ASS. RECABY: STEVE (S/CTIV)	00691912915
ASSI	COMMENT CONTRACTOR CON
From: Date:	Veh No: GBG 3895G Yr Regn: 91/1/17
Eslimated Cost:	Type: M.Car/ M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD (TP) WS (TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: 1101 DOBTO c.c 1598
at Warkshap m/s	Colour (1/A) A/C: Insured / Std / NI / NA
Michigan Resident Assessment Construction of the Construction of t	Sp.Reading // T/Radio: Insured Std NI / NA
Insured:	Eng/No:
Policy No.	CNO: 27126300006699612
Claims No.	Gen. Cond: Good / Fall / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Clien's Record)	Brake: Ingreder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / SKRIm / STD A/Rim or
nado el TVIII	Tyre Size: F: 185/60/15
(Deller Condition)	R: //
(Policy Condition) Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM! /
repair at the time of inspection.	TOYO!YOKO or
Bal, or Market Value:	Front Rear
IDAC Accident Rport Consistent? : Yes or No	R/Bal. / mm R/Bal. / mm
GIA / PR Seen: Consistent? : Yes or No	UBal. U mm UBal. U 10 100 mm
Est Repairs: days Res.: Yes or No	D.O.A. 19/1/12 D.O.I. 1/8/1/2
Lum Sum: % · 3 Val.: Yes or No	Survey held at Wah H Cha
Editi Cont.	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
MIV- VI 6 K	
	· · · · · · · · · · · · · · · · · · ·
DalerTime, File Pass to? : Preli. Report	Days Of Repair:
A	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
Adde	
. 2)	: Interview (\$) Photos
Report Formal:	: Tech, Invs (\$) Ohers
Lump Sum / L.C.F. (\$.)	: Weelland (\$
writing within the start y	TOTAL
•	
i de la	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle Vehicle Owner Particulars Company Owner ID Type: 339R Owner ID: Vehicle Details GBG3825G Vehicle No.: Yes Vehicle to be Exported: 19 Jul 2022 Intended Deregistration Date: FIAT Vehicle Make: DOBLO CARGO MAXI 1.6 MTJ 6MT GLAZE Vehicle Model: Grey Primary Colour: 2017 Manufacturing Year: 198A30008093574 Engine No.: ZFA26300006G92612 Chassis No.: Maximum Power Output: \$18,776.00 Open Market Value: 27 Jul 2017 Original Registration Date: 27 Jul 2017 First Registration Date: Transfer Count: \$939.00 Actual ARF Paid: Intended PARF Rebate Details No PARF Eligibility: PARF Eligibility Expiry Date: \$0.00 PARF Rebate Amount: Intended COE Rebate Details 26 Jul 2027 COE Expiry Date: C - Goods Vehicle & Bus COE Category: 10 COE Period(Years): \$36,879.00 QP Paid: \$18,508.00 COE Rebate Amount: \$18,508.00 Total Rebate Amount:

The information contained herein is correct as at 19 Jul 2022



Wah Hong Motors & Credit Pte Ltd

Enterprise Hub 38 Toh Guan Road East #01-57 S(608581)
Email: motor@wahhong.sg
(199806235M)

Vehicle No.

GBG3825G FIAT DOBLO CARGO MAXI 1.6

Page No. 1

QTY	DESCRIPTION	CONDITION	REPAIRER'S ESTIMATE(S\$)	SURVEYOR'S ADJUSTMENT
1 1 1	PARTS (LIST ITEMS) Rear door LH		2640.00 154.00 2090.00 154.00 440.00	
1 1 1 1 1 1 2 1 1 1	Rear door car plate base garnish LH / CRY Rear door logo base garnish RH / CNJ Rear door RH emblem "DOBLO max" / NC Rear door RH emblem "10S multijet2" / NC Rear door LH emblem "PROFESSIONAL" / NC Rear door LH logo badge "Fiat" / NC Rear bumper / CRY Rear bumper side retainer LH/RH @2*66 Rear reinforcement / End panel / End panel top garnish / Boot lid weatherstrip / CRY		420.00 264.00 308.00 330.00 264.00 616.00 132.00 484.00 1056.00 660.00 440.00	
1	Rear bumper reflector RH / JR	Part Items Total:	39.60 10491.60 -10% -1049.16 9442.44	
1 1 1 1 1 1	Rear bumper clips Rear carplate with holder Rear reverse sensor Rear door windscreen sealant LH Rear door windscreen sealant RH 6 Pax sticker 70km/H sticker End panel sealant		35.00 35.00 200.00 60.00 60.00 25.00 25.00 60.00	
		SN Items Total: Total Parts	500.00 9942.44	



Wah Hong Motors & Credit Pte Ltd

Enterprise Hub 38 Toh Guan Road East #01-57 5(608581)

Email: motor@wahhong.sg (199806235M)

