

ASS. REC. BY:

TGM

REF:

CS/AG122004519/B9C

Shian Chan

ASSIGNMENT

From:

Date:

17/5/2022

Estimated Cost:

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

To Inspect Vehicle No: PC 7337C

at Workshop m/s Deam Autopro

of 60 Jin Ming Dr # 01-14

Insured:

Policy No.

Claims No.

C10015228/JT

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S O/S

Bal. or Market Value:

56,000/-

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

5 days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS WP

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

PC 7337C

Yr Regn:

31/3/2010

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Toyota Coaster Super

C.C

4009

Colour:

White

A/C:

Insured / Std / NI / NA

Sp. Reading

70741

T/Radio:

Insured / Std / NI / NA

Eng/No:

N04CUH11638

C/No:

JT4EP538306000056

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: M / S/Rim / STD A/Rim or

Tyre Size:

F: 215/75/17.5

R: 215/75/17.5

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

TOYO / YOKO or

Falken

Front

Rear

R/Bal.

4

mm

R/Bal.

4

mm

L/Bal.

4

mm

L/Bal.

4

mm

D.O.A.

21/3/2022

D.O.I.

17/5/2022

Survey held at

Deam Autopro

Des. of Damages: F / Rear / O/S / M / U/C / Rooftop or

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

Date / Time

Action / Instruction

Range: 2,000/- - 3,000/-

Recommended COR: LS \$ 2450/-, confirmed (Red \$ 13449.67, 85%)

MV 56,000/-

PV 19,622/-

NV 36,378/-

TGM in Uni
17/5/2022

Date/Time, File Pass to?



Preli. Report

1) 20/5/2022 TGM



Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Rep. Format:

TP

Lump Sum / L.P. / C

2450

➔ Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	308K
Vehicle Details	
Vehicle No.:	PC7337C
Vehicle to be Exported:	Yes
Intended Deregistration Date:	11 May 2022
Vehicle Make:	TOYOTA
Vehicle Model:	COASTER SUPER LWB
Primary Colour:	White
Manufacturing Year:	2009
Engine No.:	N04CUH11638
Chassis No.:	JTGP538306000056
Maximum Power Output:	-
Open Market Value:	\$80,387.00
Original Registration Date:	31 Mar 2010
First Registration Date:	31 Mar 2010
Transfer Count:	3
Actual ARF Paid:	\$4,020.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 May 2029
COE Category:	E - Open Category
COE Period(Years):	10
PQP Paid:	\$27,819.00
COE Rebate Amount:	\$19,622.00
Total Rebate Amount:	\$19,622.00

The information contained herein is correct as at 11 May 2022

OK

MV 56,000/2
PV 19,622/2
NV 36,378/2

TGuan Lin
17/5/2022



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Toyota Coaster

Any Category

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Search

Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

Search Selection

Toyota Coaster

Any

Any

> 10 year(s)
old

Any

Any

Any

Available



**Toyota Coaster (COE till
12/2031)**

\$71,800

\$8,340 /yr

27-Jan-2011

4,009 cc

-

Bus

Available

Fuel Type: Diesel

24 Seater Bus. New Paintwork. Well Maintained Interior Condition. Best Selling 24 Seater Bus! Toyota Well-Known For Its Reliability And Ease Of Maintenance! New 10 Years COE. Selling At A Affordable Price And Low Depreciation. Call Us To Arrange Viewing.

Posted: 04-May-2022

PREMIUM AD



**Toyota Coaster (COE till
02/2031)**

\$75,000

\$8,550 /yr

05-Aug-2011

4,009 cc

168,000 km

Bus

Available

Fuel Type: Diesel

23 Seaters. Servicing Just Done Less Than 1000km Ago.

Posted: 01-May-2022

DIRECT OWNER



Toyota Coaster

\$58,900

N.A

24-Nov-2009

4,009 cc

-

Bus

Available

Fuel Type: Diesel

Rare Unit, CB Plate. 30 Seaters. Trust The Reliable Brand Toyota Coaster. Well Maintained. Call To Enquire More. Viewing Daytime At West Side Or Sin Ming.

