

ASS. REC. BY: P. K. K.REF: CS/CTI 22004715/Rty3

1906

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: SNF 642Aat Workshop m/s JC AUTOof 60, JLN Lam King #02-23/24Insured: CTI

Policy No. \_\_\_\_\_

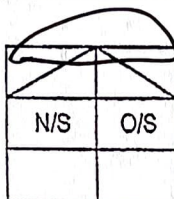
Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection.Bal. or Market Value: 104k

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: SNF 642A Yr Regn: 2022 APRType: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: TOYOTA YARIS CROSS 1.5XB c.c. 1490Colour: BLUE A/C: Insured / Std / NI / NASp. Reading: 1571 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: MXPB103016645Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: Nil / S/Rim / STD A/Rim orTyre Size: F: 205/65R16

R: \_\_\_\_\_

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

TOYO / YOKO or

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 13/05/22 D.O.I. 19/05/22Survey held at JC AUTODes. of Damages Fit Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

REPAIR LIMIT - 45K

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: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)

\_\_\_\_ \$ + RS. \_\_\_\_ SI

Photos

Others

Report Format: \_\_\_\_\_

Lump Sum / I.B.L. (\$) \_\_\_\_\_



# 

60 Jalan Lam Huat #02-23 Carros Centre Singapore 737869

UEN : 53429749L

## 

Vehicle Number : SNE642A  
Make And Model : Toyota Yaris Cross  
Date of Accident : 13 May 2022

S/No	Parts	QTY	Unit Price	List Price
1	Front bumper <i>al</i>	1		\$ 1,187.40
2	Front bumper "LOGO" emblem <i>ne</i>	1		\$ 84.24
3	Front bumper lower ?	1		\$ 377.52
4	Front bumper retainer LH & RH <i>X</i>	2	\$ 92.20	\$ 184.40
5	Front bumper sponge ?	1		\$ 101.88
6	Front reinforcement ?	1		\$ 423.72
7	Front number plate garnish <i>cm</i>	1		\$ 102.36
8	Radiator grille ?	1		\$ 484.20
9	Radiator upper air guide ?	1		\$ 149.88
10	Front headlamp assy LH & RH <i>cm</i>	2	\$ 1,563.31	\$ 3,126.62
11	Front headlamp bracket LH & RH ?	2	\$ 123.48	\$ 246.96
12	Front fender LH & RH <i>repair</i>	2	\$ 910.56	\$ 1,821.12
13	Front fender arch garnish LH & RH ?	2	\$ 267.96	\$ 535.92
14	Front support panel assy ?	1		\$ 395.76
15	Front end panel mounting bracket sub assy LH & RH ?	2	\$ 75.12	\$ 150.24
16	Bonnet <i>lt</i>	1		\$ 1,104.84
17	Bonnet hinge LH & RH <i>X</i>	2	\$ 91.92	\$ 183.84
18	Bonnet insulator <i>X</i>	1		\$ 366.80
19	Bonnet lock <i>X</i>	1		\$ 118.92
20	Front door LH <i>repair</i>	1		

**LKK Auto Consultants** hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(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 Repairer

Signature:

Date:

1 set

1 set

2 set

1 set

repair

\$ 11,146.62

Less 25% \$ 2,786.66

**Total** \$ **8,359.97**

### 

1	Front number plate <i>cm</i>			
2	Front bumper clips <i>ne</i>			
3	Front fender inner shield clips <i>X</i>			
4	Bonnet insulator clips <i>ne</i>			

\$ 50.00 *35*

\$ 60.00 *40*

\$ 100.00 *X*

\$ 60.00 *30*

**Total** \$ **220.00**

### 

To dismantle, replace & panel beating affected parts.

To spray paint on affected areas.

To apply anti-rust on affected areas.

To remove/replace/refit radiator, aircon system & refill gas.

To check wiring.

To perform system diagnostic & reset ECU.

\$ 1,200.00 *600*

\$ 1,200.00 *800*

\$ 200.00 *40*

\$ 200.00 *100 ?*

\$ 50.00 *30*

\$ 300.00 *150*

**Total** \$ **3,150.00**

*Rasul*  
*Hp 90010068*

*6 days*  
*P/p*

*19/05/22 @ 1430*

*Resurvey before paint*

# 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 ..... 14/05/2022 09:48 (SGT)  
Date of Accident ..... 13/05/2022 13:48 (SGT)  
Exact Location of Accident ..... Namly Ave, Singapore  
Additional Location Information ..... NAMELY AVE TOWARDS NAMLY PLACE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SNF642A

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... POH TZE HOW BELVIN  
NRIC No ..... SXXXX190E  
Email Address ..... BELVIN100@HOTMAIL.COM  
Mobile Phone No ..... (Phone) +65-92212005  
Alternative Phone No ..... +65-92212005

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Yaris  
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 ..... 1500

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5127093220  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... POH TZE HOW BELVIN  
NRIC No ..... SXXXX190E