Vehicle No. GBG3825G FIAT DOBLO CARGO MAXI 1.6

Page No. 2

s/N	DESCRIPTION	REPAIRER'S ESTIMATE (5\$)	SURVEYOR'S ADJUSTMENT
1	LABOUR To remove the affected parts & fittings to commence repairs; panel beat & reshape the affected areas and replace the damaged parts and components	1200.00	800
2	To supply paint materials, expandable items & putty, respray paint on parts replaced & repaired	1000.00	800
3	To remove/refix/replace wiring system at accident damaged area and check for all electrical proper function	90.00	30
4	To perform anti-rust treatment on affected areas	90.00	30
5	To remove and refit/replace rear compartment fitting, timming, garnish, rear spare tyre with bracket and etc	100.00	
6	To remove and replace rear windscreen LH	120.00	80
7	To remove and replace rear windscreen RH	120.00	So
8	To remove and replace rear reverse sensor	100.00	32
	Labour Total :	2820.00	
	TOTAL (PARTS & LABOUR):	12762.44	

5100 (LKK) W/L 218/12, 1.12 L/S 6 41

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 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.

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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information

Country/State of Loss

20/07/2022 16:20 (SGT) Both 19/07/2022 14:35 (SGT) Near Jurong Town Hall Rd, Singapore JURONG TOWN HALL RD TOWARDS BOON LAY WAY (BEFORE SCIENCE CENTRE RD EXIT) Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBG3825G

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No Email Address

Mobile Phone No Alternative Phone No Yes

VICTORY PTE LTD 1XXXXX339R

ACCOUNTS@VPT.COM.SG (Phone) +65-96476553

VEHICLE PARTICULARS

Manufacturer Model

Variant

Exact purpose for which vehicle was being used at time of

accident Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission

CC

Fiat Doblo

1598

Employment

No - Claiming third party Commercial vehicle Manual

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number **EQ Insurance Company Ltd** DMCPHQ21-002722

DRIVER

Name of Driver NRIC No Date Of Birth

TOH SZE CHIN SXXXX313G 13/03/1974

Accident report SW0E227K0001

Page 1 of 19



Occupation Outdoor **Date Of Driving Pass** 17/03/1994 Driving experience 28 YEARS AND 4 MONTHS Gender Male Mobile Number (Phone) +65-96785895 Alt. Phone Number **Email Address** SCTOHSC@GMAIL.COM Address BLK 124 TECK WHYE LANE Address complement #09-876 Postcode 680124 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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) 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 SKETCH PLAN AND POLICE REPORT (T/20220720/7011) ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident **VIDEO TOO LARGE DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number **GBL2376R** Vehicle Manufacturer

Accident report SW0E227K0001

Page 2 of 19

Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category
Name of Driver
Contact Number
Address
Address complement
Postcode

Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Vehicle Category

Name of Driver

Vehicle Category

Vehicle Category

Commercial vehicle

Contact Number
Address
Address complement

Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident

INJURED PERSONS DETAILS

INJURED 1

Insurance Company Name Nature Of Damage

Details of property damaged in accident No. Of Passenger (Including Driver)

No. Of Passenger (Including Driver)

 Name of injured person
 TOH SZE CHIN

 Gender
 Male

 Phone No
 (Phone) +65-96785895

 Address

 Address Complement

 Post Code

 Approximate Age Years Old

 Injuries Sustained

 Injuried person in which vehicle?
 CRC3225C

Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
No

Accident report SW0E227K0001

CS CamScanner

BKETCH 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 Actual Driver
- 3 Information provided must be as truthful and accurate as possible. Any will a misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Ferm 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 Traffic Police Department for Investigation,

- 6. This report will be forwarded by the insurers to 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 ladgement 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 thy 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

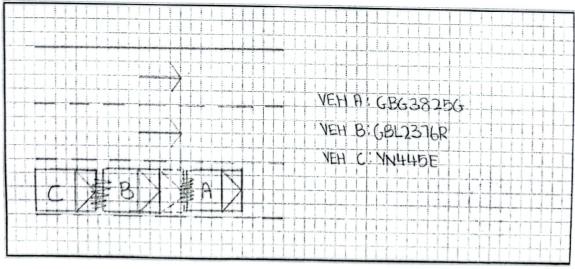
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their Images/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRICAD card)

Sketch Plan



1

Describe Circumstance of the Accident I WAS DRIVING WA AEH U (CBC38520) ON 19/01/2022 AT ABOUT 2 35PM, ALONG JURONG TOWN HALL RD TOWARDS BOOM LAW WAY CBEFORE SCIENCE CENTRE RD EXIT) I WAS AT JURONG TOWN HALL RD WAITING FOR THE TRAFFIC LIGHT, SUDDENLY I FELT A STRONG IMPACT FROM MY VEH A (GBG3825G). AFTER THE ACCIDENT, I FELT GIDDY AND SIT IN THE CAR FOR AWHILE AFTER RESTING, I ALIGHT FROM MY VEH A (GBG 38.25G) AND SAW VEH B (GBL) 376R) HAD COLLIDED ONTO MY YEH A (GBG3825G)'S REAR AND SAW YEH B (GBL2376R) DRIVER RESTING IN HIS CAR. AFTER A FEW MINS, I STARTED TO TAKE PICTURES AND EXHIPMYE PARTICULARS. AFTER TAKING PICTURES, I REALISE IT WAS VEH ((YN445E) HAD (OLLIDED ONTO VEH B (GBL2376R)'S REAR AND VEH B (GBL2376R)'S FRONT HAD COLLIDED ONTO MY VEH A (GBG3825G)'S REAR. Declaration

I/We declare the

going particulars are true in every respect.

Policyholder's Signature / Date & Time

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

(Name as in NRICAD card)





1 of 3

Report No. T/20220720/7011

Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT	OF A	TRAFFIC	ACCIDENT
KELOKI	OF 14	I I WELLING	MODIFICAL

Date/Time Report Made: 20/07/2022 11:43		ade:	Vide Report No.:	Station Diary No.:	
Informan	it's Particu	lars			
Name of TOH SZE	Informant: CHIN	And a supplier of the supplier	Address: 124 TECK WHYE LANE #0	9-876 SINGAPORE 680124	
ID Type / ID No.: NRIC NO / S7408313G		3G	Contact No.: Home/Office: Mobile: 96785895		
Nationalit SINGAPO	y: ORE CITIZE	EN .	Email: SCTOHSC@GMAIL.COM		
Sex: Male	Age: 48	Date of Birth: 13/03/1974	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: SUPERINTENDENT MARINE ENGINEERING			Driving Licence Information Class:	: Date of Expiry:	

	Indiana.	D:1	D . F: .	
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 19/07/2022 14:35	Type of Location: Straight Road
Location: JURONG TO	WN HALL ROAD			
	CELIGAY, SUCCESSION OF A CHOCKES A C	Road Surface:	TIAN OF LIAH NWC OM NO YEN A (GOL FOR AWHRE AFTE	Road Speed Limit:
Weather: Clear Traffic Flow:	CELIGAY, SUC. 1-		OM SIT VERT A (CBU FOR AWHILE AFTE COLUMN CALLED	

CONTRACTOR AND ADDRESS.	ehicle Invo	Married Married Section 1		AND REPORT OF THE PARTY OF THE		
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBG3825G	Van	FIAT	DOBLO MAX			0
GBL2376R	Van	TOYOTA	HIACE			0
YN445E	Lorry					0

Details of Vehicle Insurance			
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date







2 of 3

Report No. T/20220720/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expliny Date
GBG3825G	EQ INSURANCE COMPANY LTD.			
GBL2376R	CHINA TAIPING			
GBL2376R	CHINA TAIPING			

Details of Perso	n Involved				
Any Pedestrian I	nvolved: No				
No. of Pedestrian	ns Injured: NIL		Use of Ped	destrian Cros	sing: NA
Driver					
Name	TOH SZE CHIN			ID No.	S7408313G
Related Vehicle	GBG3825G (Van)			Contact No	. 96785895
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL	
No. of Days gran	ted Medical Leave	03	Degree of	f Slig	ht

Brief Details.

ON 19/07/2022 AT ABOUT 2:35PM, I WAS DRIVING MY VEH A (GBG3825G) ALONG JURONG TOWN HALL RD TOWARDS BOON LAY WAY (BEFORE SCIENCE CENTRE RD EXIT).

I WAS AT JURONG TOWN HALL RD WAITING FOR THE TRAFFICE LIGHT, SUDDENLY I FELT A STRONG IMPACT FROM MY VEH A (GBG3825G)'S REAR. AFTER THE ACCIDENT, I FELT GIDDY AND SIT IN THE CAR FOR AWHILE. AFTER RESTING, I ALIGHT FROM MY VEH A (GBG3825G) AND SAW VEH B (GBL2376R) HAD COLLIDED ONTO MY VEH A (GBG3825G)'S REAR AND SAW VEH B (GBL2376R) DRIVER RESTING IN HIS CAR.

AFTER A FEW MINS, I STARTED TO TAKE PICTURE AND EXCHANGE PARTICULARS.

AFTER TAKING PICTURES, I REALISE IT WAS VEH C (YN445E) HAD COLLIDED ONTO VEH B (GBL2376R)'S REAR AND VEH B (GBL2376R)'S FRONT HAD COLLIDED ONTO MY VEH A (GBG3825G)'S REAR.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20220720/7011

CONTINUATION OF REPORT

100			200	
0	La	tch	D	on
0	VG	CH		an

NP168

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/07/2022 11:43
Officer In Charge Of Case: TP / TPIB / MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	Classification Of Case: