

ASS. REC. BY: RAME

REF:

CS/INC 22002560/Rvy3

961K

## - ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: SMJ 8540Zat Workshop m/s MY CAR CONSULTANTof GO SARAH LAM HUAT CARROS CTR #0568Insured: INC

Policy No. \_\_\_\_\_

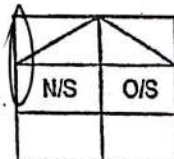
Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection.Bal. or Market Value: 120K

IDAC Accident Report: \_\_\_\_\_ 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

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SMJ 8540Z Yr Regn: 2019, MARType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: TOYOTA NOAH HYBRID 7-SEAT c.c. 1797Colour: WHITE A/C: Insured / Std / NI / NASp. Reading: 225 770 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: ZWR800362925Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/65R15R: 195/65R15

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

TOYO / YOKO or WESTLAKES

Front Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 04/03/22 D.O.I. 17/03/22Survey held at MY CAR CONSULTANTDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop orN/S FRONT

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

Date / Time Action / Instruction

REPAIR LIMIT - 73K

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: \_\_\_\_\_

Date/Time, File Return to?

☐ : Final Report

Resurvey No. of Trip: \_\_\_\_\_

2) \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S + RS. \$ \_\_\_\_\_

Photos

Others

Rep. Format: \_\_\_\_\_

Lump Sum / I.B.I. (\$) \_\_\_\_\_





# MY CAR CONSULTANT PTE LTD

Reg no.: 201605878Z

Address: 60 JALAN LAM HUAT, CARROS CENTRE #05-68 S737896

HP: 98888885

## Estimation

Date:

16/3/2022

Vehicle:

SMJ8540Z

Make / Model:

TOYOTA NOAH

INSURANCE

NTUC

Rasul  
Hy 90010068  
4 days  
P/P  
17/03/22  
@1710  
Resy before  
paint

No.	Description	Unit	Unit Price	Amount
	Parts Replacement:			
1	FRONT BUMPER <i>sc</i>	1	\$ 1,985.00	\$ 1,985.00
2	FRONT BUMPER BRACKET LH <i>X</i>	1	\$ 144.00	\$ 144.00
3	FRONT BUMPER SIDE RETAINER LH <i>?</i>	1	\$ 112.00	\$ 112.00
4	FRONT BUMPER SIDE COVER LH <i>X</i>	1	\$ 159.00	\$ 159.00
5	FRONT GRILLE <i>X</i>	1	\$ 788.00	\$ 788.00
6	HEADLAMP LH <i>RCA</i>	1	\$ 3,985.00	\$ 3,985.00
7	HEADLAMP GARNISH LH <i>X</i>	1	\$ 112.00	\$ 112.00
8	FRONT HEADLAMP LOWER BRACKET <i>X</i>	1	\$ 122.00	\$ 122.00
9	FRONT FENDER LH <i>repair</i>	1	\$ 896.00	\$ 896.00
10	FRONT FENDER COWLING LH <i>cut</i>	1	\$ 211.00	\$ 211.00
11	FRONT FENDER EMBLEM HYBRID LH <i>sc</i>	1	\$ 68.00	\$ 68.00
12	FRONT FENDER QUARTER GLASS MOULDING LH <i>X</i>	1	\$ 65.00	\$ 65.00
13	SIDE SKIRTING LH <i>repair</i>	1	\$ 898.00	\$ 898.00
14	FRONT DOOR LH <i>repair</i>	1	\$ 1,598.00	\$ 1,598.00
15	FRONT DOOR HINGES LH <i>X</i>	2	\$ 112.00	\$ 224.00
	TOTAL PART			\$ 11,367.00
	LIST DOWN	25%		\$ 2,841.75
	AFTER LIST DOWN			\$ 8,525.25
	S/N			
1	FRONT BUMPER CLIPS <i>sc</i>	1	\$ 80.00	\$ 80.00
2	FRONT FENDER COWLING CLIPS <i>sc</i>	1	\$ 50.00	\$ 50.00
3	SIDE SKIRTING CLIPS SET <i>sc</i>	1	\$ 50.00	\$ 50.00
4	FRONT WHEEL SPORTS RIM LH <i>X</i>	1	\$ 800.00	\$ 800.00
	TOTAL SPECIAL NETT			\$ 130.00
	Labour to:			
1	RESET TROUBLE CODE <i>X</i>	1	\$ 300.00	\$ 300.00
2	TO CHECK ELECTRICAL WIRING	1	\$ 200.00	\$ 200.00
3	CONDUCT WHEEL ALIGNMENT	1	\$ 120.00	\$ 120.00
4	REMOVE AND REFIT FRONT UNDERCARRIAGE LH	1	\$ 300.00	\$ 300.00
5	REALIGN HEADLAMP	1	\$ 80.00	\$ 80.00
6	PANEL BEATING ON AFFECTED AREA	1	\$ 800.00	\$ 800.00
7	SPRAY ON AFFECTED AREA	1	\$ 800.00	\$ 800.00
				\$ 2,600.00
	<ul style="list-style-type: none"> <li>• To resurvey before after repair</li> <li>• To display damaged part(s) during resurvey</li> <li>• Parts prices are subject to confirmation</li> <li>• Third party survey is on a "Without Prejudice" basis</li> <li>• No illegal modification(s) is allowed</li> <li>• Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company</li> </ul>			
	Acknowledged by Repairer		Parts Replacement Amount	\$ 8,655.25
	Signature:		Total Amount for Labour	\$ 2,600.00
	Date:		Total Amount	\$ 11,255.25

