

08/11/11 ref
ASS. REC. BY: *Form*

REF:

CS3/EQ127007433/Rcy3

8802

CoE XPIRY: 2026/may

ASSIGNMENT

Front:

Date:

Estimated Cost:

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

To Inspect Vehicle No: *SGG 4612M*

at Workshop m/s *Kinh's Auto*

of *176 SIN MINH #02-10*

Insured:

EQ1

Policy No.

Claim No.

Sum Insured:

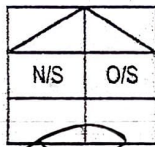
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

42k

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

days

Res.: Yes or No

Lump Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SGG 4612M

Yr Regn: *2006 may*

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

Truck / Trailer or

Make:

TOYOTA MISH 1.8 A

c.c. *1794*

Colour:

Grey

A/C: Insured / Std / NI / NA

Sp. Reading:

241357

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

2N6100300260

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:

195/65 R15

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

03/08/22

D.O.I.

04/08/22

Survey held at

Kinh's Auto

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

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

Date/Time

Action / Instruction

REPAIR LIMIT - 24K

ESTIMATE RANGE OF REPAIR / NO. OF DAYS - (2K-3K) / 4 days

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

) : S + RS, SI

☐

: Interview (\$

) : Photos

☐

: Tech. Insp (\$

) : Others

☐

: Weekend (\$

)

Report Format :

Lump Sum / I.B.I. (\$

TOTAL

AH LIM MOTOR COMPANY

Data Collection for Accident Reporting

Please write clearly

Insurance Company- Direct Asia OD / TP / Reporting Only
Date Of Accident- 3/08/2022 Time Of Accident- 8:01
Exact Location of Accident 215 Ang Mo Kio Ave 1
Weather - Clear / Dry / Raining / Drizzling / After Rain / Wet / Others CC CC
Vehicle Number- 9SG44612M Vehicle Model- TOYOTA WISH Auto/Manual

Policy Holder Name - TOO CHANH MIN
Policy Holder NRIC/Fin No - 57334980Z Email Address
Policy Holder HP - 96576672 Alt Phone No
Home Address - Blk 515 410 CHU KANH Road #01-52

Driver Name - Relation with owner Owner
Driver NRIC /Fin - Policy Holder HP - Alt Phone
Date Of Birth - 20/09/73 Licence Pass date 04/6/1997 Occupation - Indoor / Outdoor
Email Address travis.too@gmail.com
Home Address -
Injury - Yes / No - Conveyance to Hosp Y / (N) Video In Car - Yes (No)

No. Of Pax In Own Car - 1 Names / Gender M/F
Names / Gender M/F
Names / Gender M/F

Third Party's Particulars: Vehicle No. 4BE8122 D HP# 83836208 Name
: PHUI KUEH CHIN Nric/Fin 57762058C

Third Party's Particulars: Vehicle No. HP# Name
: Nric/Fin

Date of accident: _____ Time: _____ Location: _____
My Vehicle A: _____ Vehicle B: _____ Vehicle C: _____

SKETCH PLAN

Describe Circumstances of the Accident.

My vehicle (S464612M) was stationary at the point of time, while waiting for the traffic light to turn green. After awhile, I felt an impact pushing my vehicle forward.

I felt a slight pain in my neck area immediately.

I then exchange particulars with the 3rd party driver and left.

Note: Please take note that your Insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own Insurer for more information.

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

We declare the foregoing particulars are true in every respect.

Ahmy min
Policyholder's Signature / Date & Time
3/5/22

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

Witnessed by Reporting Centre Personnel

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.
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. 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.

3. 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

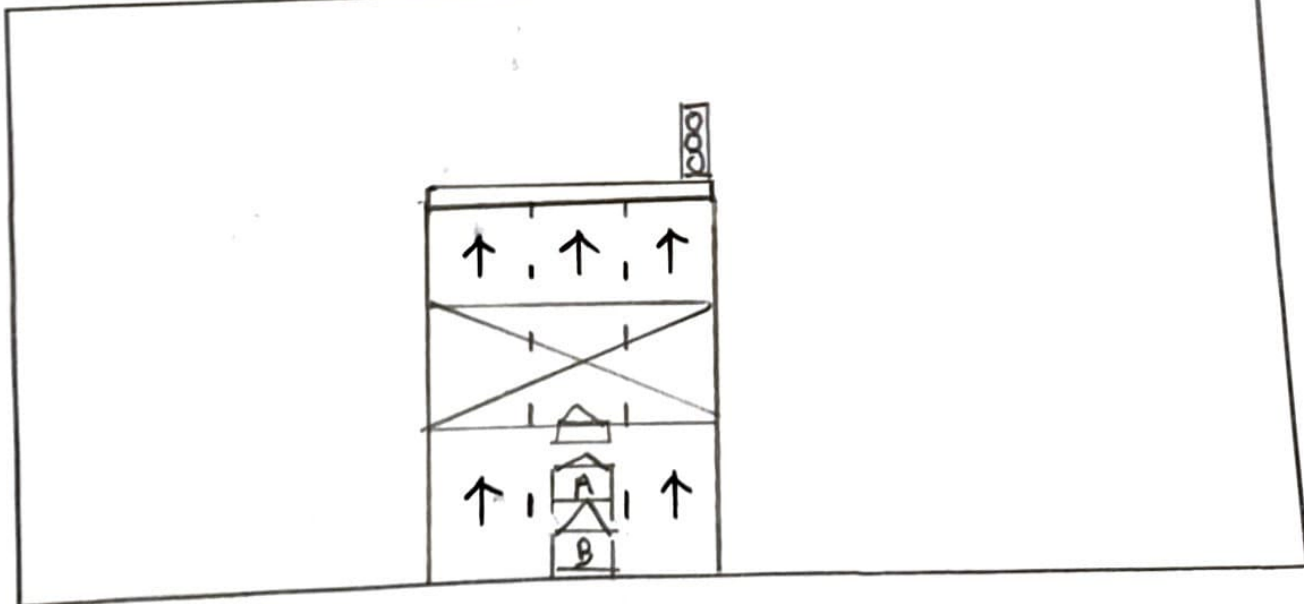
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(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.

Sketch Plan



Chungmin
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:	Singapore NRIC
Owner ID:	980Z
Vehicle No.:	SGG4612M
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Aug 2022
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8 A
Primary Colour:	Grey
Manufacturing Year:	2006
Engine No.:	1ZZ2537175
Chassis No.:	ZNE100300260
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$20,173.00
Original Registration Date:	13 May 2006
First Registration Date:	13 May 2006
Transfer Count: -	1
Actual ARF Paid:	\$22,191.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	12 May 2026
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$46,048.00
COE Rebate Amount:	\$17,354.00
Total Rebate Amount:	\$17,354.00

The information contained herein is correct as at 05 Aug 2022

OK

Toyota Wish 1.8A (COE till 05/2026)

[Overview](#)[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

UNITED MOTORRING PTE LTD

Price **\$42,800**

Depreciation **\$11,200 /yr**

Reg Date 08-Jun-2006
(3yrs 9mths 26days COE left)

Mileage N.A.

Manufactured 2006

Road Tax \$1,458 /yr

Transmission Auto

Dereg Value \$17,599 as of today (change)

OMV \$22,860

COE \$46,048

ARF \$25,146

Engine Cap 1,794 cc

Power 97.0 kW (130 bhp)

Curb Weight 1,300 kg

No. of Owners 2