nneth	ASSIGNMENT
-	
From: Date: Estimated Cost:	Veh No: SK X 8215 Myr Regn: 03, 0
OD TP/WS/TP RES/OD RES/EVA/INV/MV	Type: M.Car, M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
To Inspect Vehicle No:	Truck / Trailer or
at Workshop m/s MRSSive	Make: 104 A1785 c.c 159
of 3%	Colour M. Cray A/C: Insured / Std / NI / NA
Insured:	JUTOUR INSURED I STOT MIT NA
Policy No.	Eng/No:
Claims No.	C/No: MRO 537 EE10614169
Sum Insured: Excess:	Gen. Cond: Good   Fair / Poor / Burnt
(Client's Record)	Steering: Inorder/ Jammed / Leaked / Burnt or
Make of Veh:	Brake: Inocder / Jammed / Leaked / Burnt or
	Modi: NII / S/R/m / STD A/Rim or
(Policy Condition)	Tyre Size: 4: 406/100 195/85R15
emark: The veh had commenced its N/S 0/3	R: Don
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
al. or Market Value: 1818k	TOYO/YOKO or
AC Accident Rport: Consistent? : Yes or No	Front Rear
A / PR Seen: Consistent?: Yes or No	7 mm Robat. 6 mm
t. Repairs: 3-6 days Res.: Yes or No	L/Bal. 3 mm L/Bal. 6 mm
m Sum: 20 % 3 Val.: Yes or No	10166
and the a	Survey held at
7 REV / REP. / 24 HRS 03/24 Vehicle: IN / OU	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
te: Pérson Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
ate / Time   Action / Instruction	The state of the s
2916 / 1 km & 41501 Col	
/	Red, 3842, 50, 48%)
	5 647 3617 - 67 10 [6]
	Days Of Repair: 5
ine, File Pass to?  : Prell. Report  : Final Report	Days Of Repair: 5  Resurvey No. of Trip: Survey Fee:
irne, File Pass to?  : Prell. Report  : Final Report  irne, File Return to?	Days Of Repair: 5  Resurvey No. of Trip: Survey Fee:
Fine, File Pass to?  : Prell. Report : Final Report  Time, File Return to?  Add Fee	Days Of Repair: 5  Resurvey No. of Trip: Survey Fee: Transportation:  Site Insp (\$ ) _ S - RS _ SI
Firme, File Pass to?  : Preli. Report  : Final Report  Fine, File Return to?	Days Of Repair: 5  Resurvey No. of Trip: Survey Fee:



## SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 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.

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 12:53 (SGT)
Date of Accident	09/06/2022 18:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	T junction of TELOK BLANGAH ROAD / BUKIT CHERMIN ROAD
Country/State of Loss	Singapore

### **DETAILS OF OWN VEHICLE**

SKX8215M

INSURED/POLICYHOLDER		
Is company?	No	

Name Of Registered Owner SIM CHOOI PIOH NRIC No S7581348A Email Address MAGICCLOUD56@GMAIL.COM Mobile Phone No (Phone) +65-91453603 Alternative Phone No +65-91453603

## VEHICLE PARTICULARS

Vehicle Registration Number

Manufacturer	Toyota
Model	Corolla
Variant	Œ
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	1600

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5108330726-02
Cover Note Number	-

#### DRIVER

Name of Driver	SIM CHOOL PIOH
NRIC No	S7581348A

Date Of Birth	25/11/1975
Occupation	Outdoor
Date Of Driving Pass	04/02/2002
Driving experience	20 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91453603
Alt. Phone Number	+65-91453603
Email Address	MAGICCLOUD56@GMAIL.COM
Address	BLK 745 WOODLAND CIRCLE #03-740
Address complement	
Postcode	730745
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
PASSENGER 1	
Name	THOMAS
Gender	Male
PASSENGER 2	
Name	UNKNOWN
Gender	Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given?	No No
If yes, against whom?	No -
CIRCUMSTANCES OF ACCIDENT	
I WAS DRIVING MY VEHICLE (SKX8215M) STATIONARY AT THE WHEN (SKR174G) WHO TRIED TO TURN ONTO BUKIT CHERICAUSE (SKR174G) TO SPIN AND HIT ONTO MY STATIONARY	MIN ROAD , HIT ONTO A TAXI (SHB2622L) AND THE IMPACT
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No
Program of the state of the st	90000

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB2622L
Vehicle Manufacturer	
Vehicle Model	·
Vehicle Variant	×
Vehicle Colour	:×
Vehicle Category	Taxi
Name of Driver	POON JWEE YEOW
NRIC No	S1114739I
Contact Number	(Phone) +65-97778298
Address	-
Address complement	
Postcode	-
Insurance Company Name	
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKR174G
Vehicle Manufacturer	=
Vehicle Model	-
Vehicle Variant	<u>-</u> -
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	LEE CHEE YENG
NRIC No	S0336409G
Contact Number	(Phone) +65-96153608
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person	SIM CHOOL PIOH
Gender	Female
Phone No	(Phone) +65-91453603
Address	-
Address Complement	<b>*</b>
Post Code	-
Approximate Age Years Old	: <b>.</b>
Injuries Sustained	
Injured person in which vehicle?	SKX8215M
Were seat belts worn?	Yes
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.
- 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.
- 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.
- 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.
- By the lodgment 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)

l 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:
  - 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.
- (d) my Personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 10/6/2022 1230

Oriver's Signature

(if driver is not the policyholder)

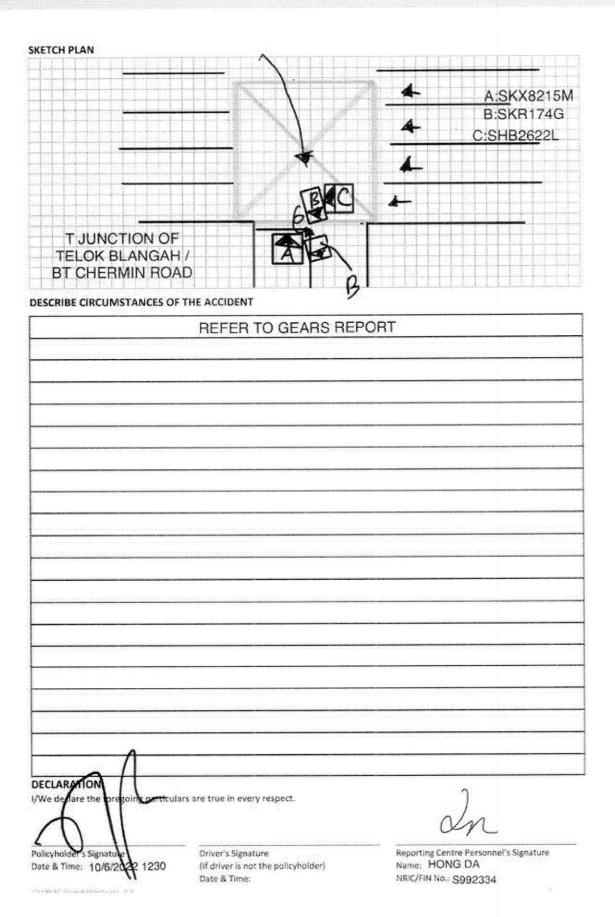
Date & Time:

Reporting Centre Personnel's Signature

Name: HONG DA

NRIC/FIN No.: \$992334

Glassett, Sketchbankorm, VS



## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	348A	
Vehicle No.:	SKX8215M	
Vehicle to be Exported:	Yes	
Intended Deregistration Date:	15 Jun 2022	
Vehicle Make:	TOYOTA	
Vehicle Model:	COROLLA ALTIS 1.6 AUTO	
Primary Colour:	Grey	
Manufacturing Year:	2009	
Engine No.:	3ZZ4870140	
Chassis No.:	MR053ZEE106141692	
Maximum Power Output:	80.0 kW (107 bhp)	
Open Market Value:	\$16,990.00	
Original Registration Date:	11 Mar 2009	
First Registration Date:	11 Mar 2009	
Transfer Count:	3	
Actual ARF Paid: Intended PARF Rebate Details	\$16,990.00	
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:	-	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	10 Mar 2024	
COE Category:	A - Car (1600cc & below)	
COE Period(Years):	5	
PQP Paid:	\$12,763.00	
COE Rebate Amount:	\$4,425.00	
Total Rebate Amount: Message	\$4,425.00	

The information contained herein is correct as at 14 Jun 2022

reaches its statutory lifespan (if applicable), whichever is earlier.

OK

# Massive Trading & Auto

Blk 5034 #01-405 Ang Mo Kio Industrial Pk 2 Singapore 569541 H/91082728

Sim Chooi Pioh Blk 745 Woodlands Circle #03-740 Singapore 730745

Vehicle No : SKX 8215 M

Make

: Toyota Altis

Year

: 2009

Fax: 64816131

Not lother 11 Sup 8415 ch Bearing After Pains 5 day

\$40.00 %

\$5,132.50

balance c/f

Qt	у	Description	Un	it Price	Amount
Es	timate	e Cost Of Repair			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	pc p	Front o/s fender Front o/s fender innershield Front o/s fender emblem Front o/s door Front o/s door protector Front o/s door view mirror Front o/s door view mirror Front o/s door glass outer moudling Front o/s inner lock Front o/s door outer handle Front o/s door inner trim board Front o/s door glass regulator Front o/s door glass regulator Front o/s door rubber Front o/s windscreen pillar Front o/s windscreen pillar Front o/s door checker O/S rocker panel garnish Front windscreen glass moulding Rear o/s door protector	I care Ry	\$145.70 pm	\$497.10 \$175.20 X \$40.10 X \$1,075.10 \$187.20 \$187.20 \$155.30 X \$325.10 X \$165.20 X \$65.70 \$195.20 X \$65.70 X \$195.20 X \$675.80 X \$205.30 X \$205.30 X \$205.30 X \$105.10 X \$105.10 X \$105.10 X \$176.20 \$1,741.55
					\$5,224.65

## S Nett

1 pc Front windscreen sealant 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:

## SKX 8215 M

balance b/f \$5,132.50 Labour Charges \$1,000.00 7001 Remove/renew the above parts including knocking and cutting etc. \$1,000.00 800 To putty & spray paint front & rear accident affected portion. Check/reconnect wiring. \$40.00 201 To spray anti rust on accident affected portion. \$150.00 601 ۶120.00 Remove/refit front windscreen to facilitate repair. \$200.00 69 Remove/refit roof lining to facilitate repair on rear fender Remove/refit front dashboard to facilitate repair. Total