

ASS. REC. BY: TGLim

REF: CS3/ARB21007017/Bgf3

shiau Chan

ASSIGNMENT

From: \_\_\_\_\_ Date: 29/6/2021

Veh No: GBG 4166T Yr Regn: 8/8/2017  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Estimated Cost: \_\_\_\_\_

Truck / Trailer or \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: GBG 4166T

Make: Joyita Proace C.C. 1560

at Workshop m/s Sin Heng Long Motor Work

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

of 5032 AMK AV.3 In2 PK2 #01-305

Sp. Reading: 44782 T/Radio: Insured / Std / NI / NA

Insured: \_\_\_\_\_

Eng/No: AH014011084

Policy No. \_\_\_\_\_

C/No: YARVEAHKHG3069481

Claims No. MFL2021D0002694

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Steering: In order / Jammed / Leaked / Burnt or \_\_\_\_\_

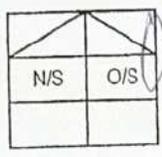
(Client's Record)

Brake: In order / Jammed / Leaked / Burnt or \_\_\_\_\_

Make of Veh: \_\_\_\_\_

Modi: Nil / S/Rim / STD A/Rim or \_\_\_\_\_

(Policy Condition)



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

Tyre Size: F: 215/65/16 GY  
R: 215/65/16 BS

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

TOYO / YOKO or \_\_\_\_\_

Bal. or Market Value: 47,000/-

Front Rear

IDAC Accident Rpt: \_\_\_\_\_ Consistent?: Yes or No

R/Bal. 5 mm R/Bal. 5 mm

\*GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No

L/Bal. 5 mm L/Bal. 5 mm

Est. Repairs: 5 - 4 days Res.: Yes or No

D.O.A. 22/6/2021 D.O.I. 29/6/2021

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

Survey held at Sin Heng Long

CA / REV / REP. / 24 HRS WP

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Range 2,000/- - 3,000/-
	Survey photos taken on Tues 29/6/2021 @ 12:40:28 PM
	Resurvey photos taken on Wed 30/6/2021 @ 12:07:52 PM
	After paint photos taken on Mon 5/7/2021 @ 11:28:40 AM
22/07/21	Submit PRS. 10/01/22 Submit LS \$3900, 5 days. (Red \$2300, 37%)
	inv 47,000/-
	PV 18,838/-
	NV 28,162/-

Date/Time, File Pass to?  : Prel. Report  
 : Final Report

Days Of Repair: 5

1) 10/01 Typist

Resurvey No. of Trip: \_\_\_\_\_

Date/Time, File Return to? \_\_\_\_\_  
2) \_\_\_\_\_

Add Fee:  Site Insp (\$ \_\_\_\_\_)  
 Interview (\$ \_\_\_\_\_)  
 Tech. Invs (\$ \_\_\_\_\_)  
 Weekend (\$ \_\_\_\_\_)

Survey Fee:	
Transportation:	
\$ + RS \$	
Photos	
Others	
TOTAL	

Report Format: TP  
Lump Sum / 10/01/22 (\$ 3900)

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	647W
Vehicle Details	
Vehicle No.:	GBG4166T
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Jul 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PROACE COMFORT MEDIUM 2.0M
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	AH014011084
Chassis No.:	YARVFAHKHGZ069481
Maximum Power Output:	-
Open Market Value:	\$31,108.00
Original Registration Date:	08 Aug 2017
First Registration Date:	08 Aug 2017
Transfer Count:	1
Actual ARF Paid:	\$1,556.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	07 Aug 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$31,064.00
COE Rebate Amount:	\$18,838.00
<b>Total Rebate Amount:</b>	<b>\$18,838.00</b>

The information contained herein is correct as at 14 Jul 2021

OK

MV 47,000/2  
 PV 18,838/2  
 NV 28,162/2

Return  
 14/7/2021

Post an Advertisement  
Sell it yourself! Advertise it at just  
**\$68 until it's SOLD!**

Audi A5 2011!



