# ASSIGNMENT

From: Date:	Veh No: GBH 1818 K. Yr Regn: 2017, Dec.
Estimated Cost:	Type: M.Car / M.Cycle / Bus Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or Truck A 19-100
To Inspect Vehicle No:	Make: NIDSW NV205 c.c 1597
at Workshop m/s	Colour Black - A/C: Insured / Std / NI / NA
of	Sp.Reading 904-86 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: VM20115948 *
Claims No.	Gen. Conde Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inerder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
2 9000	Tyre Size: F: 175/70R(Y
(Policy Condition)	R: 175/70R14.
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.	TOYO/YOKO or Tourados.
Bal. or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 0 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. L/Bal. mm
Est. Repairs: days Res.: Yes or No	D.O.I. 11/61/22
Lum Sum: % 3 Val.: Yes or No	'Survey held at MG Solution'.
CA / REV / REP. / 24 HRS  Vehicle: IN / OUT	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	
MV : A61C	
PV: 22.7K	
Nett: 23.3K	
and the second	
Dale/Time, File Pass to? : Preli. Report	Days Of Repair:
; Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
	1 1 10
2) Add Fee	Site Insp (\$ ) _3+RSSI
2) Add Fee	: Site Insp (\$ ) _3 + RS _ SI : Interview (\$ ) Photos
Pepert Formst:	

SN09221A000D / National Assessment Centre Services [408933] ENTRY DATE & TIME: 10/01/2022 16:20 (SGT) SUBMITTED BY: Renee VERSION: 1 (10/01/2022 16:20 (SGT))



## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report <u>correctly</u> 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 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.

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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

10/01/2022 16:20 (SGT) 08/01/2022 12:35 (SGT) Ang Mo Kio Street 42, Singapore BESIDE DEYI SECONDARY SCHOOL Singapore

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

Vehicle Registration Number

**GBH1818K** 

INSURED/POLICYHOLDER

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

Mobile Phone No Alternative Phone No Yes

STAR FAST 53326306M

Kuahedmund@hotmail.com (Phone) +65-91822221

+65-91822221

VEHICLE PARTICULARS

Manufacturer

Model

Variant accident

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission

CC

Nissan

Nv200

Employment

No - Claiming third party Commercial vehicle

Auto

1597

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy

Policy Number Cover Note Number China Taiping Insurance (Singapore) Pte. Ltd.

Comprehensive

DMCVSNW00150042101

DRIVER

Name of Driver NRIC No

KUAH WEE KIAN (KE WEIJIAN)

S7915679E

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

25/05/1979 Outdoor

30/09/1999

22 YEARS AND 4 MONTHS

Male

(Phone) +65-91822221

\_

Kuahedmund@hotmail.com BLK 665C PUNGGOL DRIVE

#03-528 823665

No

**SOLE - PROPRIETOR** 

No

-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface Side Swipe Clear Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Number of Passengers (Including Driver)

Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance?

No 2

Yes

No

Yes

1

No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? Police Station Name

Police Station Phone No Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

Yes

Traffic Police

(Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

No

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT: T/20220110/7019

#### ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

Yes Yes No

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number Vehicle Manufacturer

Vehicle Model Vehicle Variant Vehicle Colour

Vehicle Category

SGZ7000J

-

-

Private car

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)	_

## INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person	KUAH WEE KIAN (KE WEIJIAN)
Gender	Male
Phone No	-
Address	
Address Complement	
Post Code	
Approximate Age Years Old	
Injuries Sustained	BACK & NECK PAIN (SLIGHT)
Injured person in which vehicle?	GBH1818K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

#### SKETCH PLAN

#### IMPORTANT NOTICE

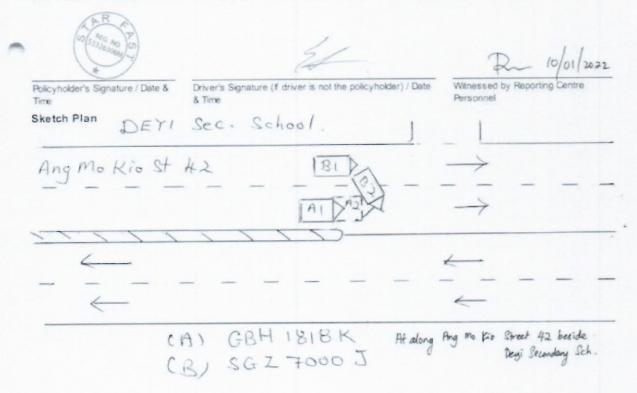
- 1. Rease report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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.
- 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)

l 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' law yers/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' 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.



