ASS. REC. BY: Form	REF CS3 ASM :	22004596	RVC.	336A
,	ASSI	GNMENT		
From: Date	9:	Veh No:	SGA 8350Z	Yr Regn: 2018 , July
Estimated Cost:	·	Type: M.Car / M.Cy	cle / Bus / Van / Lo	orry / Taxi / Prime Mover /-
OD / TP / WS / TP RES / OD RES / EVA /	INV/MV	Truck / Trail		SIR
To Inspect Vehicle No: SGA 8	3502	Make: 164	OTA HARRIGA	LLRANG C.C 1998
at Workshop m/s Light Work	PAINTING		RGY	A/C: Insured / Std / NI / NA
of (60, SIN MINL OR	406-10	Sp.Reading 9	1957	T/Radio: Insured / Std / NI / NA
. Insured:		Eng/No:		* *
Policy No.		C/No: 3	TEKB39H	202001771
Claims No.			Fair / Poor / Burnt	
Sum Insured: Exce	ess:	Steering: Inorder	Jammed / Leaked	Burnt or
(Client's Record)	1	Brake: Inorde /	Jammed / Leaked	Burnt or
Make of Veh:	•	Modi: Nil /sRi	n / STD A/Rim or	
		Tyre Size: F:	238	SSR18
(Policy Condition)		R:	8	••
Remark: The veh had commenced its	N/S O/S	BS / DUN / EXNOV	A/GY/FS/LIZA	/ MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.		TOYO / XOKO or		¥
Bal. or Market Value:		Front		Rear ·
IDAC Accident Rport: Consiste	nt? : Yes or No	R/Bal.	mm	R/Bal. 6 mm
GIA / PR Seen: Consiste	nt?: Yes or No	L/Bal.	mm	L/Bal. mm
Est. Repairs: days Re	s.: Yes or No	D.O.A. 28 04	122 .	D.O.I. 20/05/22
Lum Sum:	al.: Yes or No	Survey held at	LANK	touch DAINTING
CA / REV / REP. / 24 HRS		Des. of Damages :		I N/S I U/C I Rooftop or
	Vehicle: IN/OUT			r the r die r kookep of
Date: Person Contacted:		The U/C / Cha	assis frame / Boo	dy Structure affected due to collision.
Date / Time Action / Instruction	111,			The state of the second of the
BGPAIR LIMIT -	-66K			
ESTIMATE RAWHE	a oceano:	1	(6)	1.
Cally die Mynd	OF KOMILE IN	o or bays	-(3K-4	K)/4 days
		18.		
		1 1		
				
Dale/Time, File Pass to? : Preli. Rep	ort	Days Of Repair:		
1) : Final Rep				
Date/Time, File Return to?		Resurvey No. of	rrip:	Survey Fee:
2)	Add Eas	. []		Transportation:
	Add Fee	. one mop	-)S + RSSI
Repetiformat:		: Interview	(\$) Photos
Lump Sum / LBJ: 75		: Tech. Inv	/s (\$) Others
)	: Weel:end	1 (%	

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 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 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

29/04/2022 14:29 (SGT) Date of Submission 28/04/2022 12:15 (SGT) Date of Accident Exact Location of Accident CTE, Singapore

Additional Location Information along CTE before exit Lorong Chuan

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Tovota

Vehicle Registration Number SGA8350Z

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Tong Shi Eng
NRIC No	SXXXX336A
Email Address	tshieng@yahoo.com
Mobile Phone No	(Phone) +65-97894280
Alternative Phone No	(Home) +65-97894280

VEHICLE PARTICULARS

Manufacturer ...

managaror	Toyota
Model	Harrier
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	2000

INSURANCE COMPANY

AXA Insurance Pte Ltd
Comprehensive
No
GA544596/1

Name of Driver	Siew Miew Ling
NRIC No	 SXXXX015F

f Birth pation Of Driving Pass ring experience Inder Obile Number It. Phone Number Email Address	01/10/1966 Outdoor 28/07/1989 32 YEARS AND 9 MONTHS Male (Phone) +65-97894280 - tshieng@yahoo.com
Address	31 Miltonia Close #11-22 Skies Miltonia
Address complement	
Postcode	768063
If No, Relationship of the Driver with the Insured	No Spouse
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?	New York Control of the Control of t
Number of vehicles involved in the accident	No 2
Was anybody injured in the Accident?	2 No
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	
DETAILS OF FOLICE ACTION	
Was the assident reported to the pulling?	
Was notice of intended Proposition aircra?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	
CIRCUMSTANCES OF ACCIDENT	
refer etteched same t	
refer attached report.	
ATTACUMENTO)	
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
	JN -
Vehicle Registration Number	SMP6285S
Vehicle Manufacturer	Honda
Vehicle Model	Civic
Vehicle Variant	<u>+</u> 1,0,0,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000 € 1,000
Vehicle Colour	The state of the s
Vehicle Category	Private car
Name of Driver	Muhammad Zahari Bin Shak Mohbot Ali
NRIC No	SXXXX034G
Contact Number	-
Address	21

Address

ss complement	
ode	
rance Company Name	
or Of Damage	
tails of property damaged in accident	
o. Of Passenger (Including Driver)	
6. Of rassenger (melading Driver)	