Date Of Birth ..... 24/05/1988  
 Occupation ..... Indoor  
 Date Of Driving Pass ..... 28/02/2020  
 Driving experience ..... 2 YEARS AND 3 MONTHS  
 Gender ..... Male  
 Mobile Number ..... (Phone) +65-92212005  
 Alt. Phone Number ..... +65-92212005  
 Email Address ..... BELVIN100@HOTMAIL.COM  
 Address ..... BLK. 71 BEDOK SOUTH ROAD  
 Address complement ..... #03-252  
 Postcode ..... 460071  
 Is the driver the policyholder? ..... Yes  
 If No, Relationship of the Driver with the Insured ..... -  
 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 ..... Collided into Parked Vehicle  
 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? ..... 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

Was the accident reported to the police? ..... Yes  
 Police Station Name ..... Traffic Police  
 Police Station Phone No ..... (Phone) +65-65470000  
 Alt. Police Station Phone No ..... (Fax) +65-65474900  
 Police Station Address ..... 10 Ubi Avenue 3 Singapore 408865  
 Was notice of intended Prosecution given? ..... No  
 If yes, against whom? ..... -

#### CIRCUMSTANCES OF ACCIDENT

REFER POLICE REPORT NO: T/20220513/7037

#### ATTACHMENT(S)

Are accident photos available for attachment? ..... Yes  
 Was there any video captured by Car Camera? ..... Yes  
 Was there any audio recorded? ..... No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number ..... CB6386B  
 Vehicle Manufacturer ..... -  
 Vehicle Model ..... -  
 Vehicle Variant ..... -  
 Vehicle Colour ..... -  
 Vehicle Category ..... Bus

Name of Driver .....	TAN CHIAA HUAT
NRIC No .....	SXXXX793C
Contact Number .....	(Phone) +65-90627549
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

# INJURED PERSONS DETAILS

## INJURED 1

Name of injured person .....	POH TZE HOW BELVIN
Gender .....	Male
Phone No .....	(Phone) +65-92212005
Address .....	BLK. 71 BEDOK SOUTH ROAD
Address Complement .....	#03-252
Post Code .....	460071
Approximate Age Years Old .....	33
Injuries Sustained .....	-
Injured person in which vehicle? .....	SNF642A
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	No



# 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

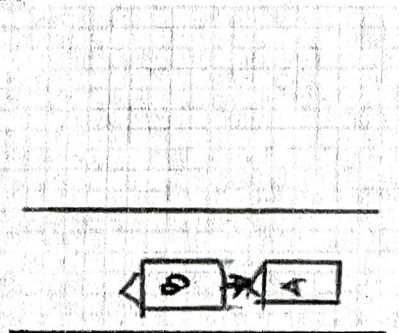
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan



ALONG NAMLY AVENUE

(A) SNF642A  
(B) CB63P6B

## Describe Circumstances of the Accident

On 13<sup>th</sup> May 2022 at about 1.45-4.8pm I was driving towards my workplace at 76 Namly Place, while I was at Namly Ave. A school bus CB 63865 was stopping along the road, I ~~was stop~~ stopped my car approx 1.5 car length away. Suddenly the school bus make a sudden reverse without checking. I requested my handbrake to go over and the bus reversed onto my front car.

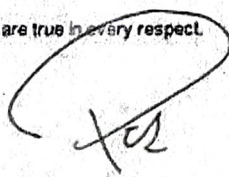
\* Remark: There's quite a number of students in the bus, but I'm not sure how many

## Declaration


We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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

 進友成汽車服務有限公司  
CYS Automobile Services Pte Ltd  
38 Woodlands Industrial Park East 1  
#07-17 Woodlands Industrial Park  
Singapore 737700  
Tel: 8219 2050 (Lines) Fax: 8219 2056

Witnessed by Reporting Centre Personnel



## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	190E

### Vehicle Details

Vehicle No.:	SNF642A
Vehicle to be Exported:	Yes
Intended Deregistration Date:	13 May 2022
Vehicle Make:	TOYOTA
Vehicle Model:	YARIS CROSS 1.5XB CVT
Primary Colour:	Blue
Manufacturing Year:	2022
Engine No.:	M15AY318561
Chassis No.:	MXPB103016645
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$18,425.00
Original Registration Date:	28 Apr 2022
First Registration Date:	28 Apr 2022
Transfer Count:	0
Actual ARF Paid:	\$5,000.00

### Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Apr 2032
PARF Rebate Amount:	\$3,750.00

### Intended COE Rebate Details

COE Expiry Date:	27 Apr 2032
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$68,699.00
COE Rebate Amount:	\$54,959.00
<b>Total Rebate Amount:</b>	<b>\$58,709.00</b>

The information contained herein is correct as at 13 May 2022

OK



# Toyota Yaris Cross 1.5A XB

## Overview

[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

**Price** **\$104,800**

**Depreciation** ⓘ **\$10,340 /yr**  
[View models with similar depre](#)

**Reg Date** **13-Apr-2022**  
(9yrs 10mths 20days COE left)

**Mileage** **66 km**

**Manufactured** ⓘ **2022**

**Road Tax** ⓘ **\$680 /yr**

**Transmission** **Auto**

**Dereg Value** ⓘ **\$75,986 as of today (change)**

**OMV** ⓘ **\$17,051**

**COE** ⓘ **\$72,996**

**ARF** ⓘ **\$5,000**

**Engine Cap** **1,490 cc**

**Power** **88.0 kW (118 bhp)**

**Curb Weight** ⓘ **1,110 kg**

**No. of Owners** ⓘ **1**

**Type of Vehicle** **SUV**