ASS. REC. BY: 2011 REF: C33 LPC 22	003666 Rty3
ASS	GNMENT
From: Date: Estimated Cost: OD / TP / WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: CBA 4132K	Veh No: GBH 4132K Yr Regn: 76(8 / MAY Type: M.Car / M.Cycle / Bus / Yah / Lorry / Taxl / Prime Mover / Truck / Trailer or Make: Toyofa Hace with puls Col. c.c 2882
at Workshop m/s HISP UCK	Colour GREU A/C: Insured / Std / NI / NA
of 160 kin ming De 1805/17 @ Ambuty	Sp.Reading 169457 T/Radio: Insured / Std / NI / NA
Insured: LPC	Eng/No:
Policy No.	C/No: JTAH TO 2PG 00 242416
Claims No.	Gen. Cond: Good / Fair/ Poor / Burnt
Sum Insured: Excess:	Steering: horder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: (norder / Jammed / Leaked / Burnt or
Make of Veh:	Modi : (NiP) S/Rim / STD A/Rim or
•	Tyre Size: F: 195RLSC
(Policy Condition)	R: 75
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA /MIQ/ OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value:	
	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. mm R/Bal. mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 18 04/22 D.O.I. 86 04/22
Lum Sum: % 3 Val.: Yes or No	Survey held at #(AP UEK
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Pate / Time Action / Instruction REPAIR LINIT- 46K ESTIMATE RANGE OF REPORT	or omys - 3k-4k)/s days
	Days Of Repair:
	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add Fee	: Site Insp (\$)s+Rs,si
	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$: Weekend (\$

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

 Please report <u>correctly</u> 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

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 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

19/04/2022 14:44 (SGT) 18/04/2022 14:25 (SGT) AYE, Singapore AYE towards MCE (after Alexandra Exit) Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBH4132K

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Model 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? Vehicle Category **Transmission** CC

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy **Policy Number Cover Note Number**

DRIVER

Name of Driver Work Permit No

Yes Dyna Cool Air Pte Ltd 200301052K dynacoolair@singnet.com.sg (Phone) +65-65644988 (Home) +65-65644988

Employment

Toyota

Hiace

No - Claiming third party Commercial vehicle Manual

3000

NTUC Income Insurance Co-operative Ltd Comprehensive No 5100981392-03

Ramakrishnan Mukilan G7694452R

Accident report SS02224J0005

Date Of Birth Occupation **Date Of Driving Pass** Driving experience Gender Mobile Number Alt. Phone Number **Email Address** Address Address complèment

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 INFORMATION

Was any foreign vehicle involved in the accident? 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) Has the driver been approached by unknown person(s)

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Refer attached report

ATTACHMENT(S)

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

17/01/1985 Indoor 24/11/2017 4 YEARS AND 5 MONTHS

Male (Phone) +65-87329407

dynacoolair@singnet.com.sg 2 Bukit Batok St 24 #06-07 Skytech

659480 No **Employee**

No

Collision - Head to Rear

Clear Dry

No

2

1

No

Yes No No

No Yes soliciting/offering accident claims assistance?

No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver Work Permit No Contact Number Address

GBG8308A Isuzu

Commercial vehicle Ou Keng Hin G7577221J

and Osmpany Name

Jure Ut Damage

Jure State of property damaged in accident

Jure State of the Control of the

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the addicent to speed up the claims process.
- 2. This Formmust be completed by the Policyholder andlor the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any will disseptes entation or withholding of material facts may allow asurance companies to regudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy fability 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 GW Records Management Centre established by the General Estrance 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 ladgement 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 wiorkshop and the General Insurance Association of Singapore (*GIA*) may/are permitted to poliect, 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 (as 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 a
- (i) processing, handling and/or dealing with my claims including the settlement of the delins and any necessary investigations relating to
- (ii) investigating the accident and/or my claims;
- (iii) carrying out angligr dealing with my instructions or responding to any englishes by the
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could invoive disclosure of certain personal data about me to bring about delivery of the same as well as on the external power of envelopes that packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my olaims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this econdent and the insurers law year-law firms, may less permitted to defect. 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 end/or GIA to their third party service providers or agents (ancluding their law years flaw firms), which may be sized outside of Singapore for one or more of the above Purposes.

- Aurah	R.nuxt.	
Policy incider's Synature / Date & Time	Driver's Signature (fildriver is not the policyholder). Date & Time	Witnessed by Reporting Centre Personnel
Sketch Plan		
	AHE tawards mcE	4
		4
	A- GBH4132K	
	B-6B68328A	

cribe Circumstances of the Acci	dent	t to the second		
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sowed down are	1 Stopped St	4	Action 14 LOIN	18, UE
(6B68308A) (ar	he from behi	nd at a	fort spee	a arx
	env of : Mig.			
I was alone at	the time I		1+.	
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			to the state of th	
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** ₁				
<u> </u>				
Declaration				
We declare the foregoing particulars	are true in every respect.			
1400 000m, 0 are 12. 32. 0 berran			0	
			V	
	1			•
	Days		<u> </u>	
Cultividade of Signature Code of	Drivers Signature (E driver i	not the poscy noticer)	Date Winessed by	Recording (
Policyholder's Signature / Cata &	Drivers Signature (F driver is & Time	; not the policy noticer)	Date Winessed by Personnel	Record

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	052K
/ehicle No.:	GBH4132K
/ehicle to be Exported:	No
ntended Deregistration Date:	27 Apr 2022
/ehicle Make:	TOYOTA
/ehicle Model;	HIACE VAN TURBO SDR MT
Primary Colour:	Silver
Manufacturing Year:	2018
Engine No.:	1KD2796806
Chassis No.:	UTFHT02P600242416
Maximum Power Output:	JTFH102P000242416
Open Market Value:	\$28,138.00
Original Registration Date:	31May 2018
First Registration Date:	31 May 2018
Transfer Count:	0
Actual ARF Paid:	\$1,407,00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount:	\$0.00
HISTORIE DE LO PRESENTATION DE LA COMPANION DE	
COE Expiry Date:	30 May 2028
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$30,600.60
COE Rebate Amount:	\$18,639.00
Total Rebate Amount:	\$18,639.00

The information contained herein is correct as at 27 Apr 2022

Toyota Hiace 3.0 M

Ateleteiskolriels

Similar Research

Photos

Map



WUNDER AUTO ERGO () CHINA TAIPING

RETAIL OF NEW & USED VEHICLES | TRADE-IN | CONSULTANT | INSURANCE | LOAN FINANCING

Price

act, and

lifespani.

10-May-2038

Denieuktion

\$10,910 /yr

Reg Daire View models with similar depre

(6yrs i Sdays COE left)

Mileage

73,000 km (18.4k /yr)

2018

i kioja ja ki liaski

N.A.

Transmission

Manual

Dereg Value

\$18,191 as of today (change)

Fuel Type

Diesel

COE

OMV

\$28,138

Engine Cap

2,982 cc

ARE

\$1,407

Curb Weight

1,700 kg

No. of Owners