	2200 4266/KV
	SSIGNMENT
From: Date:	
Estimated Cost:	TO JULIANON UTILINA
OD UTP JWS / TP RES / OD RES / EVA / INV / MV	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or
To Inspect Vehicle No:	1 (A)
at Workshop m/s Lin Tan	C.C /5
of and a second	Colour M. Black NC: Insured / Std / NI / N
Insured: 261	Sp.Reading 78310 T/Radio: Insured / Std / NI / N.
Policy No.	Eng/No:
Claims No.	C/No: MRUS 3REH10455927
Sum Insured: Excess:	Gen. Cond: Good / Fair / Poor / Burnt
(Client's Record)	Steering: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
	Modi: NII / S/RIm / ST/ A/Rim or
(Policy Condition)	Tyre Size: F: 215/457R17
Pemark: The yeb had common to	R:
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MC OHTSU / PIR / SUMI /
Bal. or Market Value: 470k	TOYO/YOKO or
IDAC Accident Rport: Consistent? : Yes or No	Front D Rear
GIA / PR Seen: Consistent?: Yes or No	R/Bal. mm R/Bal. mm
Est. Repairs: C2 days Res.: Yes or No	L/Bal. mm L/Bal. mm
Lum Sum: 1.B./% 3 Val.: Yes or No	D.O.A. 2/5/22 D.O.I. 20/5/20
- 137 to 101 Ho	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear O/S N/S U/C Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	The III/A I A
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
27/5 8/223.85	
27/5 8/223.85	
27/5 8/223.85	
27/3 8/223.85	
27/5 8/223.85	
27/3 8/223.85	
o/Firro, File Pass to?	ays Of Repair:
e/Timo, File Pass to? : Prell. Report : Final Report R	ays Of Repair:
e/Tima, File Pass to? : Prell. Report : Final Report R	esurvey No. of Trip: Survey Fee:
a/Tima, File Pass to? : Prell. Report : Final Report	Survey Fee: Transportation:
ce/Time, File Pass to? : Prell. Report : Final Report R. Ce/Time, File Return to?	Survey No. of TrIp: Survey Fee: Transportation: Site Insp (\$) _ S - RS SI
ce/Time, File Pass to? : Prell. Report : Final Report R. Ce/Time, File Return to?	Survey Fee: Transportation:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars				
Owner ID Type:	Singapore NRIC			
Owner ID: Vehicle Details	261H			
Vehicle No.:	SDS1238C			
Vehicle to be Exported:	Yes			
Intended Deregistration Date:	04 Apr 2022			
Vehicle Make:	TOYOTA			
Vehicle Model:	COROLLA ALTIS 1.6 CVT			
Primary Colour:	Black			
Manufacturing Year:	2016			
Engine No.:	1ZRY336646			
Chassis No.:	MR053REH104559272			
Maximum Power Output:	90.0 kW (120 bhp)			
Open Market Value:	\$19,990.00			
Original Registration Date:	23 May 2017			
First Registration Date:	23 May 2017			
Transfer Count:	0			
Actual ARF Paid: Intended PARF Rebate Details	\$19,990.00			
PARF Eligibility:	Yes			
PARF Eligibility Expiry Date:	22 May 2027			
PARF Rebate Amount: Intended COE Rebate Details	\$14,992.00			
COE Expiry Date:	22 May 2027			
COE Category:	A - Car up to 1600cc & 97kW (130bhp)			
COE Period(Years):	10			
QP Paid:	\$51,600.00			
COE Rebate Amount:	\$26,479.00			
Total Rebate Amount:	\$41,471.00			
The information contained herein is correct as at 04 Apr 20	022			

SL0V22540003 / LIM TAN MOTOR PTE LTD SLOW223400037 LIM TAN MOTOR TE ETB ENTRY DATE & TIME: 04/05/2022 16:48 (SGT) SUBMITTED BY: Lim Li Choo VERSION: 1 (04/05/2022 16:48 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
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 04/05/2022 16:48 (SGT) Date of Accident 02/05/2022 15:20 (SGT) **Exact Location of Accident** 100 North Buona Vista Rd, Buona Vista, Singapore 139349 JUNCTION OF COMMONWEALTH AVE WEST AVE NEAR Additional Location Information BUOMA VISTRA MRT STATION & THE STAR VISTA Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDS1238C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHAN YIM LENG NRIC No SXXXX261H **Email Address** CHANYIMLENG@GMAIL.COM Mobile Phone No (Phone) +65-98199808 Alternative Phone No (Home) +65-98199808

VEHICLE PARTICULARS

Manufacturer Toyota Model Corolla Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1600

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No Policy Number A29144361AT2 Cover Note Number

DRIVER

Name of Driver HAN ZHENWEI, JEREMIAH NRIC No SXXXX070B Date Of Birth 03/10/1993 Occupation Indoor Date Of Driving Pass 07/02/2014 Driving experience 8 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-97737626 Alt. Phone Number Email Address HZWJEREMIAH@HOTMAIL.COM Address 22 LORONG PUNTONG #08-03 Address complement Postcode 576439 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child 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 Clear Road Surface Dry 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 DRIVER'S FRIEND Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Traffic Police

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

(Phone) +65-65470000

(Fax) +65-65474900

Police Station Address

10 Ubi Avenue 3 Singapore 408865

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

ATTACHMENT(S)

Are accident photos available for attachment?

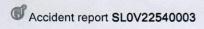
Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLT206B



 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 lodgment 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)
 - (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.(collectively the "Purposes")
 - (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
 - 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.
 - (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
 - the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date

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

& Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

GIARMC Sketch Plan Form_V3

A:	SDS	1238	6	Veh B:	SLT 206 B	Veh C/Others:_	North Buona Vista	Ave West A
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					As	Attached		
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DI	DE CIO	CHMS	TANK	CES OF TH	HE ACCIDENT			
KI	DE CI	COMIS	IMN	0E3 UF 11	IL ACCIDENT			
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0	OTE:	LEASE I	OTE	THAT YOUR	INSURER MAY HAVE	14 DAYS TIME FRAM	E FOR YOU TO SUBMIT AN O	WN DAMAGE CLAIM
				UNDER O	WN POLICY. PLEASE	CHECK YOUR POLICY F	OR MORE INFORMATION.	
]	Own	Dama	ge Cl	laim at Li	n Tan Motor	[V] TP Claim	at Lim Tan Motor	1 Paparting Only
J	Own	Dama	ge Cl	laim at Of	ner worksnop	[] IP Claim	at Other Workshop [1 Keporting Only
h	erehv	autho	riser	Lim Tan	Motor Pte Ltd to	forward my/our f	filed GIA accident repor	t to:-
	ici co y	Ducito	11000					
Οι	ir wor	kshop	via e	mail:				
οι	ir ema	il :						
							708	
	RATIO						40107	
de	clare t	ne foreg	oing	particulars	are true in every re	spect.	(3(D/V))	1 1
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ho	lder's s	ignature	Date	e	Driver's Agnature		Reporting Centre Po	ersonnel's Signature
ne:		g. acult	230		(If driver is not the	policyholder) Date	Name:	
					& Time:		NRIC/FIN No.:	

3rd May 2022

To whom it may concern at MSIG

Dear Sir/Madam.

LETTER OF AUTHORISATION FOR VEHICLE ACCIDENT REPORTING FOR SDS1238C

l, Jeremiah Han (driver of the above vehicle at time of accident) of NRIC S9336070B, hereby authorise my mother, Mdm Chan Yim Leng (the owner of SDS1238C), of NRIC S1352261H, to report the accident that occurred between SDS 1238C and SLT 206B on my behalf.

Details are as follows:

- A) Date and Time of accident: 2 May 2022 at 1520 hours
- B) Vehicle A SDS1238C, a black Toyota Altis driven by me, Jeremiah Han, NRIC S9336070B
- C) Vehicle B SLT206B, a blue Mazda driven by Mr Hon Cheong, NRIC S9137568J
- D) Description of accident I, Jeremiah Han, was driving Vehicle A along a straight main road, North Buona Vista Road which was a dual carriage way. My vehicle came to a stop at the junction of this road and Commonwealth Avenue West Road because the traffic lights had turned red. My vehicle was stationary for a while waiting for the traffic lights to turn green. Suddenly I heard a bang sound and felt a jerk. It turned out that Vehicle B had hit the rear of my car.
- E) Description of damage on Vehicle A The rear of my car was damaged. Both the bumper and the car plate became loose and there was a visible scratch on the bumper.
- F) Description of damage on Vehicle B The front of the car was slightly damaged.
- G) Weather &Traffic condition at time of accident The weather was clear and the road was dry. The road speed limit was 70km/hour. The traffic volume was light. No other pedestrians or cars were involved in this accident.
- H) Agreement with Mr Hon Cheong Verbally, Mr Hon Cheong admitted that it was his fault and that he would pay for all the damages and replacement vehicle needed by me during the time of repair.
- 1) A sketch plan of the accident is attached as Appendix A.

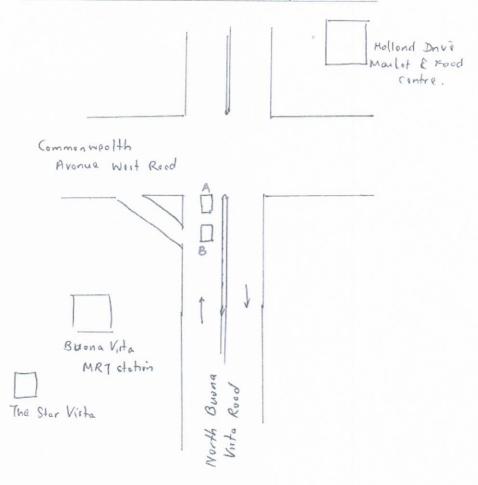
Thank You Yours Sincerely

Dr. Jeremah Han Zhenwei, 22 Lorong Puntong #08-03, Singapore 576439

Mobile number: 97737626

Appendix A

Sketch Plan of accident and location for the accident on 2 May 2022 at 1520 hours



Submitted by Jeremich Han : 2

Not Notherisa Renny B& pains Iday, 8,1223.85

ESTIMATE TO REPAIR

VEHICLE NO. : SDS 1238 C

MAKE

: TOYOTA

MODEL

: COROLLA ATIS 1.6 CVT

YEAR

: 2016

CHASSIS NO

: MR053REH104559272

SURVEYOR NAME

20.05.2022

DATE OF SURVEY

TIME OF SURVEY

DATE

: 5-May-22

DATE OF ACCIDENT: 2-May-22

THIRD PARTY REF : SLT 206 B

/ SOMPO

Parts Description/ Labour No. Type **Unit Price Nett Item Amt** Amount Bulles 540.20 rear bumper 1 pc \$589.50 £ \$232.00 × 2 ps rear bumper retainer \$116.00 **1** \$128.00 2 ps rear bumper bracket \$64.00 M \$35.00 10 ps rear bumper clip \$3.50 Shar \$496.60 1 pe les rear bumper sensor \$1,481.10 less 25% \$370.28 \$1,110.83 \$350.00 22d \$450.00 2cd To putty and spray paint. Labour charges. LKK Auto Consultants hence notify the Repairer of the following:
To resurvey befole/after spray painting
To display damaged patt(s) during resurvey Parts prices are subject to confirmation
 Third party survey is on a "Without Prejudice" basis No illegal modification(s) is allowed Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company Acknowledged by Repaire Signature: Date: TG-ML/-TOTAL \$1,910.83