, N
Mary 12019
41
( ) ( ) ( )
A/2 W/2 1/30
9/5
/
ur insurer may have 14 days time frame for you to submit an Own Damage Claim under you

#### Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel





1 of 3 Report No. T/20220110/7019

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

### REPORT OF A TRAFFIC ACCIDENT Date/Time Report Made

Station Diary No.: Vide Report No.: 10/01/2022 12:47 Informant's Particulars Address: Name of Informant: 665C PUNGGOL DRIVE #03-528 SINGAPORE 823665 KUAH WEE KIAN Contact No.: ID Type / ID No.: Home/Office: Mobile: 91822221 NRIC NO / S7915679E Nationality: KUAHEDMUND@HOTMAIL.COM SINGAPORE CITIZEN Type of Informant: Date of Birth: Sex: Age: 42 25/05/1979 Driver Male Institution / School Name: Language: Race: English Chinese Driving Licence Information: Occupation: Class: Date of Expiry: Transport operations manager

General Infor	nation of the Acciden	I .		
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/01/2022 12:35	Type of Location: Straight Road
Location:				

ANG MO KIO STREET 42

Weather: Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction		Anyone conveyed by ambulance: No

	ehicle Invo	STREET, SQUARE, SQUARE	Model	Color	Conditio	No of
Vehicle No.	Type	Make	INIOUGI	COIO	CONTONIO	1100
GBH1818K	Van					0
SGZ7000J	Car					0

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





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

2 of 3 Report No. T/20220110/7019

CONTINUATION OF REPORT

Driver					
Name	KUAH WEE KIAN			ID No.	S7915679E
Related Vehicle	GBH1818K (Van)			Contact N	o. 91822221
Hospital/Clinic	ANSAR CLINIC			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	09/01/2022		Date	NII	
No. of Days gran	ted Medical Leave	03	Degree o	f Sli	ght

#### Brief Details.

ON 08/01/2022 AT ABOUT 1235HRS AT ALONG ANG MO KIO STREET 42 BESIDE DEYI SECONDARY SCHOOL. I WAS TRAVELLING ON THE EXTREME RIGHT LANE AND SUDDENLY A VEHICLE (B) ON THE LEFT LANE VEERED ACROSS HIS RIGHT AND INTO MY LANE TO MAKE A U-TURN WITHOUT PROPER LOOKOUT AND HENCE COLLIDED ONTO MY LEFT FRONT PORTION OF MY VEHICLE (A) CAUSING DAMAGES TO MY VEHICLE. I HAVE 3 DAYS MC FOR MY INJURY.

VEHICLE A: GBH1818K VEHICLE B: SGZ7000J



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



3 of 3 Report No. T/20220110/7019

CONTINUATION OF REPORT

Signature Of Informant:

1990			
CL	nin	h D	inn
Sk	CIL		lc11

Informant is not able to provide sketch

Not applicable

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

Signature Of Interpreter:

Not applicable

Date/Time:
10/01/2022 12:47

Signature Of Officer Recording The Report:

Officer In Charge Of Case:
TP / TPIB /
BOON YEN KIAN
Contact No.: 65476172

NP168

### > Back to OneMotoring

## **Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars			
Owner ID Type:	Business		
Owner ID:	306M		
Vehicle Details			
Vehicle No.:	GBH1818K		
Vehicle to be Exported:	No		
Intended Deregistration Date:	11 Jan 2022		
Vehicle Make:	NISSAN		
Vehicle Model:	NV200 DX-2 1.6 AUTO		
Primary Colour:	Black		
Manufacturing Year:	2017		
Engine No.:	HR16102058D		
Chassis No.:	VM20115948		
Maximum Power Output:			
Open Market Value:	\$17,836.00		
Original Registration Date:	23 Dec 2017		
First Registration Date:	23 Dec 2017		
Transfer Count:	0		
Actual ARF Paid:	\$892.00		
Intended PARF Rebate Details			
PARF Eligibility:	No		
PARF Eligibility Expiry Date:	100		
PARF Rebate Amount:	\$0.00		
Intended COE Rebate Details			
COE Expiry Date:	22 Dec 2027		
COE Category:	C - Goods Vehicle & Bus		
COE Period(Years):	10		
PQP Paid:	\$38,184.00		
COE Rebate Amount:	\$22,705.00		
Total Rebate Amount:	\$22,705.00		
The information contained herein is correct as at 11 Jan 2022			

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Available

✓ 20 results/page

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\$42,800

\$7,520 /vr

23-Aug-2017

1,461 cc

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PREMIUM AD

Fuel Type: Diesel

The Cheapest And Best Deal In Town Waiting For You! Act Now! 1 Owner With Genuine Low Mileage! Everything Start Original Like Brand New Unit, Accident Free, Flexible Loan/Fast Approval/Trade In Welcome! Contact Our Friendly Sales Personnel Directly To Enquire!

Car (S) Pte Ltd

Posted: 10-Jan-2022 Tags: 2017 Nissan NV200, Nissan NV200, Nissan, NV200

\$45,800

\$8,010 /vr

29-Sep-2017

45,700 km 1,461 cc

Available



Nissan NV200 1.5M

Fuel Type: Diesel Well Maintained By 1 Owner Only! No Further Repair Needed! Warranty Are Given Drive Out With Confidence! View It To Believe It Condition! Trade In Are Welcome! Flexible Loan With Fast Approval! Call / WhatsApp Our Sales Personnel Contact Below For Further Vie.

Posted: 07-Jan-2022 Tags: 2017 Nissan NV200, Nissan NV200, Nissan, NV200

28-Dec-2017

1,461 cc

Available

Nissan NV200 1.5M

\$47,800

\$8,020 /yr

Van

Fuel Type: Diesel

Mid Size Van For Delivery Usage, Excellent Condition, New Paintwork, 100% Loan Can Be Arrange. View To Offer! Call Now.

ABWIN (1994) Pte Ltd

Posted: 04-Jan-2022 Tags: 2017 Nissan NV200, Nissan NV200, Nissan, NV200

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