

(08/11/16) wef  
ASS. REC. BY: Ram

REF: CC4/LPC22006725/Rga3

B  
935C

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: SLV 4453S  
at Workshop m/s MY CAR CONSULTANT  
of 60, JLN LAMHAT #05-21 @ CARROS  
Insured: LPC

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

Claim No. \_\_\_\_\_

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: 82K

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: SLV 4453S Yr Regn: 2017 1066

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

Truck / Trailer or

Make: TOYOTA PRIUS HYBRID 1.8E A c.c 1797

Colour: BLUE A/C: Insured / Std / NI / NA

Sp. Reading: 143321 T/Radio: Insured / Std / NI / NA

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

C/No: ZVWS16037518

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: 195/65R15  
R: \_\_\_\_\_

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

TOYO / YOKO or

Front		Rear	
R/Bal. <u>6</u> mm		R/Bal. <u>6</u> mm	
L/Bal. <u>6</u> mm		L/Bal. <u>6</u> mm	

D.O.A. 13/07/22 D.O.I. 18/07/22

Survey held at MY CAR CONSULTANT

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or  
o/s Frt

The UIC / Chassis frame / Body Structure affected due to collision.

Date/Time \_\_\_\_\_ Action / Instruction  
REPAIR LIMIT - 52K

Date/Time, File Pass to?

- : Preli. Report
- : Final Report

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

1) Date/Time, File Return to?

Transportation: \_\_\_\_\_

2) \_\_\_\_\_

Add Fee:  : Site Insp (\$ \_\_\_\_\_) ) S + RS SI

: Interview (\$ \_\_\_\_\_) ) Photos

: Tech. Invs (\$ \_\_\_\_\_) ) Others

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



# MY CAR CONSULTANT PTE LTD

Reg no.: 201605878Z  
 Address: 60 JALAN LAM HUAT, CARROS CENTRE 05-68 S737896  
 HP: 98888885

## Estimation

Date: 18/7/2022  
 Vehicle: SNB3504S SLV4453S  
 Make / Model: TOYOTA PRIUS  
 Chassis No:

No.	Description	Unit	Unit Price	Amount
Parts Replacement:				
1	FRONT DOOR RH <i>bt/</i>	1	\$ 1,359.00	\$ 1,359.00
2	FRONT DOOR INNER LOCK RH <i>X</i>	1	\$ 312.00	\$ 312.00
3	FRONT DOOR REGULATOR RH <i>? X</i>	1	\$ 587.00	\$ 587.00
4	FRONT DOOR MOTOR RH <i>? X</i>	1	\$ 698.00	\$ 698.00
5	FRONT DOOR FRAME GARNISH RH <i>X</i>	1	\$ 159.00	\$ 159.00
6	FRONT DOOR FRAME BLACK STICKER RH <i>u/</i>	1	\$ 89.00	\$ 89.00
7	FRONT DOOR OUTER MOULDING RH <i>X</i>	1	\$ 198.00	\$ 198.00
8	SIDE MIRROR RH <i>? X</i>	1	\$ 681.00	\$ 681.00
9	REAR DOOR RH <i>repair</i>	1	\$ 1,258.00	\$ 1,258.00
TOTAL PART				\$ 5,341.00
LIST DOWN				25%
				\$ 1,335.25
AFTER LIST DOWN				\$ 4,005.75
SPECIAL NETT				
1	FRONT DOOR INNER TRIM CLIPS <i>u/</i>	1	\$ 50.00	\$ 50.00
TOTAL AMOUNT				\$ 200.00
LABOUR				
1	CHECK WIRING <i>X</i>	1	\$ 100.00	\$ 100.00
2	REMOVE AND REPAIR REAR DOOR MECHANISM <i>X</i>	1	\$ 150.00	\$ 150.00
3	REMOVE AND REPAIR FRONT DOOR GLASS	1	\$ 150.00	\$ 150.00
4	REMOVE AND REPAIR SIDE MIRROR RH	1	\$ 100.00	\$ 100.00
5	REMOVE AND REPAIR FRONT DOOR MECHANISM	1	\$ 150.00	\$ 150.00
6	PANEL BEAT EFFECTED AREAS	1	\$ 500.00	\$ 500.00
7	REPAIR EFFECTED AREAS	1	\$ 500.00	\$ 500.00
TOTAL AMOUNT				\$ 1,650.00
Parts Replacement Amount				\$ 4,200.00
Total Amount for Labour				\$ 1,650.00
Total Amount				\$ 5,850.00

**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:

1218.20  
 X  
 X  
 X  
 X  
 60  
 X  
 X  
 R  
 1278.20  
 25%  
 958.65  
 30  
 30  
 X  
 X  
 60  
 60  
 60  
 300  
 450  
 930  
 958.65  
 30.00  
 930.00  
 1918.15  
 20%  
 1534.92  
 HS- \$1,500  
 RPH  
 Hp 9000688  
 4 days  
 4/3  
 18/07/22 @ 1600  
 Resy after repair

# 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	14/07/2022 20:16 (SGT)
Reported by	Driver
Date of Accident	13/07/2022 20:00 (SGT)
Exact Location of Accident	Keppel Bay View, Singapore 098417
Additional Location Information	Keppel Reflection Condo
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV4453S
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	933 Motoring
Company Reg No	5XXXX935C
Email Address	reporting@mycar.sg
Mobile Phone No	(Phone) +65-85188158
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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	1797

### INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D22MFL0002743

### DRIVER

Name of Driver	Heng Meng Wee, Stanley
NRIC No	SXXXX851J
Date Of Birth	05/02/1982
Occupation	Outdoor

Date Of Driving Pass	09/02/2001
Driving experience	21 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-85188158
Alt. Phone Number	-
Email Address	stanleyhmw@gmail.com
Address	Blk 890B Tampines Avenue 1
Address complement	#09-331
Postcode	522890
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 - Change/cross lane
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

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 to police report - T/20220714/7037

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	GBD7889L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	-
Name of Driver	Commercial vehicle
NRIC No	Kim Jo Heong
Contact Number	SXXXX795D
Address	(Phone) +65-82007824
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	Heng Meng Wee, Stanley
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	Body
Injured person in which vehicle?	SLV4453S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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 making 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

Witnessed by Reporting Centre Personnel



A: SLV 44535  
 B: GBD 289L

**Describe Circumstances of the Accident**

Refer Police Report.

**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

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Business
Owner ID:	935C
Vehicle No.:	SLV44535
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Oct 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS HYBRID 1.8E AUTO
Primary Colour:	Black
Manufacturing Year:	2016
Engine No.:	2ZRR935605
Chassis No.:	ZVW516037518
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$23,474.00
Original Registration Date:	29 Dec 2017
First Registration Date:	29 Dec 2017
Transfer Count:	3
Actual ARF Paid:	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Dec 2027
PARF Rebate Amount:	\$3,750.00
COE Expiry Date:	28 Dec 2027
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$48,011.00
COE Rebate Amount:	\$24,473.00
Total Rebate Amount:	\$28,223.00

The information contained herein is correct as at 13 Oct 2022

OK