ASS. REC. BY: REF: CS/MSG22000652/DVJ 3

ASSIGNMENT

COE Feb 2028

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured: GBE 7908K

Policy No. 1001345463

Claims No. 268461

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

N/S | O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

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

Lum Sum: TP % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: STC 838P Yr Regn: Feb 2020

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

Truck / Trailer or

Make: Toyota Prius c.c 1798

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

Sp.Reading 201189 T/Radio: Insured / Std / NI / NA

Eng/No: 2ZR2G75410

C/No: JTDKB3FU203091172

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/65 R15

R: — 11 —

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

TOYO / YOKO or Westlake

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	5 mm	L/Bal.	5 mm
D.O.A.	17/01/2022	D.O.I.	19/01/2022

Survey held at Bifrost sin Mine

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

Rear O/S

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

Date / Time	Action / Instruction
	MSLG GBE 7908K
26/7/22	Final fig $8375.52 (red 13,046.40, 60%)

Date/Time, File Pass to?

1) ☐ : Preli. Report

☐ : Final Report

Date/Time, File Return to?

2) 26/7/22-typist

Days Of Repair: 5

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format : Merimen

Lump Sum / I.E. : $8375.52

Survey Fee:

Transportation: $ + RS. SI

Photos

Others

TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	839G
Vehicle Details	
Vehicle No.:	SHC838P
Vehicle to be Exported:	Yes
Intended Deregistration Date:	31 Jan 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Primary Colour:	Yellow
Manufacturing Year:	2020
Engine No.:	2ZR2G75410
Chassis No.:	JTDKB3FU203091172
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	$26,807.00
Original Registration Date:	19 Feb 2020
First Registration Date:	19 Feb 2020
Transfer Count:	0
Actual ARF Paid:	$14,530.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Feb 2028
PARF Rebate Amount:	$10,897.00
Intended COE Rebate Details	
COE Expiry Date:	18 Feb 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	$26,431.00
COE Rebate Amount:	$19,994.00
Total Rebate Amount:	**$30,891.00**

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 18 Jan 2022

OK

SJ04221I000T / JP Knights Pte Ltd
ENTRY DATE & TIME: 18/01/2022 17:43 (SGT)
SUBMITTED BY: Kavi
VERSION: 1 (18/01/2022 17:43 (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 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	18/01/2022 17:43 (SGT)
Date of Accident	17/01/2022 15:15 (SGT)
Exact Location of Accident	Canberra St, Singapore 752106
Additional Location Information	SEMBAWANG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC838P

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CITYCAB PTE LTD
Company Reg No	1XXXXX839G
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-90583593
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	VFX/P2419140
Cover Note Number	-

DRIVER

Name of Driver	SOH WEE KEE, MICHAEL
NRIC No	SXXXX102B

Date Of Birth	18/07/1969
Occupation	Outdoor
Date Of Driving Pass	09/04/1987
Driving experience	34 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90583593
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	226 LORONG 8 TOA PAYOH #13-110
Address complement	-
Postcode	310226
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RELIEF DRIVER
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Male

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

ON 17/1/22 AT ABOUT 1515HRS, I WAS IN MY VEHICLE A, SHC838P IN THE YELLOW BOX AT A T-JUNCTION OF CANBERRA STREET AND SEMBAWANG ROAD WAITING FOR PEDESTRIAN TO CROSS THE ROAD. SUDDENLY VEHICLE B, GBE7908K REAR ENDED MY VEHICLE. I SUFFERED NECK AND BACK PAIN AFTER THE IMPACT. 1 POB. 1 INJURY. CONTACTS WERE EXCHANGED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE IS NOT SUITABLE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBE7908K
Vehicle Manufacturer	Mitsubishi

Vehicle Model	Canter
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-91042276
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	SOH WEE KEE, MICHAEL
Gender	Male
Phone No	(Phone) +65-90583593
Address	226 LORONG 8 TOA PAYOH #13-110
Address Complement	-
Post Code	310226
Approximate Age Years Old	-
Injuries Sustained	NECK AND BACK PAIN
Injured person in which vehicle?	SHC838P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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 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.