Only 1 Owner Since Day 1!  
Multiple Owner Due To Internal Transfer.  
Direct Owner StarAd

Think One Automobile  
NEW & USED COMMERCIAL VEHICLES

Post an Ad Advertiser Login Ways of Selling

Browse by Category

Sort by Reg. Date 20 results/page

1 vehicles

Toyota ProAce

Advanced Search

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Toyota ProAce	Any	Any	2017	Any	Any	Any	Available
	Toyota ProAce 1.6M Comfort	\$50,800	\$8,150 /yr	06-Oct-2017	1,560 cc	57,000 km	Van	Available
<b>Fuel Type:</b> Diesel <b>** FREE WARRANTY AND FREE SERVICING **, 1 Owner, Full Loan Available, Bank Or In House Loan Are Available At Competitive Interest Rate, Very Well Maintained, Accident-Free, STA Or Vicom Evaluation Are Welcome, Trade-In Are Welcome, Warranty Not By Thi...</b> Carway Posted: 12-Jul-2021 Tags: 2017 Toyota ProAce, Toyota ProAce, Toyota, ProAce								

Save this search criteria, to get email alerts whenever a match is found.

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
For old advertisements, view Expired ads								
								20 results/page

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SS 1F216N0001 / SNG AH TEE MOTOR & PANEL SERVICE PTE LTD  
ENTRY DATE & TIME: 23/06/2021 14:24 (SGT)  
SUBMITTED BY: JANICE CHANG  
VERSION: 1 (23/06/2021 14:24 (SGT))

## 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	23/06/2021 14:24 (SGT)
Date of Accident	22/06/2021 13:15 (SGT)
Exact Location of Accident	Keppel Bay View, Singapore
Additional Location Information	REFLECTIONS CONDO BASEMENT CARPARK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG4166T
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	MEGAZZ ELECTRONICS
Company Reg No	5XXXX647W
Email Address	swkvincent@icloud.com
Mobile Phone No	(Phone) +65-84883659
Alternative Phone No	+65-84883659

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Proace
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	Manual
CC	1997

### INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MQ002423
Cover Note Number	-

### DRIVER

Name of Driver	SOH WEE KIAN VINCENT
NRIC No	SXXXX134H

Date Of Birth 27/08/1984  
Occupation Outdoor  
Date Of Driving Pass 31/07/2004  
Driving experience 16 YEARS AND 11 MONTHS  
Gender Male  
Mobile Number  
Alt. Phone Number  
Email Address (Phone) +65-84883659

Address swkvincent@icloud.com  
Address complement BLK 443C FAJAR ROAD #14-68  
Postcode 673443  
Is the driver the policyholder? No  
If No, Relationship of the Driver with the Insured Employee  
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 - Major/Minor Rd  
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 material 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? No  
Was notice of intended Prosecution given? No  
If yes, against whom? -

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

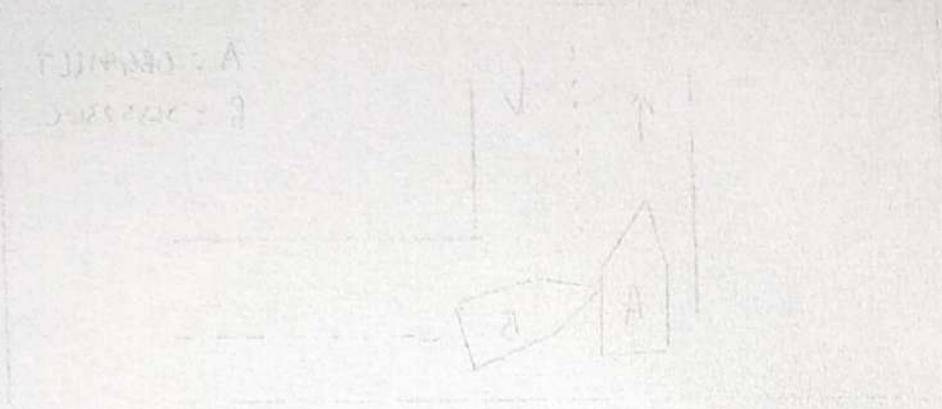
Are accident photos available for attachment? Yes  
Was there any video captured by Car Camera? Yes  
Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLS5230C  
Vehicle Manufacturer -  
Vehicle Model -  
Vehicle Variant -  
Vehicle Colour -  
Vehicle Category Private car  
Name of Driver RICHARD CHOW  
Contact Number (Phone) +65-97585067  
Address -  
Address complement -

