

(08/11/13) wef
ASS. REC. BY:

REF:

CS3/ASM21012193/Riv3

6490

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV

Veh No: SMR 4588X Yr Regn: 2020 / Jan
Type: M Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or

Make: Honda Fit 1.3 GFI CVT c.c. 1317
Colour: Red A/C: Insured / Std / NI / NA
Sp. Reading: 032585 T/Radio: Insured / Std / NI / NA
Eng/No: _____

To Inspect Vehicle No: SMR 4588X
at Workshop m/s LIM MOTOR
of 160, SIN MINH DR HUS - 20 ANTOCITY
Insured: ASM

Policy No. _____

Claims No. _____

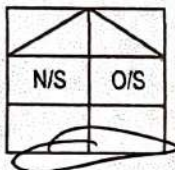
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: 74K

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

C/No: GK31345274

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: 15/70R14
R: _____

BS / DUN EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front	Rear
R/Bal. <u>6</u> mm	R/Bal. <u>6</u> mm
L/Bal. <u>6</u> mm	L/Bal. <u>6</u> mm
D.O.A. <u>20/11/21</u>	D.O.I. <u>01/12/21</u>

Survey held at LIM MOTOR

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

REPAIR LIMIT - 42K

ESTIMATE RANGE OF REPAIR - (4K - 5K) / 5 days

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: _____

☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

) \$ + RS. \$ _____

) Photos

) Others

Report Format : _____

Lump Sum / I.B.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	22/11/2021 15:01 (SGT)
Date of Accident	20/11/2021 11:20 (SGT)
Exact Location of Accident	KPE, Singapore
Additional Location Information	slip road into KPE tunnel from PIE to Tuas
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMR4588X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Sound & Vision Pte Ltd
Company Reg No	197400649D
Email Address	janice.koh@soundnvision.com.sg
Mobile Phone No	(Phone) +65-97922555
Alternative Phone No	(Home) +65-97922555

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fit
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1300

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5115204133-01
Cover Note Number	-

DRIVER

Name of Driver	Janice Koh Yen Gek
NRIC No	S7632370D

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

04/10/1976
Outdoor
31/10/2000
21 YEARS AND 1 MONTH
Female
(Phone) +65-97922555
-
janice.koh@soundnvision.com.sg
9 Little Road #07-02
-
536985
No
Employee
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Chain Collision
Weather Conditions Raining
Road Surface Wet

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? Yes
Was any injured conveyed to hospital by ambulance? No
Was any other vehicle or property damaged? Yes
Number of Passengers (Including Driver) 1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

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

refer attached police report.

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 SHA1820T
Vehicle Manufacturer Hyundai
Vehicle Model
Vehicle Variant
Vehicle Colour
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)

(Phone) +65-93890473

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category
 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)

SNB9411L
 Honda
 Fit
 -
 -
 Private car
 Lee Nicholas Wayne
 (Phone) +65-94526136
 -
 -
 -
 -
 -
 -
 -

INJURED PERSONS DETAILS

INJURED 1

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


Janice Koh Yen Gek
 Female
 (Phone) +65-97922555
 -
 -
 -
 -
 -
 SMR4588X
 -
 No


Describe Circumstances of the Accident

Please refer to police report T/2021/21/4023

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

 22/11/21
 1:55pm

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

 22/11/21
 11:55pm

Witnessed by Reporting Centre Personnel

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 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' 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

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A = 5MR 4588X

B = 5HA 1820T

C = 5NB 9411L



**SINGAPORE
POLICE FORCE**



T/20211121/7023

4 of 4

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

Report No. T/20211121/7023

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 / TP1B /
MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

TP 158

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

Date/Time:
21/11/2021 22:55

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20211121/7023

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

Report No: T/20211121/7023

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/11/2021 22:55	Video Report No.	Station Diary No.
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Informant's Particulars

