

ASS. REC. BY:

REP:

ASSIGNMENT

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: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ 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: SLE9520M Yr Regn: 2010 / Sept

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

Truck / Trailer or

Make: Kia Cerato Forte C.C. 1591

Colour: Bronze A/C: Insured / Std / NI / NA

Sp. Reading: _____ T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KNAFW411MAS274862

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/55R16

R: 205/55R16

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

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mm

L/Bal. 06 mm L/Bal. 06 mm

D.O.A. _____ D.O.I. 13/05/22

Survey held at Kang

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Front O/S, u/c.

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

Date / Time	Action / Instruction
	<u>TP AXA</u>
	<u>COE Expiry: 13/09/25</u>
	<u>MV: 30K</u>
	<u>PV: 11.1K</u>
	<u>Nett: 18.9K.</u>

Date/Time, File Pass to?



: Preli. Report

1)



: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Sit's Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tm. Invs (\$ _____)

☐ : _____ (\$ _____)

☐ : S + RS. \$ _____

☐ : Photos

☐ : Other: _____

Report Format: _____

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	11/05/2022 16:45 (SGT)
Date of Accident	11/05/2022 01:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF HOUGANG AVE 10 / BUANGKOK DR
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE9520M
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	BALAKRISHNAN
NRIC No	SXXXX434C
Email Address	BALAKRISH1826@GMAIL.COM
Mobile Phone No	(Phone) +65-93886461
Alternative Phone No	+65-93886461

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
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 car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5120107365-01
Cover Note Number	DRIVO CLASSIC

DRIVER

Name of Driver	PRAVIND RAJ S/O BALAKRISHNAN
NRIC No	TXXXX503B

Date Of Birth	02/08/2001
Occupation	Indoor
Date Of Driving Pass	06/11/2020
Driving experience	1 YEAR AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91016474
Alt. Phone Number	-
Email Address	PRABOII02@GMAIL.COM
Address	BLK 542 HOUGANG AVE 8 #08-1283
Address complement	-
Postcode	530542
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 - Cross Junction
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	Bedok North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002449999
Alt. Police Station Phone No	(Fax) +65-62447258
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

SEE ATTACHED POLICE REPORT NO : T/20220511/2075

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	TO EMAIL TO NTUC INCOME
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC8086P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	PRAVIND RAJ S/O BALAKRISHNAN
Gender	Male
Phone No	(Phone) +65-91016474
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
injured person in which vehicle?	SLE9520M
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	TAXI DRIVER
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SHC8086P
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

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 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.


(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

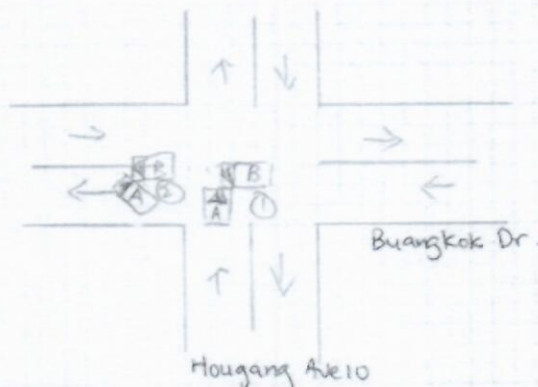
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time

 11/05/2022 4.10pm
Driver's Signature (If driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel

Sketch Plan



A: SLE 9520M
B: SHC 8086P



**SINGAPORE
POLICE FORCE**



T/20220511/2075

1 of 3

Police Station Of Origin:
Bedok N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20220511/2075

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/05/2022 15:45	Vide Report No.:	Station Diary No.: 71
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Informant's Particulars

Name of Informant: PRAVIND RAJ S/O BALAKRISHNAN		Address: APT BLK 542 HOUGANG AVENUE 8 #08-1283 SINGAPORE 530542	
ID Type / ID No.: NRIC NO / T0123503B		Contact No.: Home/Office: Mobile: 91016474	
Nationality: SINGAPORE CITIZEN		Email: praboi02@gmail.com	
Sex: Male	Age: 20	Date of Birth: 02/08/2001	Type of Informant: Driver
Race: Indian		Language:	Institution / School Name:
Occupation: Student		Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/05/2022 01:45	Type of Location: T-Junction
Location: BUANGKOK DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved


Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC8086P	Car	HYUNDAI	AE IONIQ HEV FL 1.6 DCT	Blue		1
SLE9520M	Car	KIA	CERATO FORTE 1.6SX AT ABS D/AB 2WD 4DR	Silver	Seriously Damaged	0


Describe Circumstances of the Accident

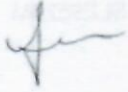
I was driving straight along Hougang Ave 10 with green traffic light in my favour. Suddenly, a taxi (SHC8086P) coming on my right, beat red traffic light & collided to the right portion of my vehicle causing damage. The impact was so great that the taxi went up the kerb. Traffic Police & ambulance came to the scene. The taxi driver & I were conveyed to hospital by ambulance. I have in car camera which captured the scenario.

