

08/11/13) wef

ASS. REC. BY:

REF:

CS/CT121012484/Riv3

6402

ASSIGNMENT

CORRECTION: 2030/July

From:

Date:

Veh No:

SJX 7060K

Yr Regn:

2010 / July

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No:

Make:

MITSUBISHI LANCER 1.5 MIVEA c.c 1499

at Workshop m/s

Colour

BLUE

A/C: Insured / Std / NI / NA

of

Sp. Reading

262320

T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No:

JMY8RCY2AAW000738

Claims No.

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh:

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

(Policy Condition)

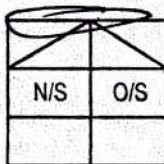
Tyre Size:

F:

205/60R16

R:

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



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

TOYO / YOKO or

WESTLAK

Bal. or Market Value:

78K

Front

Rear

IDAC Accident Rpt:

Consistent?: Yes or No

R/Bal.

6

mm

R/Bal.

6

mm

GIA / PR Seen:

Consistent?: Yes or No

L/Bal.

6

mm

L/Bal.

6

mm

Est. Repairs:

days

Res.: Yes or No

D.O.A.

12/01/21

D.O.I.

09/12/21

Lum Sum:

%

3 Val.: Yes or No

Survey held at

VIN's room

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

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

Date / Time

Action / Instruction

REPAIR LIMIT - 49K

Date/Time, File Pass to?

☐

: Prell. Report

Days Of Repair:

1)

☐

: Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

Report Format :

Lump Sum / I.B.I.: (\$

Vin's

Vin's Motor Pte Ltd
160 Sin Ming Drive
#03-03 Sin Ming Autocity
Singapore 575722
Tel : 6453 2121 Fax : 6459 9795
GST Registration No. 199906067G

Estimated Cost of Repair

Attention To : China Taiping Insurance
(Singapore) Pte Ltd
3 Anson Road
#15-00 Springleaf Tower
Singapore 079909

Claim Details

Case Ref. No. : TP/122021/5112
Date : 09-12-2021
Accident Date : 12-07-2021

Vehicle Details

Make & Model : Mitsubishi LANCER 1.5 MIVEC
SPORTS AT ABS D
Chassis No : JMYSRCY2AAU000738
Registration No : SJX7060K

Third Party Vehicle Details

Registration No : SLC8380S

S/N	Description	Qty	Amount (S\$)
1	FRONT RH HEADLAMP <i>BCA</i>	1.00	\$671.00
2	FRONT LH HEADLAMP <i>BCA</i>	1.00	\$671.00
3	FRONT RH HEADLAMP LOWER BRACKET <i>X</i>	1.00	\$9.00
4	FRONT LH HEADLAMP LOWER BRACKET <i>X</i>	1.00	\$9.00
5	FRONT GRILLE <i>cut</i>	1.00	\$251.00
6	FRONT GRILLE EMBLEM <i>new</i>	1.00	\$51.00
7	FRONT BUMPER <i>de</i>	1.00	\$810.00
8	FRONT BUMPER CENTRE LOWER GRILLE <i>cut</i>	1.00	\$73.00
9	FRONT BUMPER RH SIDE RETAINER <i>X</i>	1.00	\$13.00
10	FRONT BUMPER LH SIDE RETAINER <i>X</i>	1.00	\$13.00
11	FRONT BUMPER CLIPS @ \$3.00 <i>new</i>	10.00	\$30.00

Discount: -10%

\$2,601.00
(\$260.10)

- 12 FRONT NO. PLATE *cut*
- 13 TO REPAIR DAMAGES
- 14 TO SPRAY PAINTING

\$2,340.90
35 \$40.00
1.00 \$380.00
1.00 \$380.00
1.00 \$380.00
300
300

Subtotal w/o GST:

\$3,140.90

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: Issued by Raymond Teo

email: rasul@lkkauto.com

Rasul
Hp 90010068
3 days
4S
09/12/21 @ 1700
Resurvey after repair

This is a computer-generated document. No signature is required.