Name of Informant: JANICE KOH YEN GEK		Address: 108 TAMPINES STREET 11 #03-301 SINGAPORE 521108	
ID Type / ID No.: NRIC NO / S7632370D		Contact No. Home/Office: Mobile: 97922555	
Nationality: SINGAPORE CITIZEN		Email: JANICEKOHYG@GMAIL.COM	
Sex: Female	Age: 45	Date of Birth: 04/10/1976	Type of Informant: Driver
Race: Chinese		Language: English	
Occupation: Business development manager		Institution / School Name	
		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 20/11/2021 11:20	Type of Location: Slip road into KPE tunnel
Location: PAN ISLAND EXPRESSWAY				
Weather: Drizzling	Road Surface: Wet	Road Speed Limit: 50 Km/h		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Heavy		
Type of Collision: Rear Ended				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of
SHA1820T	Car	HYUNDAI		Blue	Slightly Damaged	0
SMR4588X	Car	HONDA	Fit	Red	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/2021/121/7023

Police Station of Origin:
Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 4
Report No. T/2021/121/7023

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of
SNB9411L	Car	HONDA	FIT	White	Slightly Damaged	0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MAN	ID No.	NIL
Related Vehicle	SHA1820T (Car)	Contact No.	93890473
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
Driver			
Name	JANICE KOH YEN GEK	ID No.	S7632370D
Related Vehicle	SMR458BX (Car)	Contact No.	97922555
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	20/11/2021	Date	20/11/2021
No. of Days granted Medical Leave	05	Degree of	Slight
Driver			
Name	NICHOLAS	ID No.	NIL
Related Vehicle	SNB9411L (Car)	Contact No.	94526136
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



**SINGAPORE
POLICE FORCE**



T/20211217/023

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

3 of 4

Report No. T/20211217/023

CONTINUATION OF REPORT

Brief Details

As I was entering the slip road into the KPE tunnel from PIE towards Tuas, there was tail back. I stopped as a result of the cars in front of me not moving. Shortly after a Taxi SHA 1820T rear ended me. On impact, I was wearing my seatbelt. When I came out of the my car Honda Fit SMR 4588X, I observed that there was SNB9411L another Honda FIT that had rear ended the taxi SHA 1820T. Weather condition was drizzling and floor was wet at time of accident. I wanted to exchange particulars with the Taxi SHA 1820T, but he only furnish me his name and mobile number. The Honda Fit SNB9411L driver furnished me his particulars. After the accident, I felt pain in my back and went to Chang Hospital A&E department to be examined. I took X-Rays and was given 5 days hospitalization leave.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	649D
Vehicle No.:	SMR4588X
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Dec 2021
Vehicle Make:	HONDA
Vehicle Model:	FIT 1.3GF CVT
Primary Colour:	Red
Manufacturing Year:	2019
Engine No.:	L13B1453847
Chassis No.:	GK31345274
Maximum Power Output:	73.0 kW (97 bhp)
Open Market Value:	\$15,895.00
Original Registration Date:	07 Jan 2020
First Registration Date:	07 Jan 2020
Transfer Count:	0
Actual ARF Paid:	\$5,895.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	06 Jan 2030
PARF Rebate Amount:	\$4,421.00
COE Expiry Date:	06 Jan 2030
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$33,009.00
COE Rebate Amount:	\$26,717.00
Total Rebate Amount:	\$31,138.00

The information contained herein is correct as at 02 Dec 2021

OK

Honda Fit 1.3A GF

[Overview](#)[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

Served SVTA Committee Member Since 2011
Council of Automobile Megamart MCST 2556
Committee Member Exoticarsclub

Price	\$75,600		
Depreciation	\$8,810 /yr View models with similar depre	Reg Date	06-Mar-2020 (8yrs 3mths 3days COE left)
Mileage	22,000 km (12.6k /yr)	Manufactured	2019
Road Tax	\$578 /yr	Transmission	Auto
Dereg Value	\$31,255 as of today (change)	OMV	\$15,659
COE	\$32,699	ARF	\$5,659
Engine Cap	1,317 cc	Power	73.0 kW (97 bhp)
Curb Weight	1,030 kg	No. of Owners	1