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

SRNAP-NDTEYE



1. The accident happened on the road in front of the house. The car was moving from left to right. The driver was not wearing a seat belt. The car hit the house and the driver was injured. The car was damaged and the house was also damaged. The driver was taken to the hospital and the car was towed away. The house was repaired and the driver was discharged from the hospital. The car was repaired and the driver was able to drive again. The house was repaired and the driver was able to live in the house again. The car was repaired and the driver was able to drive again. The house was repaired and the driver was able to live in the house again.

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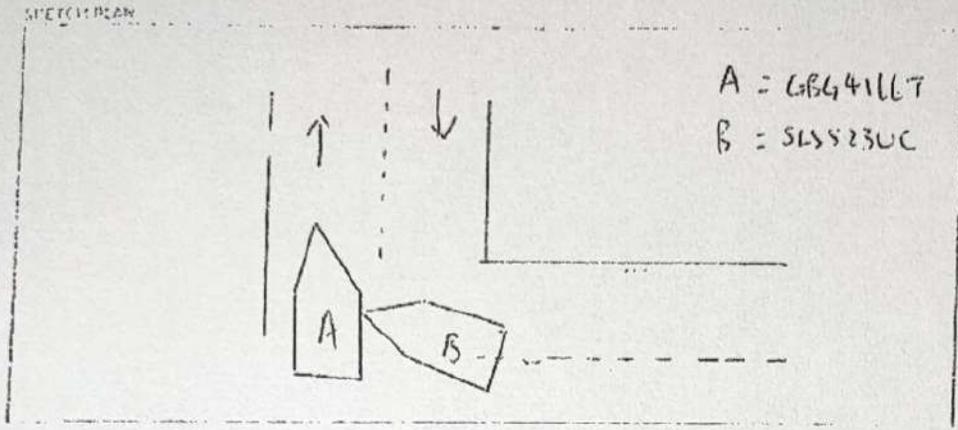
SKETCH PLAN

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 Authorized 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 remediate policy liability.
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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 (his 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.
  - (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
  - (e) the information so collected under (d) above may be shared / disclosed:
    - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
    - (ii) for complying with requirements under any regulations, laws or court orders.

I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

Policyholder's Signature Date & Time:	 Driver's Signature (if driver is not the policyholder) Date & Time:	 Reporting Centre Personnel's Signature Name: NRIC/IN No.:
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DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The accident happened on 22nd Jun 2021 at around 13:15 hr at basement carpark in the Reflections. I was driving vehicle A, GB641LLT towards the carpark exit when the accident happened.

I was going straight and was approaching upslope to first floor when I experienced an impact on the right side. Vehicle B, SL5523UC, was driving ~~above~~ from the right side and was attempting to turn right towards exit when he hit into my right side door.

There was no damage injury.

Claim OD/FP at Su Brothers   
  Claim OD/FP at other workshop   
  Reporting Only

Remarks: Please forward a copy of my official accident report to:  
 My workshop: Sin Hong Long Motor work  
 Email address: SHLmotorwork@gmail.com  
 Myself:  
 Email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

DECLARATION

We declare the foregoing details are true in every respect.



Date: 22/06/2021  
 Signature: [Signature]

[Signature]

Date: 22/06/2021  
 Signature: [Signature]

[Signature]

Date: 22/06/2021  
 Signature: [Signature]