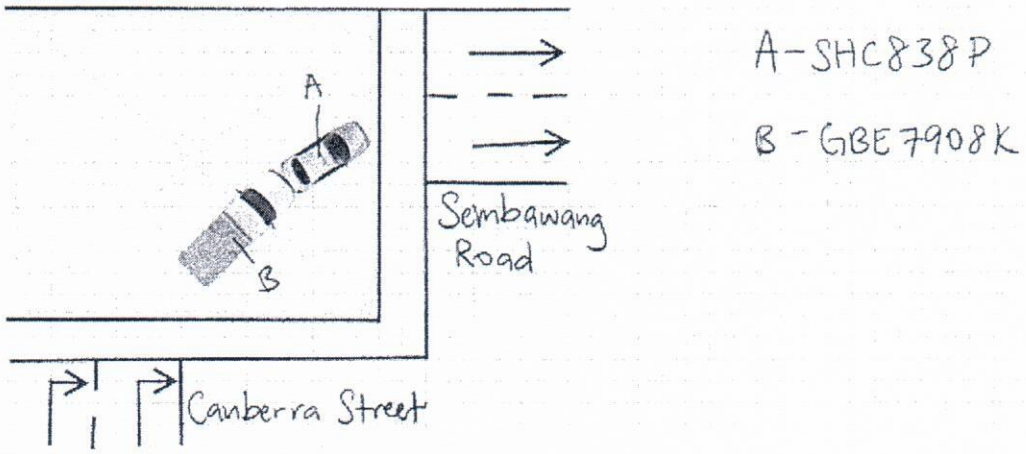
(collectively the "**Purposes**")

(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
	18/1/22 1220h	Amar

Sketch Plan



SKETCH PLAN #2

Describe Circumstances of the Accident

ON 17/1/22 AT ABOUT 1515HRS, I WAS IN MY VEHICLE A, SHC838P IN THE YELLOW BOX AT A T-JUNCTION OF CANBERRA STREET AND SEMBAWANG ROAD WAITING FOR PEDESTRIAN TO CROSS THE ROAD. SUDDENLY VEHICLE B, GBE7908K REAR ENDED MY VEHICLE. I SUFFERED NECK AND BACK PAIN AFTER THE IMPACT. 1 POB. 1 INJURY. CONTACTS WERE EXCHANGED.

Declaration

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

Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
		Amar

BIFROST AUTO PTE LTD

REPAIR ESTIMATE

DATE: 18-Jan-22

INSURANCE: MSIG.