Posted: 26-Apr-2022



Toyota Coaster

\$76,800

N.A

09-May-2012

4,009 cc

-

Bus

Available

Fuel Type: Diesel

CB plate Toyota Coaster well maintained interior condition. Best selling 23 seater bus! Toyota well known for its reliability and ease of maintenance! Selling at a affordable price and low depreciation. Call to arrange viewing.

Posted: 15-Apr-2022

DIRECT OWNER

Save this search criteria, to get email alerts whenever a match is found.

Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

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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	23/03/2022 12:38 (SGT)
Date of Accident	21/03/2022 19:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF BEDOK SOUTH AVE 3 & BEDOK SOUTH ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC7337C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	WEI WEI TRANSPORTATION
Company Reg No	5XXXX308K
Email Address	3737WEIWEI@GMAIL.COM
Mobile Phone No	(Phone) +65-87833737
Alternative Phone No	+65-87833737

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Coaster
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Bus
Transmission	Manual
CC	4009

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	DMB1SNW00012962101
Cover Note Number	DMB1SNW00012962101

DRIVER

Name of Driver	LIN SAY KEE
NRIC No	SXXXX327B

Date Of Birth	28/03/1967
Occupation	Outdoor
Date Of Driving Pass	09/07/2014
Driving experience	7 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90853935
Alt. Phone Number	-
Email Address	3737WEIWEI@GMAIL.COM
Address	BLK 39 BEDOK SOUTH ROAD
Address complement	#07-713
Postcode	460039
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Change/cross lane
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)	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?	No
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	SML1199L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ZHENG HUAIAN
NRIC No	SXXXX153H
Contact Number	(Phone) +65-97761199
Address	-

Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

Describe Circumstances of the Accident

On the stated date and time, I was travelling along the stated
 Venue. As the traffic light was red, all vehicles stopped including me.
 I was about the fourth vehicle from the traffic light and was stationary.
 When the traffic light turned green, all front vehicles started to move
 off. I then started to pick up my speed to move off too and
 suddenly vehicle B, cut into my lane abruptly and collided onto my
 vehicle. I wished to state that I was stationary and just about
 to pick up and move off, then about 3 seconds later vehicle B cut in
 and collided onto my vehicle.

Declaration

Whereof the foregoing particulars are true in every respect



Policyholder's Signature / Date & Time

LOY ICSE

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



Witnessed by Reporting Personnel

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 willful misrepresentation or withholding of material facts may allow insurance companies to revoke 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 be 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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police) for the purposes 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 (collectively the "Purposes");
 - (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firm may be 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 be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firm) which may be sited outside of Singapore for one or more of the above Purposes.



Policyholder's Signature / Date & Time
 Sketch Plan

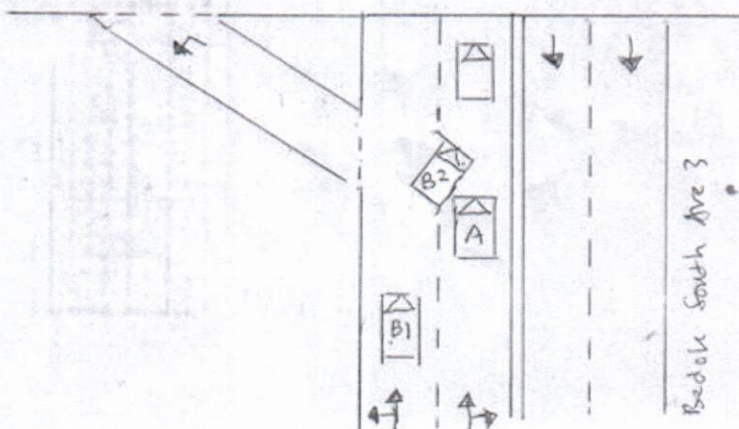
Driver's Signature (if driver is not the policyholder) / Date & Time

Say Kew

Witnessed by Reporting Personnel



Bedok South RD



*Veh A: PC7337C

*Veh B1, B2:
 SML1199L