

Ass. FEO. BY:

REF: CS/EGI22004843/Avy3

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: **GBE 982R**Policy No. **DMCG21010406**Claims No. **CDMCG22000965**

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: **SXC8491G** Yr Regn: **2012 June**Type: **M.Car** / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: **Volkswagen New Golf** C.C. **1390**Colour **Black** A/C: Insured / Std / NI / NASp. Reading **63640** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **WVWZZZ1KZCW 324309**Gen. Cond: **Good** / Fair / Poor / BurntSteering: **Inorder** / Jammed / Leaked / Burnt orBrake: **Inorder** / Jammed / Leaked / Burnt orModif: **Nil** / S/Rim / STD A/Rim orTyre 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** mmL/Bal. **06** mm L/Bal. **06** mmD.O.A. **21/5/2022** D.O.I. **24/05/22**Survey held at **Ryder**Des. of Damages: Frt / Rear / O/S **N/S** / U/C / Rooftop or

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

Date / Time	Action / Instruction
	TP Ego
	mv: 15K
	PV: 11.91K
	Nett: 3.1K

30/1/23 Submit ext T/L-mv: \$15,000 (est) Ita: \$11,856.00 nv:\$3144

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

Survey Fee:

Transportation:

2) 30/1/23-typist

Add Fee: ☐ : Site Insp (\$

) S + RS. \$

Report Format:

8 pages, 2 pages 1 & 2 to 10

☐ : Interview (\$

) Photos

☐ : Tech. Insp (\$

) Others

☐ : _____

Accident Reporting Draft

VEHICLE NO: SNC8491G

MODEL: VOLKSWAGEN GOLF

AUTO/MANUAL

DATE OF ACCIDENT	21/5/2022	C.C: 1,390
TIME OF ACCIDENT	1915	HRS AM/PM <u>PM</u>
LOCATION OF ACCIDENT	SUNGEI KADUT DRIVE	
EXACT PURPOSE USE DURING ACCIDENT	EMPLOYMENT/ <u>PRIVATE USE</u> / PRIVATE HIRE	
NAME OF OWNER	LIM JUN WEI WILLIAM	
CONTACT NO.	90606837 (D)	EMAIL: LIMJUNHAOALAN@GMAIL.COM
NRIC	S9101312F	
CLAIM TYPE	OD / <u>THIRD PARTY</u> / REPORTING ONLY 3P	
INSURANCE CO.	NTUC	
TYPE OF COVERAGE	<u>COMPREHENSIVE</u> / THIRD PARTY/ THIRD PARTY FIRE & THEFT	
POLICY NO.		
NAME OF DRIVER	AS ABOVE / IF <u>NO</u> : LIM JUN HAO, ALAN	
NRIC	S9215235I	ANY PASSENGER: 0
DATE OF BIRTH	30/4/1992	
OCCUPATION	OUTDOOR / <u>INDOOR</u>	
DATE OF DRIVING PASS	30/4/2014	
GENJER	<u>MALE</u> / FEMALE	
CONTACT NO.	90606837 (D)	EMAIL: LIMJUNHAOALAN@GMAIL.COM
ADDRESS	APT BLK 26 TECK WHYE LANE #10-180 S(680026)	
DOES DRIVER OWN OTHER VEHICLES	<u>NO</u> / IF YES: REG NO.	
RELATIONSHIP	EMPLOYEE/ IF <u>NO</u> : FAMILY	
WEATHER CONDITION	<u>CLEAR</u> / RAINY/ OTHER: CLEAR	
ROAD SURFACE	<u>DRY</u> / WET/ OTHER: DRY	
ANY INJURIES	NO / IF <u>YES</u> : YES - DRIVER (LIM JUN HAO, ALAN) (M)	
CONTACT NO.		
POLICE REPORT	<u>NO</u> / IF YES:	NOTICE OF INTENDED PROSECUTION GIVEN?
VIDEO RECORDING	<u>NO</u> / YES	<u>NO</u> / IF YES: WHO?
AUDIO RECORDING	<u>NO</u> / YES	SCENE PHOTO(S) <u>NO</u> / YES
VEH.CLE B NO.	GBE982R	ANY PASSENGER:
NAME		
CONTACT NO.		
VEHICLE C NO.	ANY PASSENGER:	
VEHICLE D NO.	ANY PASSENGER:	
VEHICLE E NO.	ANY PASSENGER:	
VEHICLE F NO.	ANY PASSENGER:	
ANY WITNESS		
WITNESS CONTACT NO.		
PARTICULAR WORKSHOP		
MOBILE NO.		
CONTACT PERSON		
FAX NO.		
HAVE YOU BEEN APPROACHED BY UNKNOWN PERSON SOLICITING(S)/ OFFERING ACCIDENT CLAIMS ASSISTANCE?	NO / YES	

Ryder

Auto Pte Ltd

2 Kaki Bukit Ave 2, #02-19/22 @ Kaki Bukit Auto Hub,
Singapore 417921

Email: ryderautoworkshop@gmail.com

Tel: 67418277

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

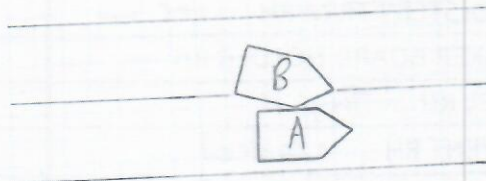
Sketch Plan


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

SUNGEI KADUT DRIVE

Witnessed by Reporting Centre
Personnel

A: SNC8491G
B: GBE982R



Describe Circumstances of the Accident

I WAS TRAVELLING ALONG SUNGEI KADUT DRIVE. I WAS TRAVELLING ON THE RIGHT MOST LANE. MOMENTS LATER, VEHICLE B CUT INTO MY LANE AND COLLIDED WITH THE LEFT PORTION OF MY VEHICLE.

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.



Policyholder's Signature / Date &
Time



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

Witnessed by Reporting Centre
Personnel

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

Owner ID Type: Singapore NRIC
Owner ID: 312F

Vehicle Details

Vehicle No.: SNC8491G
Vehicle to be Exported: No
Intended Deregistration Date: 24 May 2022
Vehicle Make: VOLKSWAGEN
Vehicle Model: NEW GOLF 1.4 AT 5K13G5
Primary Colour: Black
Manufacturing Year: 2012
Engine No.: CAXB50596
Chassis No.: WVWZZZ1KZCW324309
Maximum Power Output: 90.0 kW (120 bhp)
Open Market Value: \$22,664.00
Original Registration Date: 27 Jun 2012
First Registration Date: 27 Jun 2012
Transfer Count: 1
Actual ARF Paid: \$22,664.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 26 Jun 2022
PARF Rebate Amount: \$11,332.00

Intended COE Rebate Details

COE Expiry Date: 26 Jun 2022
COE Category: A - Car (1600cc & below)
COE Period(Years): 10
QP Paid: \$59,003.00
COE Rebate Amount: \$524.00
Total Rebate Amount: \$11,856.00

The information contained herein is correct as at 24 May 2022

OK