(08/11/13) wef

ASS. REC. BY:

REF: CS/LPC22-001133/Rvf3

C
0220

COE XP/RN : 2025/BUS

# ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: GBD 9660R

at Workshop m/s WAH HONG

of 38, TOH GUAN RD EAST #01-57

Insured: LPC

Policy No.

Claims No. 21/22/22/VC05/025425

Sum Insured: Excess: 500 500

(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: 29K

IDAC Accident Rport: 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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: GBD 9660R Yr Regn: 2015 / BUS

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

Truck / Trailer or

Make: NISSAN NV200 1.5L MT c.c 1461

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

Sp.Reading 235004 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: VSKYBAM20201012870

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: 175/70R14

R:

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

TOYO / YOKO or CONDOR

| Front | | Rear | |
|---|---|---|---|
| R/Bal. | 6 mm | R/Bal. | 6 mm |
| L/Bal. | 6 mm | L/Bal. | 6 mm |

D.O.A. 28/01/22 D.O.I. 08/02/22

Survey held at WAH HONG

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 - 20K

18/2/22 LS $1700 confirmed by email (red 959, 36%)

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 18/2/22-typist

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp ($ ): S + RS SI

☐ : Interview ($ ). Photos

☐ : Tech. Invs ($ ) Others

☐ : Weekend ($ )

Report Format : OD

Lump Sum / ~~I.B.I~~: ($ 1700 )

Wah Hong Motors & Credit Pte Ltd
Enterprise Hub 38 Toh Guan Road East #01-57 S(608581)
Email: motor@wahhong.sg
(199806235M)

**ıicle No.** **GBD9660R NISSAN NV200**



| QTY | DESCRIPTION | CONDITION | REPAIRER'S ESTIMATE(S$) | SURVEYOR'S ADJUSTMENT |
|---|---|---|---|---|
| | **PARTS (LIST ITEMS)** | | | |
| 1 | Headlamp RH cm ✓ | | 275.00 | |
| 1 | Center grille assy cm ✓ | | 280.00 | |
| 1 | Center grille logo badge m ✓ | | 65.00 | |
| 1 | Front bumper cut ✓ | | 380.00 | |
| 2 | Headlamp lower panel garnish LH/RH @2*$195 LH-cut / RH- ?. | | 390.00 | |
| | | Part Items Total: | 1390.00 | |
| | | | 10% 139.00 | |
| | | | 1529.00 | |
| | **SPECIAL NETT ITEMS** | | | |
| 1 | Front bumper clips m ✓ | | ~~35.00~~ 30 | |
| 1 | Center grille clips m ✓ | | ~~30.00~~ 20 | |
| 1 | Front carplate with holder M ✓ | | 35.00 ✓ | |
| | | SN Items Total: | 100.00 | |
| | | Total Parts | 1629.00 | |

Wah Hong Motors & Credit Pte Ltd
Enterprise Hub 38 Toh Guan Road East #01-57 S(608581)
Email: motor@wahhong.sg
(199806235M)



**Vehicle No.** **GBD9660R NISSAN NV200**

| S/N | DESCRIPTION | REPAIRER'S ESTIMATE (S$) | SURVEYOR'S ADJUSTMENT |
|---|---|---|---|
| | **LABOUR** | | |
| 1 | To remove the affected parts & fittings to commence repairs; panel beat & reshape the affected areas and replace the damaged parts and components | 600.00 | 300 |
| 2 | To supply paint materials, expandable items & putty, respray paint on parts replaced & repaired | 400.00 | 200 |
| 3 | To remove and repair/refit wiring system at accident damaged area and check for all electrical proper function | 30.00 | |
| | Labour Total : | 1030.00 | |
| | TOTAL (PARTS & LABOUR): | 2659.00 | |

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:

R45ul
Hp 9W100068
2days
4/5
08/02/22 @1445
EXCESS: 500
Revert
Resurvey after repair

**Your NCD will be affected due to late reporting**

# 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 | 04/02/2022 16:25 (SGT) |
| Date of Accident | 28/01/2022 23:25 (SGT) |
| Exact Location of Accident | Near 222 Loyang Ave, Singapore 509068 |
| Additional Location Information | LOYANG AVENUE T-TRAFFIC JUNCTION |
| Country/State of Loss | Singapore |

## DETAILS OF OWN VEHICLE

| | |
|---|---|
| Vehicle Registration Number | GBD9660R |

### INSURED/POLICYHOLDER

| | |
|---|---|
| Is company? | Yes |
| Name Of Registered Owner | I2R CONSULTING & ENGINEERING SERVICES PTE LTD |
| Company Reg No | 2XXXXX022D |
| Email Address | ADMIN@I2RCONSULT.COM.SG |
| Mobile Phone No | (Phone) +65-98770522 |
| Alternative Phone No | +65-98770522 |

### VEHICLE PARTICULARS

| | |
|---|---|
| Manufacturer | Nissan |
| Model | Nv200 |
| 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? | Yes |
| Vehicle Category | Commercial vehicle |
| Transmission | Auto |
| CC | 1597 |