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date	= 29/4/22	To: Owner of Vehic	de Number:	SGA-8	3102
The	following has been advised to you had wone. Please tic	via your workshop, k the applicable box if y	ا برید ک ou had been adv	sed on any of	through their staff,
M	You had been advised by the worksho Fourteen (14) days clause whereby the c	on that in the case that	you wish to sta		é auta autan stara is s
M	You had been advised by the workshop				
M	You had been advised by the workshop. If fire damage and you claim under be no recovery prospect and NCD of fire damage and you are claiming is not guaranteed, and AXA will not	your own insurance, ar will be affected. against the Third Party	y applicable exce		
N	If you had been involved in an accident v please forward the photos of the front a	with a foreign registered and back of the NRIC and	vehicle and wish driving license t	ed to attempt o <u>motor doce</u>	recovery with AXA help,
	You have agreed to let AXA assign a work out to another workshop assigned by AX \$200 off on your Basic Own Damage \$200 as a benefit if your policy has \$	A. In return, you will ge e Excess or		ocess, your vel	lide might be towed
	Additional \$200 on top of existing L	ass of Use Benefit If you	r policy has 50 e	xcess and exist	ing Loss of Use benefit
V 1	here will be delay to your vehicle repai xcept to indent it from overseas. The The es	ir due to the unavailable estimated waiting timated arrival time do	time for th	e spare p	arts to arrive is
y	here will be no cancellation/withdrawal ou wish to cancel/withdraw the claim, y directly to the procurement of the span	you shall bear all costs.	expenses &/or r	er of spare parelated charge	rts have been placed. If s incurred directly &/or
A Yo	ou will be driving the vehicle out despite road worthy.	being advised by the w	orkshop mechan	ic/personnel :	hat the vehicle may not
A Fo	r vehicles that are under warranty with al distributor on any effect to your war	a local distributor, you rranty prior to making t	have been advise his Own Damage	ed by the work claim.	shop to check with your
A Fo	r vehicles below three (3) years old or o ginal parts to repair your vehicle.	under warranty with a l	ocal distributor,	your insuranc	e company will use only
rep	r vehicles above three (3) years old and I be carrying out repairs where any dan placed will be replaced using any combi I/or second-hand parts.	naged part that can be	repaired will be	enaired and a	nw nact that meads in he
You rela	I had been advised by the workshop of ited to the accident.	f the Twelve (12) mont	ns warranty for !	Own Damage i	epairs on workmanship
Sig	ned and acknowledged by:	7			
110	**	~\ \ \ \ \	-	物类型	714-12 通過學
-	ne and algrature of policyholder, thorized driver to either the named ers who are permitted to drive the in	Onvers as per motor	and company Insurance police	stamp (wheny or in the ca	re applicable) se of commercial yehi
ř.,					
Nar	ne and signature of workshop pe	rsonnel including o	ompany stam	p 1 3 7 3	44 74 4
Ltd (C	ompany Reg. No.: 199903512M)		4. 1. 7. 1.		

AXA Insurance Pte Ltd (Company Reg. No.: 1999035) 8 Shenton Way #24-01 AXA Tower Singapore 068811 AXA Customer Centre #01-21/22

((,

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
- 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 Singepore (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)

Lunderstand, 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 (at 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 :
- (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;
- (a) 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 invoice. disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/med
- (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 haurers' lewyers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

Signature (If driver is not the policyholder) / Date Driver

Witnessed by Reporting Centre

Sketch Plan

Time

exit Lor che CTE before

	cribe Circumstances of the Accident	
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Declaration

IWe declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's Signature (# driver is not the policy bleer) / Date & Time

Witnessed by Reporting Centre Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	3364
Vehicle No.:	SGA8350Z
Vehicle to be Exported:	No
Intended Deregistration Date:	23 May 2022
Vehicle Make:	TOYOTA
Vehicle Model:	HARRIER G GRADE
Primary Colour:	Silver
Manufacturing Year:	2018
Engine No.:	8ARZ115851
Chassis No.:	JTEKB3GH20J001771
Maximum Power Output:	170.0 kW (227 bhp)
Open Market Value:	\$35,785,00
Original Registration Date:	31 Jul 2018
First Registration Date:	31 Jul 2018
Transfer Count:	
Actual ARF Paid:	\$42,099.00
PARF Eligibility:	
PARF Eligibility Expiry Date:	Yes The state of t
PARF Rebate Amount:	30 Jul 2028
PARF REDate Amount:	\$31,574.00
COE Expiry Date:	30 Jul 2028
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$34,400.00
COE Rebate Amount:	\$20,968.00
Total Rebate Amount:	\$52,542.00

The information contained herein is correct as at 23 May 2022

Toyota Harrier Turbo 2.0A G

Overview

Financial

Accessories

Similar

Research

Photos

Map

Thong Lee Trading Pte Ltd



Established since 1969

New & Used Cars | Consignment Car | Hire Purchase | Motor Insurance

Price .	\$120,800		
Depreciation 2	\$16,380 /yr View models with similar depre	Reg Date	02-Aug-2018 (6yrs 2mths 9days COE left)
Mileage	76,568 km (20.1k /yr)	Manufactured ①	2018
Road Tax (1)	\$1,210 /yr	Transmission	Auto
Dereg Value	\$48,186 as of today (change)	ОМУ	\$33,308
COE 121	\$31,000	ARF.	\$38,632
Engine Cap	1,998 cc	Power	170.0 kW (227 bhp)
Curb Weight	1,695 kg	No. of Owners	1