

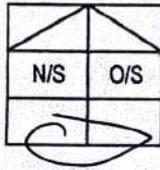
ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SNE 2359K
 at Workshop m/s XIN YUN
 of 1 KAKI MARKET MK 6 #0139
 Insured: CTI
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SNE 2359K Yr Regn: 2022 / FEB
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: TOYOTA RAV4 1.0 XSCVT c.c 996
 Colour: WHITE A/C: Insured / Std / NI / NA
 Sp. Reading: 29414 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: A200A0069263
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 195/65R16
 R: 21

(Policy Condition)

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



BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____

Bal. or Market Value: 116K
 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

Front 6 mm Rear 6 mm
 R/Bal. 6 mm L/Bal. 6 mm
 L/Bal. 6 mm D.O.A. 09/06/22 D.O.I. 13/06/22

Survey held at XIN YUN
 Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or
 The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>REPAIR LIMIT - 66K</u>

ESTIMATE RANGE OF REPAIR (NO. OF DAYS - (5K-6K) / 7 days)

Date/Time, File Pass to? : Prell. Report
 : Final Report

Days Of Repair: _____
 Resurvey No. of Trip: _____

1) Date/Time, File Return to?
 2) _____

Add Fee: : Site Insp (\$)
 : Interview (\$)
 : Tech. Invs (\$)
 : Weekend (\$)

Survey Fee: _____
 Transportation: _____
) S + RS) SI
) Photos
) Others
 TOTAL

Report Format : _____
 Lump Sum / I.B.I: (\$)

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 10/06/2022 12:10 (SGT)
Date of Accident 08/06/2022 16:00 (SGT)
Exact Location of Accident Punggol Central, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNE2359K

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner CARS & COFFEE GEM PTE LTD
Company Reg No 202039041M
Email Address xinyunauto1@gmail.com
Mobile Phone No (Phone) +65-92368166
Alternative Phone No +65-92368166

VEHICLE PARTICULARS

Manufacturer Toyota
Model RAIZE
Variant -
Exact purpose for which vehicle was being used at time of accident Private hire
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private hire
Transmission Auto
CC 996

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMHCSNW00003792200
Cover Note Number -

DRIVER

Name of Driver LEE MENG HUAT
NRIC No S1515213C

Date Of Birth	22/05/1961
Occupation	Outdoor
Date Of Driving Pass	14/09/1984
Driving experience	37 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92368166
Alt. Phone Number	-
Email Address	xinyunauto1@gmail.com
Address	BLK 707 PASIR RIS DR 10
Address complement	#09-167
Postcode	510707
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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?	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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT.

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	PA8260T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver -
 Contact Number -
 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 **LEE MENG HUAT**
 Gender **Male**
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained **SLIGHT**
 Injured person in which vehicle? **SNE2359K**
 Were seat belts worn? **Yes**
 Was this injured conveyed to hospital by ambulance? **No**

SKETCH PLAN

VEHICLE NO:
DATE OF ACCIDENT:

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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.

B. 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' law firms/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' law firms/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 firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



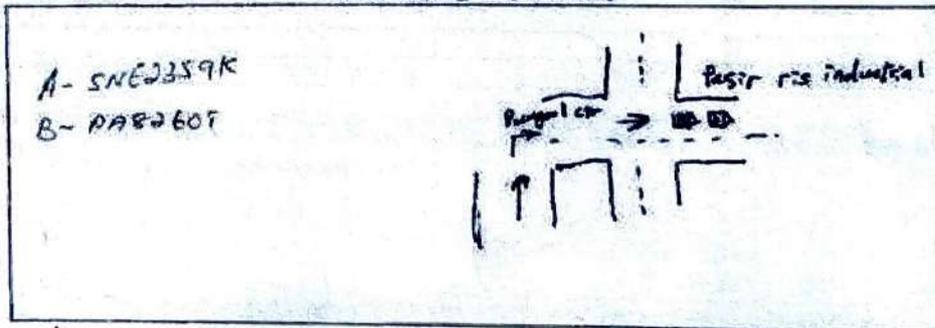
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

PUNGGOL CENTRAL



Describe Circumstances of the Accident VEHICLE NO:

DATE OF ACCIDENT:

I was travelling purpose East and turning right to RSM R3 Industrial
 when B vehicle PAS2607 hit my RSM.

REPORTING ONLY () OWN DAMAGE () THIRD PARTY OWN WORKSHOP ()

Declaration NOTE: DO NOTE THAT YOU MAY HAVE 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.



I declare the foregoing particulars are true in every respect.

[Signature]
 Policyholder's Signature / Date & Time

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

[Signature] 10/06/22
 Witnessed by Reporting Centre Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	041M
Vehicle No.:	SNE2359K
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Jun 2022
Vehicle Make:	TOYOTA
Vehicle Model:	RAIZE 1.0 XS CVT
Primary Colour:	White
Manufacturing Year:	2020
Engine No.:	1KR2701988
Chassis No.:	A200A0069263
Maximum Power Output:	72.0kW (96 bhp)
Open Market Value:	\$19,514.00
Original Registration Date:	25 Feb 2022
First Registration Date:	25 Feb 2022
Transfer Count: -	0
Actual ARF Paid:	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Feb 2032
PARF Rebate Amount:	\$3,750.00
COE Expiry Date:	24 Feb 2032
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$47,001.00
COE Rebate Amount:	\$45,569.00
Total Rebate Amount:	\$49,319.00

The information contained herein is correct as at 14 Jun 2022

OK

Toyota Raize 1.0A XS

[Overview](#)

[Financial](#)

[Accessories](#)

[Similar](#)

[Research](#)

[Photos](#)

[Map](#)

Price

\$116,800

Depreciation

\$11,810 /yr

[View models with similar depre](#)

Reg Date

15-Feb-2022

(9yrs 8mths COE left)

Mileage

77 km

Manufactured 

2021

Road Tax

\$392 /yr

Transmission

Auto

Dereg Value 

\$49,232 as of today (change)

OMV 

\$18,560

COE 

\$47,001

ARF 

\$5,000

Engine Cap

996 cc

No. of Owners 

1

Curb Weight

N.A.

Type of Vehicle

SUV