SS. REC. BY: MCVCLS	REF: CC6/A/G 2200 1214/U@3	
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ASS	IGNMENT
From: Date: Estimated Cost: OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Veh No. GBJ 257/D Yr Regn: O, / O3// 9 Type: M.Car / M.Cycle / Bus / Oar / Lorry / Taxl / Prime Mover / Truck / Trailer or (M)
To Inspect Vehicle No: at Workshop m/s of Insured: Policy No. Claims No. Sum Insured: (Client's Record) Make of Veh:	Make: 1046 to 11 ace c.c. 2922 Colour S. hu. A/C: Insured/Std/NI/NA Sp Reading 7667 / T/Radio: Insured/Std/NI/NA Eng/No: C/No: JTFHT02PX0024774 Gen. Cond. Good/Fair/Poor/Burnt Sleering: Morder/Jammed/Leaked/Burnt or Brake: Inouder/Jammed/Leaked/Burnt or Modi/NJI/S/Rim / STDA/Rim or
(Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: DAC Accident Rport: 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 / Time Action / Instruction Date / Time Action / Instruction A / 4 4 16 4 16	Tyre Size: F: / P & R'. BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or OH 7 SY Front Rear R/Bal. mm R/Bal. mm L/Bal. mm UBal. mm D.O.A. P / M D.O.I. 9 / M 22 Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or Ree The U/C / Chassis frame / Body Structure affected due to collision.
	Days Of Repair: Resurvey No. of Trip: Transportation: Site Insp (\$)S+RSSI Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$:Weekend (\$

ST0J22280001 / TAN LIM MOTOR PTE LTD ENTRY DATE & TIME: 08/02/2022 14:32 (SGT) SUBMITTED BY: William Lam VERSION: 1 (08/02/2022 14:32 (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 08/02/2022 14:32 (SGT)

Date of Accident 08/02/2022 08:25 (SGT)

Exact Location of Accident Near 180D Rivervale Cres, Singapore 544180 Additional Location Information TPE (KPE) before Punggol East Flyover

ountry/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBJ2571D

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner Goldtron Enterprise & Services Pte Ltd

Company Reg No 1XXXXX299G

Fmail Address hong_002626@hotmail.com

Mobile Phone No (Phone) +65-98965445 Alternative Phone No +65-98503854

VEHICLE PARTICULARS

Manufacturer Tovota

Hiace odel ariant

Exact purpose for which vehicle was being used at time of Employment accident

Are you claiming under your own insurance policy for repair to

your vehicle? No - Claiming third party Vehicle Category Commercial vehicle Manual

Transmission

1100 CC

INSURANCE COMPANY

NTUC Income Insurance Co-operative Ltd Name of Insurance Company

Comprehensive Type of Coverage

No Fleet Policy

5116160256-01 Policy Number

Cover Note Number

DRIVER

Name of Driver Koid Hua Hong

NRIC No SXXXX3037 Date Of Rirth 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

OTHER INCORMATION

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)

Was any foreign vehicle involved in the accident?

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

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?

CIRCUMSTANCES OF ACCIDENT

Refer to Police Report: - T/20220208/2030

ATTACHMENT(S)

Vehicle Colour

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

Reasons for not uploading a video of the accident

Was there any audio recorded?

Yes Yes

28/04/1984

01/04/2013

8 YEARS AND 10 MONTHS

hong_002626@hotmail.com

Block 121D Canberra Street

(Phone) +65-98965445

Indoor

Mala

#13-755

754121

Employee

Chain Collision

Clear

Dry

No

Yes

Yes

Yes

1

No

No

4

Nο

No

SD card with Traffic Police

Νo

Hougang Neighbourhood Police Centre

60 Hougang Ave 9 Singapore 538775

(Phone) +65-18004890999

(Fax) +65-63128989

DETAILS OF OTHER VEHICLE PROPERTY 1

SMY8960R Vehicle Registration Number Vehicle Manufacturer Cerato Vehicle Model Vehicle Variant

@ Accident report ST0J22280001

Vehicle Category Private car Name of Driver Eric

Contact Number (Phone) +65-91478292

Address Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMN8928T Vehicle Manufacturer Toyota Vehicle Model Noah

Vehicle Variant Vehicle Colour

Vehicle Category Private car

Name of Driver Contact Number

Address

Address complement Postcode

urance Company Name

Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number PC3279M Vehicle Manufacturer

Vehicle Model Vehicle Variant Vehicle Colour

Vehicle Category Name of Driver

Contact Number (Phone) +65-97855125

Address Address complement Postcode

Insurance Company Name ture Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Unknown Gender Male Phone No

Address Address Complement Post Code

Approximate Age Years Old Injuries Sustained

Injured person in which vehicle? SMN8928T Were seat belts worn? Yes

Was this injured conveyed to hospital by ambulance? Yes

INJURED 2

Name of Injured person Unknown

Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle?	
Were seat belts worn?	Yes

Was this injured conveyed to hospital by ambulance?

Yes

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to re<u>pudiate policy liability</u>.
- 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 flow arded 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)

Lunderstand, 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 ancibir 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 agencylauthority (such as the police), for the purpose(s) of the Monetary Authority of Singapore and any relevant.

(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
- (n) administering my claims (including the mailing of correspondence, statements, involces, 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 yessitaw firms), which may be sted outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date &

Goz

Driver's Signature (1 driver is not the policyholder) | Date & Time | 08 | 02 | 2021 (1 | 42 ol.) A

Witnessed by Reporting Centre Personnel / F

Sketch Plan

TRE TO THE KARE

H 48J25710 B! SMY 89661 C! SMN 89287 D PC 32IGM Describe Circumstances of the Accident Police 10 put: - 7/20220 208/2030

Declaration

Time

Palicyholder's Signature / Date &

Driver's Signature (if driver is not the policyholder) / Date 8. Time 08 10/10/12 01/10 h





ambulance: No

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999 Report No. T/20220208/2030

Date/Time Report Made: 08/02/2022 10:43		Vide Report No.:				Station Diary No.: 44	
Informa	nt's Partici	ulars	Service (St. 1989)	25 / 1/	ALCO TO	27200	
	Informant: JA HONG		Address: APT BLK 121I 754121	CANB	ERRA STREE	ET #13-	755 SINGAPORE
ID Type / ID No.: NRIC NO / S8467303Z		Contact No.: Home/Office: Mobile			ile: 989	e: 98965445	
National MALAYS			Email:				
Sex: Male	Age: 37	Date of Birth: 28/04/1984	Type of Informant: Driver				
Race: Chinese		Language:		Inst	Institution / School Name:		
Occupation: TECHNICIAN		Driving Licence Information: Class: 3 Date of Expiry:			eiry:		
Type of		n of the Accident Non-Injury Attended by Police	Drink	127	Date/Time of	is in	Type of Location
Accident:				08/02/2022 08			
Weathe	IES EXPRI	ESSWAY	Road Surface			Ro	ad Speed Limit:
Clear Traffic F	low:		Dry Traffic Control:		-	Traffic Volume	
One Way		Not Controlled			Moderate		
Type of Collision: CHAIN COLLISION						Anyone conveyed by ambulance:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBJ2571D	Van				Slightly Damaged	0
PC3279M	Bus/Coach/Mi nibus				Slightly Damaged	0
SMN8928T	Car				Slightly Damaged	0
SMY8960R	Car				Slightly	0





Police Station Of Origin: Hougang N.P.C

Report No. T/20220208/2030 60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999 CONTINUATION OF REPORT

Brief Details.

On 08/02/2022 at about 0825hrs, I was driving my company vehicle GBJ2571D at TPE towards changi direction before the Lorong Halus exit at the leftmost lane. Nothing was amiss.

I was driving as per normal but subsequently, one vehicle(SMY8960R, HP:91478292) collided on to the rear of my vehicle. I realized that it is a chain collision of four vehicles and I am the first vehicle. The last vehicle is registration plate is PC3279M. The third vehicle registration plate is SMN8928T, HP:90687887. I was not injured. I am unsure who is hurt but I saw an ambulance at the scene. Subsequently, police came to scene too reference F/20220208/0070. My vehicle sustained dents on the rear body kit and rear boot area. The TP officer also seized my SD Card.

I am unsure of the damages of all the other cars and also did not check if they are hurt or not. I wish to inform that there is no government property damaged.

The purpose of this report is for insurance claim purposes.





Report No. T 20220208-2030

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775

Tel No. 1800-4890999 CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report F /	Signature Of Informant:
SGT 2 ROYCE YEW TIAN POH	41
Signature Of Interpreter: Not applicable	Date/Time: 08/02/2022 10:43
Officer In Charge Of Case.	Classification Of Case:
TP / GIT / SI NG BEIFENG Contact No : 65476845	
Authentication Stamp	. Comment was

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Company	
Owner ID: Vehicle Details	299G	
Vehicle No.:	GBJ2571D	
Vehicle to be Exported:	No	
Intended Deregistration Date:	08 Feb 2022	
Vehicle Make:	TOYOTA	
Vehicle Model:	HIACE VAN TURBO 5DR MT	
Primary Colour:	Silver	
Manufacturing Year:	2018	
Engine No.:	1KD2842039	
Chassis No.:	JTFHT02PX00247747	
Maximum Power Output:	•	
Open Market Value:	\$28.136.00	
Original Registration Date:	01 Mar 2019	
First Registration Date:	01 Mar 2019	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$1,407.00	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	•	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	28 Feb 2029	
COE Category:	C - Goods Vehicle & Bus	
COE Period(Years):	10	
PQP Paid:	\$23,268.00	
COE Rebate Amount:	\$16,426.00	
Total Rebate Amount:	\$16,426.00	

The information contained herein is correct as at 08 Feb 2022

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28 vehicles

Make hiace Toyota Hiace 3.0M

Model

\$66,800

\$78.800

\$65,800

\$82,800

\$70,800

\$82,800

\$80,800

« Back (1 2) Next »

Depreciation

\$9,340 /yr

\$10,540 /vr

\$9,320 /yr

\$11,020 /yr

04-Apr-2019

01-Aug-2019

01-Mar-2019

14-Aug-2019

2.982 cc

2,754 cc

2.982 cc

2.754 cc

Mileage

Anv

40,000 km

Advanced Search C

Anv

Van

Van

Van

✓ 20 results/page ✓ Search . Veh Type Status

Available

Available

PREMIUM AD

Available

PREMIUNAD

Available

CA MUIMBES

Available

PREMIUM AD

Available

Search Selection

AVE.

Fuel Type: Diesel

1 Owner Only, Agent Unit, Full Checked Plate Cabin, Well Maintained And Taken Care By Previous Owner, No Repair Needed, Hassle Fre

Posted: 09-Feb-2022 Tags: 2019 Toyota Hiace, Toyota Hiace, Toyota, Hiace

Toyota Hiace 2.8A DX Fuel Type: Diesel GENUINE LOWEST MILEAGE! METICULOUSLY MAINTAINED BY 1 OWNER SINCE DAY 1! New Upholstery Wrapped! Factory Fitted Rear Car (S) Pte Ltd Posted: 08-Feb-2022 Tags: 2019 Toyota Hiace, Toyota Hiace, Toyota, Hiace Toyota Hiace 3.0M

Fuel Type: Diesel One Owner, 100% Accident Free. Well Maintained Unit. Excellent Condition From Inside To Outside. High Loan And Fast Approve. Drive ABS Bus Pte Ltd Posted: 08-Feb-2022 Tags: 2019 Toyota Hiace, Toyota Hiace, Toyota, Hiace

Toyota Hiace 2.8A DX Fuel Type: Diesel Skylink Auto Pte Ltd

Posted: 07-Feb-2022 Tags: 2019 Toyota Hiace, Toyota Hiace, Toyota, Hiace

2019 Toyota Hiace Manual Diesel (For Lease)

\$1,250/mth Lowest long term lease Toyota Hiace Manual (2019)! We have a wide range of commercial vehicles for rental and sales

More info about this vehicle Toyota Hiace 3.0M

Fuel Type: Diesel ABS Bus Pte Ltd Posted: 07-Feb-2022 Tags: 2019 Toyota Hiace, Toyota Hiace, Toyota, Hiace

Fuel Type: Diesel

Toyota Hiace 2.8A

Toyota Hiace 2.8A DX Skylink Auto Pte Ltd

Posted: 07-Feb-2022 Tags: 2019 Toyota Hiace, Toyota Hiace, Toyota, Hiace

\$9,480 /yr 30-Jul-2019

Beautiful Unit Not To Be Missed! Low Mileage. Full Original Condition. Well Maintained By Previous Owner, Condition Just Like Brand Ne

29-Aug-2019

08-May-2019

2.754 cc

2 754 cc

2.982 cc

Van

Available PREMIUM AD

Van

Van

Fuel Type: Diesel Skylink Auto Pte Ltd

Posted: 07-Feb-2022 Tags: 2019 Toyota Hiace, Toyota Hiace, Toyota, Hiace

nttps://www.sgcarmart.com/used_cars/listing.php?RGD=2019&MOD=hiace&RPG=20&VEH=0&AVL... 09-Feb-21

\$10,960 /yr

\$11.150 /vr

Reg Date Eng Cap 2019 Anv

Available