

CS3/SMR22001881/Vtf3

ASSIGNMENT

From: Date:
 Estimated Cost:
QD/TP/WS/TP RES/OD RES/EVA/INV/MV
 To Inspect Vehicle No:
 at Workshop m/s
 of
 Insured:
 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.

N/S	O/S

Bal. or Market Value: 38k
 IDAC Accident Rpt: Consistent? : Yes or No
 GIA / PR Seen: Consistent? : Yes or No
 Est. Repairs. 3 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: SHB 9462A Yr Rogn: 12/7/11
 Type: Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: SHB 9462 SHB 9462A c.c. 1998
 Colour: White A/C: Insured / Std / NI / NA
 Sp. Reading: 255049 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: FmHeculcmBAZsq304

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: NII / SIRlm / STD A/Rlm or

Tyre Size: F: 215/55R17

R: 215/55R17

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

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. <u>25/2/22</u>		D.O.I. <u>1/3/22</u>	

Survey held at

Leng Wang

Des. of Damages: Front / Rear / O/S / N/S / U/C / Roof/tp or

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

Date / Time Action / Instruction

MV: 38k
rebate: 19570
NU: 18430
rr: 3k-4k

SUBMIT PRS REPORT

Date/Time File Pass to?

☐ : Prelim. Report
☐ : Final Report

Days Of Repair: 3

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Inve (\$)
☐ : Wash and (\$)

Survey Fee:

Transportation:

Fuel/As

Others

Total

Request Form:

Long Sign / B.J.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: **SINGAPORE NRIC**
Owner ID: **B67D**

Vehicle Details

Vehicle No.: **SK89667A**
Vehicle to be Exported: **No**
Intended Deregistration Date: **11 Mar 2022**
Vehicle Make: **HYUNDAI**
Vehicle Model: **I45 2.4 AT ABS AIRBAG 2WD 4DR GAS/D**
Primary Colour: **White**
Manufacturing Year: **2010**
Engine No.: **G4KEAU223318**
Chassis No.: **KMH4EC41CMBA259304**
Maximum Power Output: **131.0 kW (175 bhp)**
Open Market Value: **\$19,509.00**
Original Registration Date: **12 Jul 2011**
First Registration Date: **12 Jul 2011**
Transfer Count: **0**
Actual ARF Paid: **\$19,509.00**

Intended PARF Rebate Details

PARF Eligibility: **Forfeited**
PARF Eligibility Expiry Date: **-**
PARF Rebate Amount: **\$0.00**

Intended COE Rebate Details

COE Expiry Date: **30 Apr 2026**
COE Category: **B - Car (1601cc & above)**
COE Period(Years): **5**
PQP Paid: **\$23,658.00**
COE Rebate Amount: **\$19,570.00**
Total Rebate Amount: **\$19,570.00**

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 11 Mar 2022

OK

dp: 9k

12

= 750

4 yrs @ 150

750 x 50

= 37500

= 38k

38k - 19570

= 18430

Post an Advertisement
Sell it yourself! Advertise it at just
\$68 until it's SOLD!

[Post an Ad](#) [Advertiser Login](#) [Ways of Selling](#)

Placeholder text for the car listing.



Placeholder text for the car listing.

Free VICOM evaluation
Free grooming and 6 months maintenance
In-house workshop ensures quality service
Member of SVTA and hire purchase association
100% deposit refund for unapproved loan

YONG LEE SENG MOTOR PTE LTD

Sort by 20 results/page

2 vehicles



Hyundai i45

Any Category

Advanced Search



Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Hyundai i45		Any	Any	> 10 year(s) old	Any	Any	Any	Available
	Hyundai i45 2.0A (COE till 09/2025)		\$32,800	\$9,330 /yr	15-Sep-2010	1,998 cc	-	Luxury	Available
	Servicing Done, 100% Loan Available And High Trade-In, Viewing By Appointment Only.								
	ABWIN (1994) Pte Ltd								PREMIUM AD
	Posted: 08-Mar-2022								
	Hyundai i45 2.0A (COE till 08/2025)		\$31,800	\$9,150 /yr	03-Sep-2010	1,998 cc	-	Luxury	Available
	Servicing Done, 100% Loan Available And High Trade-In, Viewing By Appointment Only.								
	ABWIN (1994) Pte Ltd								PREMIUM AD
	Posted: 08-Mar-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