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	14/07/2021 04:41 (SGT)
Date of Accident	12/07/2021 16:40 (SGT)
Exact Location of Accident	5038 Ang Mo Kio Ind Park 2, Singapore 569541
Additional Location Information	Along Ang Mo Kio industrial park 2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX7060K
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHING POH CHONG BEN
NRIC No	SXXXX640J
Email Address	benching111222@gmail.com
Mobile Phone No	(Phone) +65-86669907
Alternative Phone No	+65-86669907

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Lancer
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	1499

INSURANCE COMPANY

Name of Insurance Company	Aviva Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	10992395
Cover Note Number	-

DRIVER

Name of Driver	CHING POH CHONG BEN
NRIC No	SXXXX640J

Date Of Birth	13/08/1962
Occupation	Indoor
Date Of Driving Pass	11/10/1979
Driving experience	41 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86669907
Alt. Phone Number	+65-86669907
Email Address	benching111222@gmail.com
Address	108 ALJUNIED CRESCENT
Address complement	#10-44
Postcode	380108
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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?	No
Was any injured conveyed to hospital by ambulance?	-
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

My vehicle was stationary parked at Ang Mo Kio industrial park 2 and I was inside my vehicle suddenly third party vehicle which was parked in front of me reversed and collided onto my vehicle front. No injuries involved.

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	SLC8380S
Vehicle Manufacturer	Mercedes
Vehicle Model	C180
Vehicle Variant	-
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	SOON SUI PING
NRIC No	SXXXX851B
Contact Number	-

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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 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 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 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

Policyholder's Signature
Date & Time:

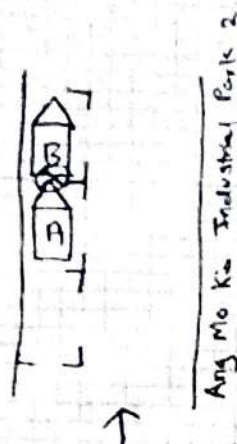
13 July 2021

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

**VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER**
MOHAMED SAIFULLAH S/O SYED MASOOD
Reporting Centre Personnel's Signature
Name
NRIC/IN No.:

ACCIDENT DIAGRAM

Ver 1/03/2011



Vehicle A: SJX7060K -
Vehicle B: SLC8380S.

Policyholder's Signature
Date & Time:

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

VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SAIFULLAH S/O SYED MASOOD

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was stationary parked at Ang Mo Kio industrial park 2 and I was inside my vehicle suddenly third party vehicle which was parked in front of me reversed and collided onto my vehicle front. No injuries involved.

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature

Date & Time:

13 July 2021

Driver's Signature

(If driver is not the policyholder)

Date & Time:

VERIFY BY AJAX MARS (ARC)

REPORTING OFFICER

MOHAMED SAIFULLAH S/O SYED MASOOD

Reporting Centre Personnel's Signature

Name

NRIC/FIN No:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 640J

Vehicle Details

Vehicle No.: SJX7060K

Vehicle to be Exported: No

Intended Deregistration Date: 11 Dec 2021

Vehicle Make: MITSUBISHI

Vehicle Model: LANCER 1.5 MIVEC SPORTS AT ABS D/AB

Primary Colour: Blue

Manufacturing Year: 2009

Engine No.: 4A910127939

Chassis No.: JMYSRCY2AAU000738

Maximum Power Output: 80.0 kW (107 bhp)

Open Market Value: \$17,833.00

Original Registration Date: 02 Jul 2010

First Registration Date: 02 Jul 2010

Transfer Count: 4

Actual ARF Paid: \$17,833.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 01 Jul 2030

COE Category: A - Car (1600cc & below)

COE Period(Years): 10

PQP Paid: \$32,875.00

COE Rebate Amount: \$28,126.00

Total Rebate Amount: \$28,126.00

The information contained herein is correct as at 09 Dec 2021

OK

Mitsubishi Lancer EX 1.5A Sports (COE till 01/2030)

Overview

[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)**Price****\$74,000****Depreciation** ⓘ

\$9,110 /yr

Reg Date

25-Jan-2010

(8yrs 1mth 11days COE left)

Mileage

165,000 km (13.9k /yr)

Manufactured ⓘ

2009

Road Tax ⓘ

\$821 /yr

Transmission

Auto

Dereg Value ⓘ

\$26,285 as of today (change)

OMV ⓘ

\$18,393

COE ⓘ

\$32,368

ARF ⓘ

\$18,393

Engine Cap

1,499 cc

Power

80.0 kW (107 bhp)

Curb Weight ⓘ

1,313 kg

No. of Owners ⓘ

2

Type of Vehicle

Mid-Sized Sedan