / NA Insured. Eng/No: Policy No hNAGM414MF5658868 C/No: Claims No Gen. Cond: Good / Folr / Poor / Burnt Sum Insured: Steering: Inorder / Jammed / Leaked / Burnt or (Client's Record) Inorder Lammed / Leaked / Burnt or Make of Veh: Modi: NII / SIRIM) / STD A/RIM or . F: 706/60K/6 Tyro Size: 206/60R16 (Policy Condition) Remark: The veh had commenced Its N/S O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / repair at the time of inspection. Westlahe TOYO/YOKO or Bal, or Market Value: Front Roor R/Bal. R/Bal. Consistent?: Yes or No 5 IDAC Accident Room 5 L/Bal. L/Bal. Consistent?: Yes or No mm mm GIA / PR Scen: 1430 15/11/2 D.O.A. D.O.I. Res .: Yos or No Est. Repairs. Primier 3 Val.: Yos or No Survey held at Lum Sum: Des. of Damages : Frt / Rear | O/S / AIS) / U/C / Rooflop or CA / REV / REP. / 24 HRS Vehicle: IN/OUT The U/C / Chassis frame / Body Structure affected due to collision. Person Contacted: Date / Time Action / Instruction

Days Of Ropalr:

Add Foo:

Rosurvoy No. of Trlp:

deni ens:

Tech, thvs @

Warland 12

Survey Fee:

Transportation:

Olive

704 41.

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Proll, Report

: Final Roport

DAZETTHUL Fle PESS WT

Date Time Fle Return 107

CHART FOIDING !

18:40 PHA 11. B.J. 12

## PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511 CO. REG:200707743D GST REG:200707743D

16-Sep-21

# ESTIMATE REPAIR BILL FOR KIA OPTIMA REGN NO:SHD-1052-C

1pc	Front n/s fender LH		\$ 384.00XV 384.00
		Less 10%	\$ 202.00
			\$ 182.00 /
1 pc	Front fender inner shield clips		\$ 48.00 /nec
	Sundry		\$ 50.00 XSVC
	To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair,		
	reshape and adjust of the same		\$ 250.00 180
	To putty and spray painting on front bumper, front n/s fender		\$ 250.00
			\$ 780.00

( ALL THE REPAIR COSTS ARE SUBJECTED TO GST )

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

Thum @ Lhhauto. lom

82235764

23/12/21 1430

Zdays wp /

MILS = labour only

10-20/0

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:

SP0121BG0003 / PREMIER AUTOMOTIVE SERVICES PTE LTD ENTRY DATE & TIME: 16/11/2021 15 38 (SGT) SUBMITTED BY ARINAWATI BINTE AMAT VERSION: 1 (16/11/2021 15.36 (907))

# SINGAPORE ACCIDENT STATEMENT

#### 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

3. Information provided must be as truthful and accurate as possible. Any wiful inscrepresentation 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.

his 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 tee, be made available upon application by interested parties

7 By the todgement 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

16/11/2021 15:36 (SGT) 15/11/2021 19:17 (SGT) Marine Parade Rd, Parkway Parade, Singapore 449269 MSCP @ PARKWAY PARADE Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SHD1052C

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No Email Address

Mobile Phone No Alternative Phone No Yes

PREMIER TAXIS PTE LTD

2XXXXX975H

CLAIMS@PREMIERTAXI.COM

(Phone) +65-91550072 (Office) +65-62148880

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

Kia

Optima

Employment

No - Claiming third party

Taxi Auto

1700

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number

Cover Note Number

Yes 5107202885-02

**ThirdParty** 

DRIVER

Name of Driver NRIC No

RAJESH S/O MUKUND BHAI KRIPASHANKER PANDYA SXXXX336G

NTUC Income Insurance Co-operative Ltd

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

## WITNESS DETAILS

WITNESS 1

Name

MR MARTIN - ANOTHER ROAD USER

Phone

Email

Accident report SP0I21BG0003

### 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 wiful misropresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The leave and acceptance of the Formity 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 GA 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 indgement 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 haurers' 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) evestigating 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.