For old advertisements, view Expired ads

20 results/page

Buy / Rent Cars

New Cars For Sale

Used Cars For Sale

Cars For Rent

Sell Your Car

Post an Ad

Sell by Bidding

Sell by Consignment

Aftermarket

Workshop Directory

Aftermarket Products

Articles

Car Reviews

Car Advice

Car News

Car Features

General

About Us

Contact Us

Careers

Site Map

Resources

COE Prices

Car Loan Calculators

Car Forum

Car Insurance

Car Valuation

COE Renewal

Used Car Warranty

Bidded Carplates

Carpark Rates

Follow sgCarMart.com



sgCarMart is the number one car classifieds for parallel import cars, Toyota, Honda, Nissan, Mitsubishi & BMW. There are plenty of cars for sale, from vans, trucks, sedan cars, luxury cars, sports cars or station wagons, SUV, MPV, hatchback, to COE cars & OPC cars. You can also buy from a car auction, took up car loans, low mileage cars, car brands, carpark rates & car insurance. Find buy used Hyundai i45, Hyundai i45 Singapore, used Hyundai i45 Singapore, used Hyundai i45, used vehicles Singapore or even buy used Hyundai i45 Singapore. We have new car dealers comprising parallel-importers, authorised car dealers, and used car dealers on our site. Find new car price lists, new car launches and new car promotions. Visit our partner sites for job openings for Singapore jobs, real estate, mover, car performance parts, car discussion, forum discussion, commercial vehicle leasing & COE results.

All prices and other information displayed on sgCarMart.com are gathered from sources and based on algorithms that are believed by sgCarMart.com to be reliable, but no assurance can be given that the information is complete or current. sgCarMart.com does not assume any responsibility for errors or omissions or warrant the accuracy of this information.

Compare

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 T-RA (Traffic Accident 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	25/02/2022 16:04 (SGT)
Date of Accident	25/02/2022 14:00 (SGT)
Exact Location of Accident	Portstown Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKB9462A
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHEN LIQING
NRIC No	S8128867D
Email Address	LIQING14@HOTMAIL.COM
Mobile Phone No	(Phone) +65-96210953
Alternative Phone No	+65-96210953

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	I45
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	FWD Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	PNPV2021-00002214
Cover Note Number	-

DRIVER

Name of Driver	CHEN LIQING
NRIC No	S8128867D

Date Of Birth	14/09/1981
Occupation	Indoor
Date Of Driving Pass	01/06/2001
Driving experience	20 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96210953
Alt. Phone Number	+65-96210953
Email Address	LIQING14@HOTMAIL.COM
Address	BLK 317B TISHUN AVENUE 9 #04-280
Address complement	-
Postcode	782317
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 - Cross Junction
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PAX
Gender	Female

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

REFER TO ATTACHED
STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

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	SHB5301T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	POON KIAN
NRIC No	S2150627C
Contact Number	(Phone) +65-97306276
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

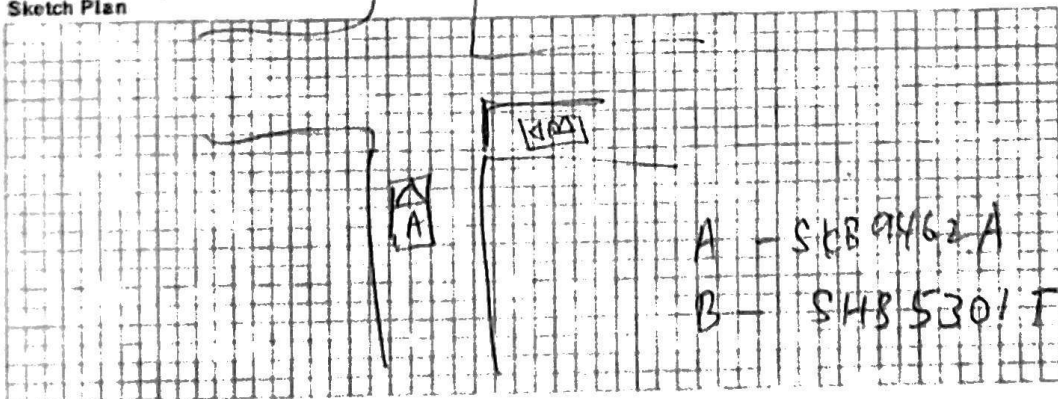
- 1 Please report correctly the details of the accident to speed up the claims process.
- 2 This Form must be completed by the Policyholder and/or the Authorized Driver.
- 3 Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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 later 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' law yers/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 yers/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 yers/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



Describe Circumstances of the Accident


I was travelling towards Portsmouth Rd when a taxi approach from my right side. He failed to stop at the junction and turn into the right side of my car. The front of my car was damaged.


Declaration

I/We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel