1 "EI CS3/CTIZZOO1305/UVf3 ASSIGNMENT From Cale ShAS470C Veli No. Estimated Cost: UD/IP/WS/IP RES/OD RES/EVA/INV/MV Truck / Traller or To Inspect Vehicle No: Toyota Vell fire 3-52 Wate: at Workshop mys Colour AC: . Insured/SId/NI/NA Sp.Reading T/Radio: Insured / Sid / NI / NA Insured Eng/No: Policy No GGH208038110 C/No: Claims No Gen. Cond: Good / Felr / Poor / Burnt Sum Insured: Steering: Inorder / Jammed / Leaked / Burnt or (Client's Record) Brake: Inouder / Jammed / Leaked / Burnt or Make of Veh Modi: NII I SIRIM I TO AIRIN or . F: 245/45 P18 Tyro Size: (Policy Condition) 245/45118 Remark: The veh had commenced Its N/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / FIR) SUMI / repair at the time of inspection. TOYO/YOKO or Bal or Market Value: Front IDAC Acadeni Rport Roar Consistent? : Yes or No 5 R/Bal. R/Bal. GIA / PR Seen: Consistent?: Yes or No UBal. UBal. 5 Est Repairs. D.O.A. 10/2/22 D.O.I. Lum Sum 3 Val.: Yos or No Survey held at CA / REV / REP. / 24 HRS Des. of Damages : Frt. | (Co) | O/S | N/S | U/C | Rooflop or Vehicle: IN/OUT Person Contacted The U/C / Chassis frame / Body Structure affected due to collision. Date / Time Action / Instruction mu: 98k rebate: 37 978 W: 60072 rr: 4K-5K Proll. Report Days Of Ropalr: : Final Roport Resurvey No. of Trip: Survey Fee: Time Fle Recom in? Transportations Add Fag: : Site insp (\$ \_S . FS. \_ SI : Interview 15 FINDA Great Follows: Tech, Inve () CHIVAT

WASI SING IT

100 41.

# > Back to OneMotoring

Enquire PARF/COE Rebate for	Registered Vehicle	
Fnguire PARF/COE Repare 101	tion projection about the middle of the first to the	

quire PARF/COE Rebate for Registered Vehicle Vehicle Owner Particulars	Singapore NRIC
Owner ID Type:	
Owner ID:	941F
Vehicle Details	01/45/2000
Vehicle No.:	SKA5420C
/ehicle to be Exported:	Yes
ntended Deregistration Date:	07 Mar 2022
/ehicle Make:	TOYOTA
/ehicle Model:	VELLFIRE 3.5Z G-EDITION A
Control of the Contro	White
Primary Colour:	2010
Manufacturing Year:	2GR0761744
ngine No.:	GGH208038110
hassis No.:	206.0 kW (276 bhp)
Naximum Power Output:	\$53,174.00
Dpen Market Value:	10 Mar 2011
Original Registration Date:	10 Mar 2011
irst Registration Date:	0
ransfer Count:	\$53,174.00
Actual ARF Paid:	the same former of the same of
ntended PARF Rebate Details	Forfeited
ARF Eligibility:	
ARF Eligibility Expiry Date:	\$0.00
ARF Rebate Amount:	The state of the s
ntended COE Rebate Details	31 Jan 2031
OE Expiry Date:	B - Car (1601cc & above)
OE Category:	10
OE Period(Years):	\$42,683.00
QP Paid:	\$37,978.00
COE Rebate Amount:	\$37,978.00
otal Rebate Amount:	Company of the Compan

The information contained herein is correct as at 07 Mar 2022

ОК

dp:11h =917

84rs 11 / 107

917×107=98119 = 981c 981c-379378 37978 = 60072



# Vellfire 3.5A Z G-Edition Used Vehicle List (1 vehicles)

Car Model Price Depreciation Reg Date Eng Cap Mileage Company Availability

Toyota Velifire 3.5A Z G-Edition \$88,888 \$11,040 /yr 26-Mar-2010 3,456 cc - Snyder Holdings Pte Ltd Available (COE till 03/2030)

VIP Seats With Leg Raise, Full Loan Available.