MODEL: TOYOTA PRIUS

VEHICLE NO.: SHC 838P

DESCRIPTION	QTY	LIST PRICE	AMOUNT	
REAR TRUNK LID COVER Dent	1	$ 1,577.24	$1,577.24	✓
REAR TRUNK LID LOCK SR	1	$ 641.06	$641.06	✗
REAR TRUNK LID COVER TRIM BOARD ~~Crack~~ HH	1	$ 303.10	$303.10	✗
REAR TRUNK LID RUBBER HH / damaged	1	$ 511.28	~~$511.28~~	✓ 365.20
REAR TRUNK LID LAMP G5 ~~color distorted~~ crack	1	$ 891.52	~~$891.52~~	✓ 636.60
BOARD ASSY, BACK DOOR TRIM HH	1	$ 356.16	$356.16	✗
GARNISH SUB-ASSY, BACK DOOR, OUTSIDE crack	1	$ 1,845.58	~~$1,845.58~~	✓ 913.60
REAR TRUNK LID LOGO (PRIUS) HH	1	$ 85.12	$85.12	✓
REAR TRUNK LID LOGO (HYBRID) HH	1	$ 73.36	$73.36	✓
REAR TRUNK LID LOGO (TOYOTA STAR) HH	1	$ 74.06	$74.06	✓
REAR BUMPER Dent / ~~scratch~~ ~~crack~~	1	$ 642.04	$642.04	✓
REAR BUMPER RE-INFORCEMENT RH / Dent	1	$ 446.32	$446.32	✓
REAR BUMPER UNDER COVER Dent	1	$ 773.64	~~$773.64~~	✓ 552.60
REAR BUMPER SIDE RETAINER SR	2	$ 157.78	$315.56	✗
REAR BUMPER UNDER SIDE CENTRE COVER ~~minor distorted~~ HH	2	$ 773.64	$1,547.28	✗
REAR BUMPER TOWING COVER distorted	1	$ 115.78	~~$115.78~~	✓ 82.70
REAR BUMPER CLIPS HH	1	$ 30.80	$30.80	✓
REAR BUMPER SIDE CLIP HH	2	$ 35.00	$70.00	✗
REAR BUMPER UPPER STOPPER HH	1	$ 106.96	$106.96	✗
ARM SUB-ASSY, REAR BUMPER, RH HH	1	$ 195.44	$195.44	✗
REAR BUMPER UNDER SIDE COVER (RH) minor crack / broken	1	$ 324.80	~~$324.80~~	✓ 232.00
RETAINER, REAR BUMPER, SIDE, RH HH	1	$ 132.72	$132.72	✗
RETAINER, REAR BUMPER, UPPER SIDE (LH/RH) HH	1	$ 42.98	$42.98	✗
REAR BUMPER LOWER COVER GARNISH G5 HH	1	$ 963.63	$963.63	✗
TAIL LAMP ASSY (UPPER) G5 Crack	1	$ 942.90	~~$942.90~~	✓ 577.90
TAIL LAMP ASSY (LOWER) G5 Cut	1	$ 860.58	~~$860.58~~	✓ 554.00
TAIL LAMP QUARTER PANEL Rpr	1	$ 302.40	$302.40	✗
TAIL LAMP SIDE COVER minor crack	1	$ 358.40	~~$358.40~~	✓ 256.00
LAMP ASSY, SIDE TURN SIGNAL, RH HH	1	$ 91.42	$91.42	✗
REAR END PANEL Dent	1	$ 842.94	~~$842.94~~	✓ 612.00
REAR END PANEL GARNISH minor crack	1	$ 226.52	$226.52	✓
REAR FIBER TOOL BOX TRIM HH	1	$ 557.20	$557.20	✗
REAR EXHAUST PIPE RH HH	1	$ 1,628.76	$1,628.76	✗
REAR EXHAUST PIPE HANGER HH	1	$ 56.98	$56.98	✗
REAR FENDER, RH HH	1	$ 1,171.38	$1,171.38	✗
REAR FENDER SHIELD (LH/RH) HH	1	$ 187.88	$187.88	✗
REAR FENDER AIR DUCT HH	1	$ 231.14	$231.14	✗
				7930.06
SUB TOTAL			**$19,524.93**	
LESS ~~20%~~ 25%			**$3,904.99**	5953.54
DISCOUNTED TOTAL			**$15,619.94**	
REAR TRUNK LOWER W/S MOULDING HH SN	1	$180.00	$180.00	✓

REAR LOWER W/S SEALANT Hec	SN	1	$46.00	$46.00
REAR WINDSCREEN MOULDING HH	SN	1	$160.00	$160.00
REAR WINDSCREEN SEALANT Hec	SN	1	$46.00	$46.00
REAR NO. PLATE WITH TRIM COVER HH	SN	1	$ 140.00	$140.00
REAR TRUNK LID APPS STICKER Hec	SN	1	$ 56.00	$56.00
REAR TRUNK LID COMFORT & TEL NO. STICKER Hec	SN	1	$ 84.00	$84.00
REAR BUMPER REVERSE SENSOR Dam	SN	1	$ 189.98	$189.98
SUB TOTAL				**$901.98**
Labour Charge				
Panel Beating		1	$ 1,800.00	~~$1,800.00~~
Spray Painting Charge		1	$ 1,600.00	~~$1,600.00~~
Wiring Charge		1	$ 100.00	~~$100.00~~
Tuff Kote		1	$ 100.00	~~$100.00~~
Towing Charge		1	$ 80.00	$80.00
Remove/Refix Cushion & Upholstery Rear		1	$ 150.00	~~$150.00~~
Remove/Refix Rear Windscreen Glass		2	$ 120.00	~~$240.00~~
Remove/Refix Reverse Sensor		1	$ 120.00	~~$120.00~~
Remove/Refix Fuel Tank		1	$ 80.00	$80.00
Remove/Refix Exhaust Pipe		1	$ 80.00	$80.00
Diagnostic & Resetting To Erase Fault Code		1	$ 550.00	~~$550.00~~
TOTAL LABOUR				**$4,900.00**
ESTIMATE TOTAL				**$21,421.92**

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

601-98

700|-
700|-
30|-
40|-
HH
80|- 1820.-
80|-
40|-
HH
HH
150|-

19|01|2022 @ 1500hrs
HH Auto
P|P&A
5 days.
Tyre
LKK Auto

P|P 8,375.52

Photo after repair with damaged parts.

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: