

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/FC/22006368/Ucy3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SKP822/L

at Workshop m/s Jemur

of

Insured: GBT/96965

Policy No. _____

Claims No. _____

Sum Insured: _____

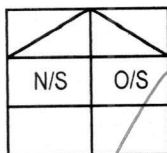
Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: \$49k

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: 2 Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: LTA 834160

Veh No: SKP822/L

Yr Regn: 15/10/14

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or CA/

Make: KIA Sorento

c.c. 2359

Colour: Brown

A/C: Insured / Std / NI / NA

Sp. Reading: 78893

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KNAKU816ME*5575976

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 235/55 R18

R: _____

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

TOYO / YOKO or

Front 6

Rear 6

R/Bal. 6 mm

R/Bal. 6 mm

L/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 29/06/22

D.O.I. 5/7/22

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear O/S.

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

Date / Time

Action / Instruction

8/7/22 4/5 \$4000 informed AH Chuan (Red. 6023.91, 60%)

Date/Time, File Pass to?

☐

Preli. Report

☒

Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: _____

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Invs (\$)

☐

Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format : TP

Lump Sum / I.B.I: (\$ 4000)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	752C
Vehicle Details	
Vehicle No.:	SKP8221L
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Jul 2022
Vehicle Make:	KIA
Vehicle Model:	SORENTO 2.4(A) SUNROOF
Primary Colour:	Brown
Manufacturing Year:	2014
Engine No.:	G4KJEH749046
Chassis No.:	KNAKU816ME5575976
Maximum Power Output:	141.0 kW (189 bhp)
Open Market Value:	\$28,784.00
Original Registration Date:	15 Oct 2014
First Registration Date:	15 Oct 2014
Transfer Count:	2
Actual ARF Paid:	\$32,298.00 16149
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Oct 2024
PARF Rebate Amount:	\$19,378.00
Intended COE Rebate Details	
COE Expiry Date:	14 Oct 2024
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$65,002.00
COE Rebate Amount:	\$14,782.00
Total Rebate Amount:	\$34,160.00

The information contained herein is correct as at 05 Jul 2022

OK



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Downpayment. PHV/Z10
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2 vehicles



Kia Sorento

Any Category

Advanced Search



Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Kia Sorento		Any	Any	2014	Any	Any	Any	Available
	Kia Sorento	2.4A GDi Sunroof	\$46,800	\$17,810 /yr	01-Apr-2014	2,359 cc	75,000 km	SUV	Available
									Posted: 28-Jun-2022
	Kia Sorento	2.4A SX Sunroof	\$53,800	\$18,580 /yr	22-Jul-2014	2,359 cc	-	SUV	Available
									7 seater SUV Panoramic twin Sunroof. Multiple loans available to suit your needs. High trade in available. Hurry and call for viewing! Best... Posted: 20-Jun-2022

Save this search criteria, to get email alerts whenever a match is found.

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
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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	29/06/2022 16:52 (SGT)
Reported by	Both
Date of Accident	29/06/2022 13:10 (SGT)
Exact Location of Accident	Commonwealth Ave, Singapore
Additional Location Information	COMMONWEALTH AVE WEST SLIP ROAD INTO CLEMENTI AVE 4
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP8221L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CAROL VAN BEEK- ANGUS
NRIC No	S7787760F
Email Address	CAROLANGUS@GMAIL.COM
Mobile Phone No	(Phone) +65-98580927
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Sorento
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	2400

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070102339-01

DRIVER

Name of Driver	CAROL VAN BEEK- ANGUS
NRIC No	S7787760F
Date Of Birth	03/08/1977

Occupation	Indoor
Date Of Driving Pass	20/03/2012
Driving experience	10 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-98580927
Alt. Phone Number	-
Email Address	CAROLANGUS@GMAIL.COM
Address	BLK12 LEEDON HEIGHT #01-15
Address complement	-
Postcode	267935
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	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?	No
Was any injured conveyed to hospital by ambulance?	-
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	OLIVER
Gender	Female

PASSENGER 2

Name	ALEXANDER
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBH9696S
Vehicle Manufacturer	Toyota
Vehicle Model	Hiace
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	HANITA
Contact Number	(Phone) +65-90212426
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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.
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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

CLEMENT I AVE 4



Commonwealth Ave West

A: 5P

A: SKP8221L

B: GBH9696S

Describe Circumstances of the Accident

Turning from Commonwealth Avenue West into
 slip lane of Clementi Ave 4, I stopped at
 the white line. Saw two cars coming.
 Waited for the two cars to pass, then I
 accelerate to move. As I was A
 accelerating the car behind crashed into
 my car.

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

Witnessed by Reporting Centre
 Personnel

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

利民达摩多



Jementah Motor Works

Blk 14 Defu Lane 10 #01-406
Singapore 539195
H/P : 9299 6636 Fax : 6285 7054

Acknowledged by Repairer

Signature:

Date:

Date :

04-Jul-22

Not Allowed
rel
5/7/22
1/5 #4000
4 days.
Zhe sha Ate ay-
marcus
90996608

Estimated repair cost of SKP 8221 L KIA SORENTO

Qty	Description	Amt S(\$)
	<u>Nett List Items</u>	
1	Rear windscreen moulding <i>nei</i>	\$ 110.00
1	Rear tailgate <i>nei</i>	\$ 1,086.00
1	Rear tailgate lamp <i>o/s cga</i>	\$ 425.00
1	Rear tailgate inner lock <i>nei</i>	\$ 143.60
1	Rear tailgate logo <i>nei</i>	\$ 70.00
1	Rear tailgate weatherstrip <i>nei</i>	\$ 121.20
1	Rear tailgate "SORENTO" emblem <i>nei</i>	\$ 75.00
1	Rear tailgate "C&C" emblem <i>nei</i>	\$ 48.80
1	Rear tailgate "CDI" emblem <i>nei</i>	\$ 48.80
1	Rear taillamp -RH <i>cga</i>	\$ 488.00
1	Rear end panel <i>R</i>	\$ 695.00
1	Rear end panel inner garnish <i>nei</i>	\$ 142.60
1	Rear bumper <i>nei</i>	\$ 985.00
1	Rear bumper reflector <i>o/s cga</i>	\$ 82.00
1	Rear bumper reinforcement <i>nei</i>	\$ 345.00
2	Rear bumper side retainer -RH <i>nei</i>	\$ 84.40
4	Rear bumper PDC sensors <i>shred</i>	\$ 1,272.00
1	Rear bumper tow hook cover <i>nei</i>	\$ 48.00
1	Rear fender -RH <i>R</i>	\$ 889.50
		\$ 7,159.90
	Less 10%	\$ 715.99
		\$ 6,443.91

Special Nett Items

1	Rear windscreen sealant <i>nei</i>	\$ 80.00
1	Rear bumper clip (1 set) <i>nei</i>	\$ 80.00
		\$ 160.00

S/N

LABOUR CHARGES

1	To remove, replaced damaged lamps and check up rear wiring.	\$ 80.00
2	To remove and refit inner garnishes.	\$ 180.00
3	To remove and refit rear reverse sensor.	\$ 150.00
4	To transfer rear tailgate mechanism and wiring assembly.	\$ 80.00
5	To remove and refit rear windscreen glass.	\$ 180.00
6	To apply undercoating.	\$ 150.00
7	Panel beating.	\$ 1,400.00
8	To re-spray painting on the affected areas.	\$ 1,200.00
		\$ 3,420.00

Grand Total :

\$ 10,023.91

P-3788-60
103%
3409.74
90
1560
5059.74