

ASS REC. BY: Thuvan

REF: CS3/CTE 22002956 / July 3

ASSIGNMENT

Yr Regn: 29/6/16

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SLD 9613R
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Honda Verza 1.5x cc 1196
 Colour: black A/C: Insured / Std / NI / NA
 Sp. Reading: 80256 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: Pull 117157
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Modi: NII / S/Rim / STD A/Rim or _____
 Tyre Size: F: 215/60R16
 R: 215/60R16
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or _____
 Front _____ Rear _____
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. 27/3/22 D.O.I. 30/3/22 / 400
 Survey held at HL car care
 Des. of Damages: Frnt Rear / O/S / N/S / U/C / Rooftop or _____
 The U/C / Chassis frame / Body Structure affected due to collision.

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: 52k
 IDAC Accident Rpt: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: 6 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Date / Time	Action / Instruction
	<u>MU: 52k</u> SUBMIT PRS REPORT
	<u>rebate: 30/60</u>
	<u>RV: 21840</u> REPAIR RANGE \$6000 - 7000, 6DAYS
	<u>rr: 6h-7k</u>

Date/Time, File Pass to? : **Prel. Report**
 : **Final Report**

1) _____
 Date/Time, File Return to? _____

2) _____

Report Format : _____
 Lump Sum / I.B.I: (\$ _____)

Days Of Repair: 6
 Resurvey No. of Trip: _____

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

Survey Fee: _____
 Transportation: _____
 S + RS, SI _____
 Photos _____
 Others _____
 TOTAL _____

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please provide accurately the details of the accident to speed up the claims process.
2. The information provided is used by the Police, the relevant Road and Land Transport Department.
3. Information provided must be truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy claims.
4. The acceptance and completion of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any claims involving this accident must be referred to the Police for investigation.
6. The report will be held by the office of the CIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of the report will, at a fee, be made available upon application by interested parties.
7. By the signature of this report to the insurer, you hereby consent to the archiving of this report at the centre and to copies of the report being made available elsewhere.

ACCIDENT STATEMENT

Date of Submission: 28/03/2022 13:59 (SGT)
Date of Accident: 27/03/2022 11:55 (SGT)
Exact Location of Accident: Singapore
Additional Location Information: PASIR RIS ST 72 (INFRONT OF WHITE WATER CONDO)
Country/State of Loss: Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number: SLD8613R
Is company? No
Name Of Registered Owner: TAN BOON TONG (CHEN WENZHONG)
NRIC No: S6846228B
Email Address: TONYBTT@HOTMAIL.COM
Mobile Phone No: (Phone) +65-96957999
Alternative Phone No: +65-96957999

VEHICLE PARTICULARS

Manufacturer: Honda
Model: Vezel
Variant: -
Exact purpose for which vehicle was being used at time of accident: Private use
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category: Private car
Transmission: Auto
CC: 1500

INSURANCE COMPANY

Name of Insurance Company: NTUC Income Insurance Co-operative Ltd
Type of Coverage: Comprehensive
Fleet Policy: No
Policy Number: 5117533799-01
Cover Note Number: 29/08/2021 - 28/06/2022

Name of Driver: TAN BOON TONG (CHEN WENZHONG)
NRIC No: S6846228B

Date Of Birth 05/12/1968
 Occupation Indoor
 Date Of Driving Pass 13/09/1996
 Driving experience 25 YEARS AND 8 MONTHS
 Gender Male
 Mobile Number (Phone) +65-96957999
 Alt. Phone Number +65 96957999
 Email Address TONYDIT@HOTMAIL.COM
 Address 63 PASIR RIS GROVE #08-07
 Address complement
 Postcode 518216
 Is the driver the policy holder? Yes
 If No, Relationship of the Driver with the insured
 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 any body 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) 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? Yes
 Police Station Name Pasir Ris Neighbourhood Police Centre
 Police Station Phone No (Phone) +65-18005852999
 Alt. Police Station Phone No (Fax) +65-65855261
 Police Station Address 1 Pasir Ris Drive 4 #01-01 Singapore 519457
 Was notice of intended Prosecution given? No
 If, yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO 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 GBH4850X
 Vehicle Manufacturer Toyota
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category Commercial vehicle