30  
30  
30  
X  
X  
X  
X  
X  
400  
600

Interview



# 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 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. 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 ..... 04/03/2022 17:46 (SGT)  
Date of Accident ..... 04/03/2022 13:20 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... JUNCTION OF OPHIR RD & BEACH RD  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMJ8540Z

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... LUMENS AUTO PTE LTD  
Company Reg No ..... 2XXXXX961K  
Email Address ..... KOKHOW.TAY@LUMENS.SG  
Mobile Phone No ..... (Phone) +65-87781765  
Alternative Phone No ..... +65-87781765

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Noah  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... -  
Are you claiming under your own insurance policy for repair to your vehicle? ..... No - Claiming third party  
Vehicle Category ..... Private hire  
Transmission ..... Auto  
CC ..... 1800

### INSURANCE COMPANY

Name of Insurance Company ..... India International Insurance Pte Ltd  
Type of Coverage ..... ThirdParty  
Fleet Policy ..... Yes  
Policy Number ..... D20MFL0005826-01  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... MOHAMAD ROSLEE BIN SULAIMAN  
NRIC No ..... SXXXX353C

Date Of Birth	31/03/1982
Occupation	Outdoor
Date Of Driving Pass	26/11/2004
Driving experience	17 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93202251
Alt. Phone Number	-
Email Address	ANDY.QUEK@LUMENS.SG
Address	93, DAWSON RD, #11-40
Address complement	-
Postcode	142093
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Side Swipe
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	PASSENGER
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

#### REFER SKETCH PLAN

#### 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

Vehicle Registration Number	SLE5590L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	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)	-



## 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.
- (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.

**CITY AUTO PTE LTD**  
 Blk 8 Sin Ming Road  
 #01-58/60/62 Sin Ming Ind Est  
 Singapore 575643  
 Tel: 6453 1235 Fax: 6453 7944  
 (Claims Section)

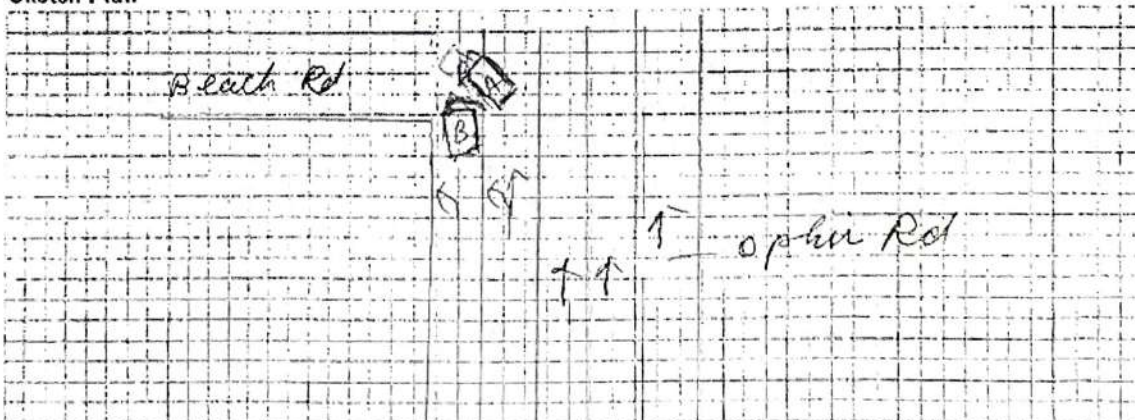


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan



**Describe Circumstances of the Accident**

I was driving along OPHIR ROAD at the junction  
Second lane turning left onto beach road and vehicle  
B on my left was driving fast and hit onto left side  
portion of the car.

**Declaration**

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

**CITY AUTO PTE LTD**

Blk 8 Sin Ming Road  
#01-58/60/62 Sin Ming Ind Est  
Singapore 575643  
Tel: 6453 1235 Fax: 6453 7944  
(Claims Section)

Witnessed by Reporting Centre  
Personnel



> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	961K
Vehicle No.:	SMJ8540Z
Vehicle to be Exported:	No
Intended Deregistration Date:	18 Mar 2022
Vehicle Make:	TOYOTA
Vehicle Model:	NOAH HYBRID 7-SEATER 1.8X CVT
Primary Colour:	White
Manufacturing Year:	2018
Engine No.:	2ZR0C93063
Chassis No.:	ZWRB00362975
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,805.00
Original Registration Date:	22 Mar 2019
First Registration Date:	22 Mar 2019
Transfer Count:	0
Actual ARF Paid:	\$27,927.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	21 Mar 2029
PARF Rebate Amount:	\$20,945.00
COE Expiry Date:	21 Mar 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$36,961.00
COE Rebate Amount:	\$25,902.00
Total Rebate Amount:	\$46,847.00

The information contained herein is correct as at 18 Mar 2022

OK



# Toyota Noah Hybrid 1.8A X

## Overview

[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

**Price** **\$120,800**

**Depreciation** ⓘ \$15,230 /yr  
View models with similar depre

**Reg Date** 28-Mar-2019  
(7yrs 9days COE left)

**Mileage** N.A.

**Manufactured** ⓘ 2018

**Road Tax** ⓘ \$974 /yr

**Transmission** Auto

**Dereg Value** ⓘ \$48,314 as of today (change)

**Fuel Type** Petrol-Electric

**COE** ⓘ \$39,401

**OMV** ⓘ \$32,490

**Engine Cap** 1,797 cc

**ARF** ⓘ \$27,486

**Curb Weight** ⓘ 1,610 kg

**Power** 100.0 kW (134 bhp)

**Type of Vehicle** MPV

**No. of Owners** ⓘ 1