(callectively 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Polesybolder's Signature

Policyholder's Signature / Date &

Time

x Tay

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

1 6 NOV 2021

Witnessed by Reporting Centre Personnel

Sketch Plan

A: SHA1052C

B : EH 12/8G

WITHESS

PARKWAY PARADE

MSCP.

Describe Circumstances of the Accident

		Mannama, parte di sipajini kaj estaj dela dizaliza kaza dredi nga dipisa din gazdinin djezika karadi Milita Palque	
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claration			
e declare the foregoing particula	rs are true in every respe	ct.	
Te.		2 2	UOU 0000 / /
100	920	16	HOV 2021
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	1	iver is not the policyhokler) / Date	Witnessed by Reporting Centre
icyholder's Signature / Date & re	& Time	Transaction and policytroundry / Card	Personnel

Describe Circumstances of the Accident.

WHEN I RETURNED TO RETRIVE MY TAXI ( SHD 1052 C ) ON 15/11/2021 @ 20:45HRS, I SAW A NOTE ON THE FRONT WINDSCREEN MENTIONED THAT VEHICLE B ( EH 1218 G ) – HAD COLLIDED ONTO MY TAXI.

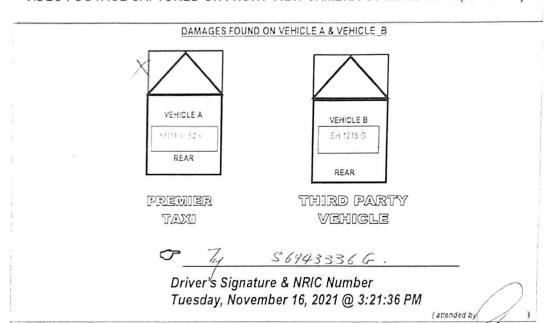
BASED ON THE VIDEO SHARED BY THE WITNESS (MR MARTIN), I VIEWED THE FOLLOWING INCIDENT-

ON 15/11/2021 @19:17HRS, VEHICLE B (EH 1218 G) HAD COLLIDED ONTO THE FRONT LEFT OF MY TAXI WHILE REVERSING TO PARK INTO A VACANT LOT (ON MY LEFT) ON MS CP - PARK WAY PARADE.

DRIVER OF VEHICLE B FAILED TO STOP & DROVE OFF AWAY.

WHEN INSPECTED, I DISCOVERED THAT THE FRONT LEFT OF MY TAXI DAMAGED.

\*VIDEO FOOTAGE CAPTURED ON FRONT VIEW CAMERA OF MR MARTIN (WITNESS)







Date of Expiry.

Police Station Of Origin Marine Parade N.P.C. 300 Marine Parade Road SINGAPORE 449296 Tel No 1800-4428999

Report No. 1 20211117 3049

## REPORT OF A TRAFFIC ACCIDENT

TAXI DRIVER

Date/Time Report Made: Vide Report No. Station Diary No. 17/11/2021 15 05 Informant's Particulars Name of Informant. Address RAJESH S/O MUKUND BHAI APT BLK 16 MARINE TERRACE #10-66 SINGAPORE 440016 KRIPASHANKER PANDYA ID Type / ID No. Contact No. NRIC NO / S6943336G Home/Office. Mobile: 96698384 Nationality: Email SINGAPORE CITIZEN raj69dil@gmail.com Sex: Age: Date of Birth: Type of Informant: Male 51 06/12/1969 Driver Race. Language: Institution / School Name: Indian Occupation:

Driving Licence Information:

Class: 2A,2,3

General Infor	rmation of the Accider	it		
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/11/2021 20:45	Type of Location: Car Park
Location:				The Control of the Co
MARINE PAR	RADE ROAD			
Weather:		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way	aar maadadii daddii Magaanada muuraa da saadii Frinday Arra da maadada da ahaa saanaa ahaa ahaa ahaa ahaa ahaa A	Traffic Control: Not Controlled		Traffic Volume:
Type of Collisi Moving Vehicle	on: e Against - Parked Veh	icle		Anyone conveyed by ambulance; No

Type	Make	Model	Color	Condition	No of Passenge
Car	and a situación cultivaria de la companio del la companio de la companio del la companio de la companio del la companio de la companio de la companio del la companio de la companio del la companio	over special and with the state of the state			0
TAXI		o reference consensation data de la la la grande de del Personales de la Personales de la la la la la la la la	ggggganagagaab 🛊 markana nasar-nasar-nasar-nasar-nasar-n-n-n-n-n-n-n-n-n-n-n-n-n-n-n-n-n-n-n	Slightly	0
		The same of the sa	Car	Car	Car

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Tel No. 1800-4428999



2 61 3

Report Sp. 1.18211117/2649

Police Station Of Origin: Marine Parade N.P.C. 300 Marine Parade Road SINGAPORE 449296

CONTINUATION OF REPORT

Name	RAJESH S/O MURUND BHAI KRIPASHANKER PANDYA			56943336G
Related Vehicle	SHD1052C (TAXI)	C	ontact No.	96608384
Hospital/Clinic	NIL	C		Class 2A.2.3 Date of Expiry: NIL
Date Treatment	NIL	Date Discha	rge NIL	
No of Days gran	ited Medical Leave NIL	Degree of In	Jury   MIL	ng. I sarahni in 17 jinda namahkura a tibanin in da agangahasanahka karushin, nasan indah

Brief Details.

On 15/11/2021 at about 1830hrs to 1900hrs, I had parked my taxi at the second highest level of the multistorey carpark of Parkway Parade Shopping Centre, Subsequently, at about 2045hrs. I returned to the lot and discovered there was a note on the front windscreen of my taxi, mentioning that another party had hit onto my taxi. The witness also informed that he was able to provide a footage of the incident.

Based on the footage, the other party had collided onto the front left portion of my taxi while reversing to parking into the vacant lot, to the left of my taxi. However, the other party failed to stop and drove away.

There are damages to the front left portion of my taxi.

I have lodged a report with my company, and was advised to lodge a police report





Police Station Of Origin Marine Parase N.P.C. 300 Marine Parade Road SINGAPORE 449296

341 Report No. 1/2/211117/2049

Tel No. 1600-4428999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report G / Sgt 2 KHAIRUL HANIS BINTE RUSLI	Signature Of Informant.
Signature Of Interpreter  Not applicable	Date/Time: 17/11/2021 15:05
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No. 65476145	Classification Of Case: SINGAPORE POLICE FORCE
Authentication Stamp NP163	SIGNATURE





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

3 of 3 Report No. 1/20211117/2049

Tel No: 1800-4428999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report G / Sgt 2 KHAIRUL HANIS BINTE RUSLI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 17/11/2021 15:05
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No. 65476145	Classification Of Case:  SINGAPORE POLICE FORCE
Authentication Stamp NP188	SIGNATURE

## > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

Vehic	le Owner	Particu	ars
-------	----------	---------	-----

Owner ID Type: Company
Owner ID: 975H
Vehicle Details

Vehicle No.: SHD1052C
Vehicle to be Exported: No

Intended Deregistration Date: 05 Jan 2022

Vehicle Make: KIA

 Vehicle Model:
 OPTIMA 1.7(A) DIESEL

 Primary Colour:
 Silver

Manufacturing Year: 2015

Engine No.: D4FDFH314451

Chassis No.: KNAGM414MF5658868
Maximum Power Output: 100.0 kW (134 bhp)

Open Market Value:\$22,282.00Original Registration Date:21 Jan 2016First Registration Date:21 Jan 2016

Transfer Count: 0
Actual ARF Paid: \$23,195.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 20 Jan 2024
PARF Rebate Amount: \$16,236.00

Intended COE Rebate Details
COE Expiry Date: 20 Jan 2024

COE Category: A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years): 8

 PQP Paid:
 \$45,307.00

 COE Rebate Amount:
 \$11,555.00

 Total Rebate Amount:
 \$27,791.00

Message

Please note that the 8-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 05 Jan 2022

ОК