Office No. - -

Ash - 91174662 | Smile - 92305353 | Fendy - 81900004 | Wan - 83837726

sgCarMart is the number one car classifieds for parallel import ears, Toyota, Honda, Nissan, Mitsubishi & BMW. There are plenty of cars for sale, even for COE cars, OPC cars, vans, trucks, hybrid ears, sports cars or stationwagons. You can also buy from a car auction, look up car loans, low mileage ears, car brands, carpark rates & car insurance. We have new car dealers comprising parallel importers, authorised ear dealers, and used ear dealers on our site. Find new car price lists, new car launches and new car promotions, and also motoring advice, car reviews & car news on the latest models. Find the right Rental Car for you - get short term rental, long term lease, private hire cars, wedding cars to cars for p-plate probation drivers. Visit our partner sites for job openings for Singapore jobs, real estate, mover, car performance parts, car discussion, forum discussion, commercial vehicle leasing & COE results.

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SS1Y222A0005 / SME MOTOR PTE LTD ENTRY DATE & TIME. 10/02/2022 15.59 (SQT) SUBMITTED BY: Chia Pel Ying VERSION: 1 (15/02/2022 10:46 (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 flability.

  4. The issue and acceptance of this Form by insurance companies is not an admission of policy flability 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

Vehicle Desistration Number

10/02/2022 15:59 (SGT) 10/02/2022 07:47 (SGT) PIE, Singapore HONG KAH FLYOVER Singapore

## **DETAILS OF OWN VEHICLE**

Verlicle Registration Number		SKA5420C	
INSURED/POLICYHOLDER			
Is company?		No	
Name Of Registered Owner	50 0 1 0000 weeked	RUAN YUN YUN	
NRIC No		S8181351E	
Email Address	2 224 CALASS & SERVICENCE HARDE	ruanyunyun@gmail.com	
Mobile Phone No	ENGINEER CONTRACTOR	(Phone) +65-93207611	
Alternative Phone No	S. S. S. SERVICE C. I. HARD WAS CHARLED	+65-93207611	
VEHICLE PARTICULARS			
Manufacturer	11	Toyota	
Model	TO A DOM - NO - GOOD OF KNOOD - KNOOL - OF LANGUAGE COMPANION	Vellfire	
Variant		-	
Exact purpose for which vehicle	e was being used at time of		
accident	and the second second second	Private use	
	vn insurance policy for repair to	No. Claiming third party	
your vehicle? Vehicle Category		No - Claiming third party Private car	
Transmission		Auto	
CC		3500	
		3300	
INSURANCE COMPANY			
Name of Insurance Company	- 100 I M MAY 1 PARENCE CONTROL	NTUC Income Insurance Co-operative Ltd	
Type of Coverage		Comprehensive	
Fleet Policy	5 S S	No	
Policy Number	s e a Ou	5120829204	
Cover Note Number	e v	•	
DRIVER			
Name of Driver		WU DA	
NRIC No		S8181350G	
-0			

Date Of Birth 03/01/1981 Occupation Indoor Date Of Driving Pass 20/05/2011 Driving experience 10 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-82018265 Alt. Phone Number Email Address wuda.0521@gmail.com Address BLK 208A CLEMENTI AVE 6 #37-117 Address complement Postcode 121208 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 2 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name **RUAN YUNYUN** Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT I WAS DRIVING ALONG PIE TOWARDS TUAS NEAR HONG KAH FLYOVER. I FOLLOWED THE VEHICLE IN FRONT OF ME TO STOP. SUDDENLY, I HEARD A BANG SOUND AND FELT AN IMPACT FROM MY REAR. VEHICLE B COLLIDED ONTO THE REAR PORTION OF MY VEHICLE. I FELT UNCOMFORTABLE AFTER ACCIDENT AND WILL CONSULT DOCTOR. 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** 

SMJ9077M

Accident report SS1Y222A0005

Vehicle Registration Number

Vehicle Manufacturer Vehicle Model Vehicle Variant

Vehicle Colour	
Vehicle Category	Private car
Name of Driver	<b>NGIAM XING HAO</b>
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to spend up the claims process
- 2 This Formmust be completed by the Policyholder and/or the Authorised Driver
- 3 Information provided must be as truthful and accurate as nossible. Any will direct consentation or withholding of material facts may allow insurance companies to remidiate 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 talse reporting may be referred to the Police for investigation
- 5 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)

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 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 clares including the settlement of the claims and any necessary investigations relating to the clams
- (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.

Policyholder's Signature / Date & Tone

Sketch Plan

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

Witnessed by Reporting Centre Personnel

> A: SKA 5470C B: SMJ 9077M

Describe Circumstances of the Accident
I was driving along PIE towards Twas near Hone tak Flyans,
I wou followed by the vehicle infront of me to stop
Suddenly I honrol a bang sound and felt an impact from my
rear vehicle B was collided onto near portion of my vehicle
I felt unconfortable after accident will consult doctor.
Jest allender of the will consult forces.
·

## Declaration

Time

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

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel