	0)30
ASS. IEC. BY: Date: Estimated Cost: OD/ TP/WS/TP RES/OD RES/EVA/INV/MV To In spect Vehicle No: SKA 6250U at Workshop m/s Hand Let Motoric of 7, 397 - D Yun Tee Intellect Insured: CRB PolicyNo. Claims No. Sum insured: (Client's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: DAC Accident Rport: Consistent?: Yes or No Est. Repairs: days Res.: Yes or No	GNMENT Veh No: SKA 62504 Yr Regn: 20((/ punk) Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or Make: To York YMAN F ANTO
Lum Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS	Survey held at (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Vehicle: IN / OUT Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date/Time Action / Instruction RGIMA LIMIT - JOK	
	ays Of Repair: esurvey No. of Trip: Transportation: Site Insp (\$)S+RSSI
Ponort Format	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
γ του (τ.Β.), (φ	: Weekend (\$

: Weekend (\$

TOTAL



興利摩哆汽車燒奸敵

HING LEE MOTOR CAR REPAIR & WELDER WORKS

BLK 7 UNIT 397-D WOODLANDS ROAD YEW TEE INDUSTRIAL ESTATE SINGAPORE 677996 TEL: 762 1010, 763 9909 FAX: 760 2724 Email: hinglee@pacific.net.sg

-	Ang Lay Chian		
	SK46250U	261 Dale	7172 _{NO.}
	Rear fair gate of/	\$ 958.70	
2	Acan tany gate w/strip Nr/	4 371. 75	
	Rea tenis gate Lock JAM/	\$ 262.90	
У.	/:	\$ 121.10.	
1-	Aen sois gate " E" emblem ~	1 131.41	
6	Relen fait gate " YARIS" emblemm	4 151.35	
7	1 Set Rea glass manding m/	\$ 182.00	~
8	Rem end panel. H/	1 654.10	
9	Ren floor pand. X	\$ 900.45	
	Relai end point Garnier Les	\$ 371.45	
	Reen Land gape handle . X	\$ 198.25	
12	Relan tail gate Trim Bound cal	\$ 878.15	
13	Plan LXR tail lamp Broy \$399. 80 Blpc	799.60	H/cm/
14	Rem wipen moon bry	\$ 593.72	
	Alew gloss Sealonet. N.	\$ 50.00	5~ 30
	Relan Sampen de/	4 488.20	
17	1 Set Rea Super Clip M		SN 25030
18	Ren samper Bream. X	\$351.75	
	2 Rem Samper Bracket RxL \$ 158,150	\$ 316,30 8	
20	2 Klar surplu Retionen \$ 55.92 @ per	\$ 111.80	
21	Rien C4 Lais Carys Support	\$ 174.44	
27	Ren 2 No plate larp. \$ 125.30 @	\$ 250,60	(set)
	· cm/		1



興利摩哆汽車燒奸敵 HING LEE MOTOR CAR REPAIR & WELDER WORKS

BLK 7 UNIT 397-D WOODLANDS ROAD YEW TEE INDUSTRIAL ESTATE SINGAPORE 677996 TEL: 762 1010, 763 9909 FAX: 760 2724 Email: hinglee@pacific.net.sg

	Ang Lay Chian		
	SICA 6250 U	Date >6/	7172 _{NO.}
23	Relan bengen Senson. No	\$ 270,00.	
24		\$ 899.10	
25	Riem No place 18sty . A Cot	4 50,00.	5N35
76	Row Boot Interior Trim Board Clipt	1 \$ 80.00	5N 30
	·		
	·	·	
	Labon Charge.		
	Ren Bast Interior Remone & Refit	\$ 130.00.	60
2,	Ren bamper sensor Remone à léfit	\$ 80.00.	40
3.	Rom glass Remone & Refix	\$ 150,00.	
4.	Rea end pomel Sealant	\$ 8000.	
		4 100,00 .	
6	Ausi Rast	4 80.00.	
7	winny fie	\$ 6000.	
8	Respormy Paining	\$ 1000,00.	
9.	To Repur Rear Ack Damage Portion	\$ 1300,00	600 700
•	.'	·	
	CARM	·	
	4p 90010068	K Auto Consultants hence notife Repairer of the following:	у
	6 Days	o resurvey before/after spray painting o display damaged part(s) during resur	
	45	hird party survey is on a "Mith and Day	
	st 61/08/22 01/40 .s	o model modification(s) is allowed	l l
	You after rever	upplementary item(s) must be resurvey subject to final approval from insurance	e Company
	Ack Sign	Dowledged by Repairer Pature:	
	Date	-	

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 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 aforesald.

ACCIDENT STATEMENT

Date of Submission Reported by **Date of Accident** act Location of Accident Additional Location Information Country/State of Loss

18/07/2022 17:45 (SGT) Both 17/07/2022 19:15 (SGT) PIE, Singapore PIE EXIT TO UPPER BUKIT TIMAH RD Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SKA6250U

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address**

Mobile Phone No Alternative Phone No. No

ANG LAY CHIAN SXXXX055D

ANGLAYCHIAN@YAHOO.COM.SG

(Phone) +65-96870620

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

Toyota Yaris

YARIS E AUTO

Private use

No - Claiming third party

Private car Auto 1497

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

AXA Insurance Pte Ltd

GA570916/1

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

ANG AH TONG SXXXX951D 06/06/1943 Indoor

Accident report SA1C227I000N

oriving Pass ng experience bile Number A. Phone Number mall Address Address Address complement Postcode Is the driver the policyholder? If No. Relationship of the Driver with the Insured Does Driver Own Other Vehicles? 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 Weather Conditions **Road Surface**

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number

Translator's email Orlginal language used in the statement

PASSENGER 1

Name Gender

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE SKETCH PLAN BY DRIVER

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Yes Yes WITH OWNER

30/11/1972 49 YEARS AND 8 MONTHS

Male

(Phone) +65-81012952

ANGLAYCHIAN@YAHOO.COM.SG

11 TOH TUCK RD #02-04

596290 No Parent

No

Collision - Head to Rear

Clear Dry

No

2 No Yes

No

SIK AI GIK Female

No No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model

SLM7580K



// Variant // Incle Variant // Incle Colour //	ed in accident		- Privale hire - - - - - -
No. Of Passenger (Including	ig Driver)	**	_
		15.5	_

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 for the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material (acts niny allow insurance companies to topudiate policy liability.
- 1. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any laise caparting 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
- 7. 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 aforesald.
- 8. Consent under the Porsonal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

- 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 wehicle(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)
 - (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;
 - (ly) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me. which could invalve 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")
 - 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
 - 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.
 - my Personal Information will also be collected and used to campile 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: 18 34122

Orlver's Signature

(If driver is not the policyholder)

Date & fime:

Reporting Entre Personnel's Signature

Name:

NRIC/FIN No .:

COKPLETED

Vehicle A: SKAGLWA Vehicle B: (Eccation: I've took his it
TCH PLAN Velticle B:	CLATSUOK Vehicle C:
- SKA 6250L)	
K-CIMTEROK	
P16 3 Charles	7.77
A, in the	French all Connection of 1
3	(GD)ED
· Kushini	· ·······
,	
	(K) 19
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
I was existing 218 of PIE for	ward willer trutily Time h Road.
es I was approaching the junction	
anddensing I telt a king come	From hy back. When I for
down, Honda vesel was behin	-a -
That I have been seen as a second sec	
Philadeles	71.
	TP at other workshop
Remarks: Please forward a copy of my efile accident rep My workshop:	port to:
Email address :	
& myself : Email address :	
	moderne for you to subject own damage claim under
Note: Please take note that your insurer have 14 days the you own policy. Kindly check with your own insurer for	more information.
DECLARATION	
I/We declare the foregoing particulurs are true in every respect.	7112
CX > Q DONN	Ali Lim My or Company
	Reporting Control Personnel's Signature
Policyholder's Signature Oute & Time: [8:3 W 22 (If driver is not the paticyho	I had decreased to
1736h Date & Time:	MENCHEN NOTIFICA

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	055D
Vehicle No:	2 Aug 10 10 10 2 10 10 10 Aug 10 Aug
	SKA6250U
Vehicle to be Exported:	A DE No. 2 E. A DE SELECTION DE LE CONTRACTOR DE LE CONTR
Intended Deregistration Date:	02 Aug 2022
Vehicle Make:	TOYOTA
Vehicle Model:	YARIS E AUTO
Primary Colour:	Silver
Manufacturing Year:	2011
Engine No.:	1NZY271906
Chassis No.:	MR054HY9104067688
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$13,430.00
Original Registration Date:	18 Mar 2011
First Registration Date:	18 Mar 2011
Transfer Count: -	
Actual ARF Paid:	\$13,430.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	THE RESERVE THE TRANSPORT OF THE PROPERTY OF T
PARF Rebate Amount:	\$0.00
OE Expiry Date:	17 Mar 2026
COE Category:	A - Car (1600cc & below)
OE Period(Years):	5
PQP Paid:	\$20,699.00
OE Rebate Amount:	\$15,001.00
otal Rebate Amount:	\$15,001.00

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 02 Aug 2022