Declaration

I/we declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time

 11/05/2022 4.10pm
Driver's Signature (If driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20220511/2075

1 of 3

Police Station Of Origin:

Bedok N.P.C

30 Bedok North Road SINGAPORE 489676

Tel No: 1800-2449999

Report No. T/20220511/2075

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLE9520M	NTUC Income Insurance Co-Operative Limited	5120107365-01	14/03/2022	13/03/2023

Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

Driver		ID No.	
Name	PRAVIND RAJ S/O BALAKRISHNAN	ID No.	T0123503B
Related Vehicle	SLE9520M (Car)	Contact No.	91018474
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	11/05/2022	Date Discharge	11/05/2022
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

On 11/5/2022, at about 1.45am, I was driving my vehicle, SLE9520M straight along Hougang Ave 10. When I was at the junction of Hougang Ave 10 and Buangkok Drive, I saw that the traffic light was in my favour as such I continued on. Suddenly, a Comfort Delgro blue taxi (SHC8086P) came from my right, beating the red traffic light and collided with the right portion of my car, causing damage to my car. I also felt pains in my back and my neck. Due to the collision, the taxi went up the kerb from the impact. I wish to state that traffic police came to scene but both me and the taxi driver was conveyed as such I do not have the incident number or the other party's details. I have an in car camera that captured the incident. I was discharged from Sengkang General Hospital and given 4 days MC for my injuries.



**SINGAPORE
POLICE FORCE**



T/20220511/2075

3 of 3

Police Station Of Origin:
Bedok N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20220511/2075

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:

G /

SGT 3 BOEY HUI QI MICHELLE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

11/05/2022 15:45

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMED FERAZ BIN HUSSEIN

Contact No.: 65476206

Classification Of Case:

NP168

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC

Owner ID: 434C

Vehicle Details

Vehicle No.: SLE9520M

Vehicle to be Exported: No

Intended Deregistration Date: 16 May 2022

Vehicle Make: KIA

Vehicle Model: CERATO FORTE 1.6SX AT ABS D/AB 2WD 4DR

Primary Colour: Silver

Manufacturing Year: 2010

Engine No.: G4FCAH222606

Chassis No.: KNAFW411MA5274862

Maximum Power Output: 92.7 kW (124 bhp)

Open Market Value: \$13,951.00

Original Registration Date: 14 Sep 2010

First Registration Date: 14 Sep 2010

Transfer Count: 3

Actual ARF Paid: \$13,951.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 13 Sep 2025

COE Category: A - Car (1600cc & below)

COE Period(Years): 5

PQP Paid: \$16,570.00

COE Rebate Amount: \$11,023.00

Total Rebate Amount: \$11,023.00**Message**

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 16 May 2022

OK

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Add Protect+
for enhanced security at
\$7.99/month



CyberProtect
✓ CyberProtect
✓ VPN
✓ Parental Control
✓ Caller ID



kia cerato forte

Price Range



Depreciation



> 10 year(s) old



Vehicle Type



Search

Advanced Search

Used Car Comparison

--- Comparing 4 Vehicles ---

Kia Cerato Forte 1.6A EX (COE till 06/2025)
Kia Cerato Forte 1.6A SX (COE till 07/2025)
Kia Cerato Forte 1.6A EX (COE till 10/2025)
Kia Cerato Forte 1.6A 11/2025)


Clear All

Add all to Shortlist

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Back to search result

CAR DETAILS

Price	\$29,800	\$30,680	\$30,800	\$35,000
Instalment	N.A.	N.A.	N.A.	N.A.
Registration Date	28-Jun-2010	14-Jul-2010	14-Oct-2010	15-Dec-2010
Manufactured	2010	2010	2010	2010
Mileage	135,000 km	-	120,000 km	-
Transmission	Auto	Auto	Auto	Auto
Engine Cap	1,591 cc	1,591 cc	1,591 cc	1,591 cc
Road Tax	\$886 /yr	\$886 /yr	\$886 /yr	\$886 /yr
Power	92.7 kW (124 bhp)	92.7 kW (124 bhp)	92.7 kW (124 bhp)	92.7 kW (124 bhp)
Curb Weight	1,251 kg	1,251 kg	1,251 kg	1,251 kg
Features	1.6L DOHC 16 Valves Engine, 124Bhp, 5 Speed Automatic With Steptronic, Airbags, ABS, Discs Brakes, Climatic Aircon Controls, Knockdown Rear Seats.	Reliable and responsive 4 cylinder inline 16 valve DOHC engine.	Responsive and powerful 1.6L 4 cylinders inline 16 valves DOHC engine, ABS, airbags, auto headlights, digital climate control, remote control system.	-
Accessories	Airspeed Cold Air Intake, TE37 17 Inch Tims, Bridgestone Tyres (1 Month Old), D2 Coilover (1 Month Old), CF Bonnet	Auto headlights, multi function steering wheel, keyless entry, keyless start.	Sports rims, factory built in player system, fog lamps, electric side mirrors, reverse sensors, multi function steering, knockdown seat.	-
Description	Very Suitable For Daily Driver! Well Maintain Unit! Taken Care By Meticulous Owner! LTA Approve Super Sprint Exhaust With Cert, New ECU + Tuned, Many Wear And Tear Replaced Like Ignition Coil, Spark Plug, Intake Manifold Gasket And Etc. Both Bank/in-house Financing Options Available! Trade In/Consignment Available! WhatsApp/Call Now To Know More About It!	Low fuel consumption and low maintenance cost. No repair needed. New paintwork, Just replaced wear & tear parts. Just drive and go. Flexible loan available at attractive rates. Call or whatsapp to view.	2 owners only! Non PHV unit! 100% accident free! Loan available to suit your needs! High trade in available! Hurry and call our friendly sales adviser for more information before it's sold!	-
COE	\$16,438	\$16,438	\$17,600	\$18,238
OMV	\$11,341	\$14,383	\$10,730	\$13,572
ARF	\$11,341	\$14,383	\$10,730	\$13,572
Depreciation	\$9,560 /yr	\$9,700 /yr	\$9,020 /yr	\$9,870 /yr
No. of Owners	5	3	2	3