SN072256445

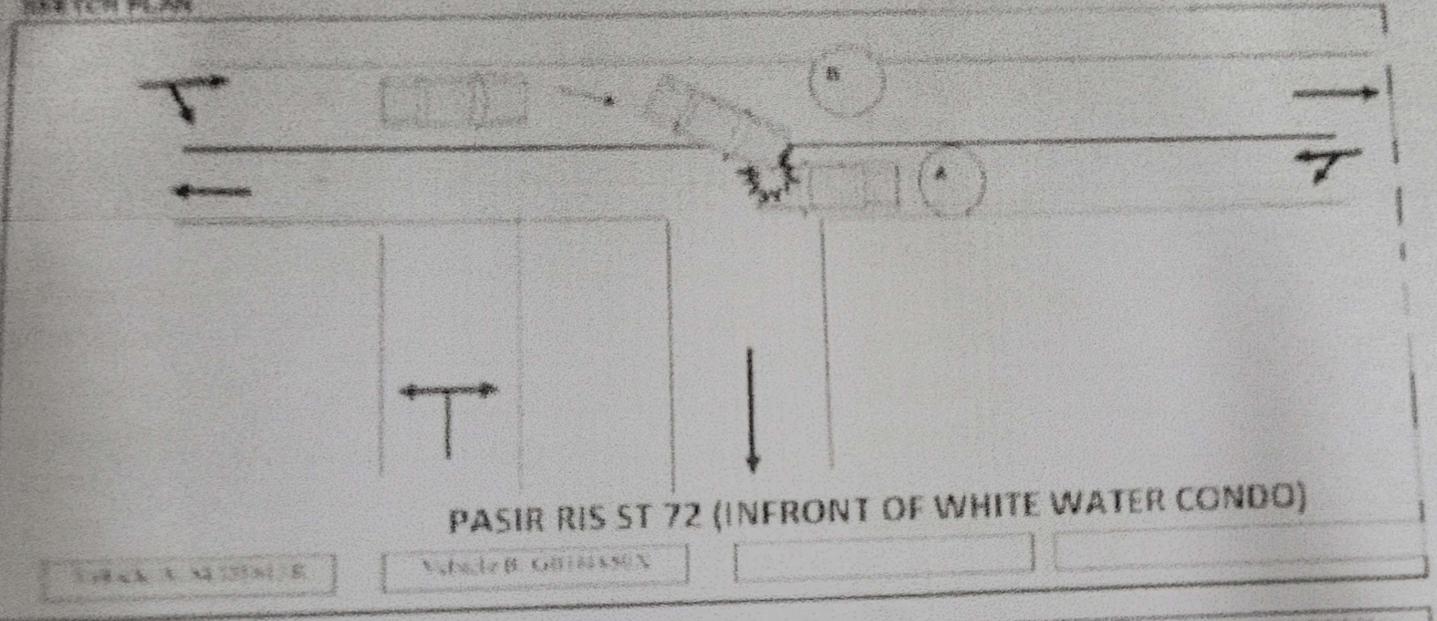
Name of Driver	SURBIAH VELU
Passport No/FIN	F7970572K
Contact Number	(Phone) +65 90194080
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	FRONT LEFT PORTION
Details of property damaged in accident	
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN BOON TONG (CHEN WENZHONG)
Gender	Male
Phone No	(Phone) +65 96957999
Address	83 PASIR RIS GROVE #08-07
Address Complement	-
Post Code	518216
Approximate Age Years Old	-
Injuries Sustained	NECK
Injured person in which vehicle?	SLD8613R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN



WHEN DRIVING ALONG PASIR RIS ST 72 (INFRONT OF WHITE WATER CONDO), VEHICLE B SUDDENLY TURNED INFRONT OF MY VEHICLE. I MADE SOME EFFORT TO AVOID THE COLLISION AND STEPPED ON MY BRAKE BUT STILL BOTH VEHICLES COLLIDED.