### INSURANCE COMPANY

| | |
|---|---|
| Name of Insurance Company | Lonpac Insurance Bhd |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | Z21VC05007962 |
| Cover Note Number | - |

### DRIVER

| | |
|---|---|
| Name of Driver | RAJENDRAN RAJA |
| Passport No/FIN | GXXXX206T |

| | |
|---|---|
| Date Of Birth | 03/06/1995 |
| Occupation | Outdoor |
| Date Of Driving Pass | 05/07/2019 |
| Driving experience | 2 YEARS AND 6 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-86541097 |
| Alt. Phone Number | - |
| Email Address | ADMIN@I2RCONSULT.COM.SG |
| Address | 28 TOH GUAN ROAD EAST |
| Address complement | #06-01 |
| Postcode | S608596 |
| 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 - 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

PLEASE REFER TO THE SKETCH PLAN FOR ACCIDENT DETAIL

## 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 | SLP1470T |
| Vehicle Manufacturer | Mazda |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | Black |
| Vehicle Category | Private car |
| Name of Driver | SEAN WAN LONG |
| Contact Number | (Phone) +65-90104053 |
| Address | - |
| Address complement | - |

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

# 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 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

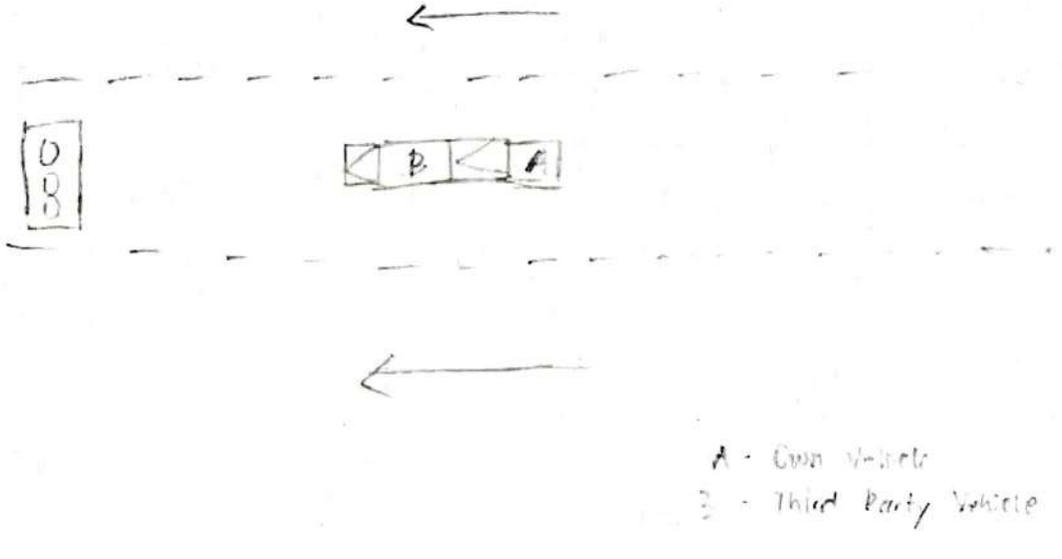
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**



SKETCH PLAN #2

**Describe Circumstances of the Accident**

ON 28/01/2022 23:25 hours, I'm driving the vehicle GBD9662A along Lavang Avenue towards changi Village. The traffic light changed to yellow and the vehicle suddenly stop (SLD1470I) stop his car and I also try to stop my car but it's too late so I hit the car in front of me.

**Declaration**

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

R P

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

Witnessed by Reporting Centre Personnel

Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

## Vehicle Owner Particulars

| | |
|---|---|
| Owner ID Type: | Company |
| Owner ID: | 022D |

## Vehicle Details

| | |
|---|---|
| Vehicle No.: | GBD9660R |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 05 Feb 2022 |
| Vehicle Make: | NISSAN |
| Vehicle Model: | NV200 1.5L MT ABS AIRBAG 2WD 6DR EURO 5 |
| Primary Colour: | White |
| Manufacturing Year: | 2015 |
| Engine No.: | K9KC400D054609 |
| Chassis No.: | VSKYBAM20Z0101287 |
| Maximum Power Output: | - |
| Open Market Value: | $20,122.00 |
| Original Registration Date: | 04 Aug 2015 |
| First Registration Date: | 04 Aug 2015 |
| Transfer Count: | 1 |
| Actual ARF Paid: | $1,007.00 |

## Intended PARF Rebate Details

| | |
|---|---|
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | $0.00 |

## Intended COE Rebate Details

| | |
|---|---|
| COE Expiry Date: | 03 Aug 2025 |
| COE Category: | C - Goods Vehicle & Bus |
| COE Period(Years): | 10 |
| PQP Paid: | $23,166.00 |
| COE Rebate Amount: | $8,095.00 |
| **Total Rebate Amount:** | **$8,095.00** |

The information contained herein is correct as at 05 Feb 2022

OK