

ASS. REC. BY:

REF:

EQ/ 22 008525/KC

C

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

OD/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:

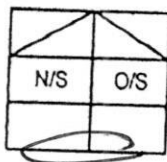
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

05 days

Res.: Yes or No

Lum Sum:

1:3.1%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SNG 16048

Yr Regn:

07 22

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

Truck / Trailer or

Make:

Hyundai

2019

C.C.

1580

Colour:

Gray

A/C:

Insured / Std / NI / NA

Sp. Reading

11373

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

KMHC851CVNU 292616

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:

R:

195/65R15

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

Front

Rear

R/Bal.

9

mm

R/Bal.

9

mm

L/Bal.

9

mm

L/Bal.

9

mm

D.O.A.

26/8/22

D.O.I.

1/9/2022

Survey held at

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

1 Got BZ

21/9 @ 7273.72

Cabin

@ 05 days (Red \$7,225.35/50%)

Date/Time, File Pass to?

☐

: Prell. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + R.S. SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

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

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SNG1604Z

Not Notch
Prepainted B4 paint
87273.72

LAD2208-024

Vehicle No.:

Chassis No.:

Co UEN:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration :

01 SEP 2022**SNG1604Z**

KMHC851CVNU292616

201603575K

HYUNDAI

IONIQ HYBRID

26/08/2022

YQ3442C/ER

14/07/2022

PART**LIST**

1	REAR BUMPER	\$	<i>R</i>	475.80	<i>✓</i>
1	REAR BUMPER CENTRE MOULDING ASSY	\$	<i>R</i>	216.50	<i>✓</i>
1	REAR LOWER BUMPER MOULDING	\$	<i>Dis</i>	47.50	<i>✓</i>
1	REINFORCEMENT SUB-ASSY, REAR BUMPER	\$	<i>R</i>	294.80	<i>✓</i>
1	REAR END PANEL	\$	<i>R</i>	532.00	<i>✓</i>
1	LAMP ASSY - REAR FOG	\$	<i>in</i>	201.50	<i>X</i>
1	LAMP ASSY - REAR COMBINATION INSIDE, LH	\$	<i>in</i>	794.40	<i>✓</i>
1	LAMP ASSY - REAR COMBINATION INSIDE, RH	\$	<i>in</i>	794.40	<i>✓</i>
1	LAMP ASSY - REAR COMBINATION OUTSIDE, LH	\$	<i>in</i>	263.10	<i>X</i>
1	LAMP ASSY - REAR COMBINATION OUTSIDE, RH	\$	<i>in</i>	263.10	<i>X</i>
1	PANEL ASSY - TAILGATE	\$	<i>R</i>	2,549.70	<i>✓</i>
1	HINGE ASSY - TAILGATE	\$	<i>R</i>	31.30	<i>X</i>
1	GLASS ASSY - TAILGATE, LOWER	\$	<i>Shatter</i>	384.90	<i>✓</i>
1	SPOILER - REAR	\$	<i>in</i> <i>Repair</i>	665.40	<i>X</i>
1	LIP ASSY - REAR SPOILER, LH	\$	<i>in</i>	8.00	<i>X</i>
1	LIP ASSY - REAR SPOILER CENTER	\$	<i>in</i>	15.20	<i>X</i>
1	LIP ASSY - REAR SPOILER, RH	\$	<i>in</i>	8.00	<i>X</i>
1	LAMP ASSY - HIGH MOUNT STOP	\$	<i>in</i>	171.90	<i>X</i>
1	EMBLEM - SYMBOL MARK	\$	<i>in</i>	29.90	<i>✓</i>
1	GARNISH - TAILGATE	\$	<i>in</i>	36.10	<i>X</i>
1	HANDLE ASSY - TAILGATE RELEASE	\$	<i>Dis</i>	47.90	<i>✓</i>
1	STRIP - TAILGATE GARNISH	\$	<i>in</i>	8.40	<i>X</i>
1	EMBLEM - HYBRID	\$	<i>in</i>	24.30	<i>✓</i>
1	EMBLEM-IONIQ	\$	<i>in</i>	31.30	<i>✓</i>
1	PANEL ASSY - REAR FLOOR, REAR	\$	<i>R</i>	292.50	<i>X</i>

TOTAL \$ 8,187.90**10% \$ 818.79***208*

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SNG1604Z**LAD2208-**

	\$	7,369.11
Special Nett		
2 WINDSCREEN SEALANT	\$	150.00 <i>6000</i>
1 WINDSCREEN MOULDING	\$	200.00 <i>✓</i>
1 WINDSCREEN INNER SPONGE SEAL	\$	130.00 <i>6000</i>
1SET PARKING AID	\$	700.00 <i>22000</i>
1 REAR NUMBER PLATE	\$	180.00 <i>4500</i>
1SET REAR BUMPER CLIP	\$	85.00 <i>6000</i>
1 REAR BUMPER RETAINER CLIP	\$	75.00 <i>X</i>
TOTAL	\$	1,520.00
TOTAL PARTS	\$	8,889.11

LABOUR

To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.

\$ 380.00 *600*

To Remove And Refit Rear Big and Small W/Screen Glass To Facilitate Bodywork Repair.

\$ 300.00 *1800*

To Rust-Proofing and apply undercoat Of The Affected Areas.

\$ 240.00 *600*

To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.

\$ *Repair* 380.00 *X*

Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same

\$ 1,600.00 *6000*

To transfer of rear end panel fittings, attachment to facilitate bodywork repair.

\$ *nn* 380.00 *X*

Putty And Spray Painting Of The Affected Portion.

\$ 1,600.00 *6600*

To reinstall rear bumper parking sensor.

\$ 170.00 *500*

To transfer of tire, rim and on wheel balancing.

\$ *nn* 170.00 *X*

Trans-cab Auto Services Pte Ltd**LAD2208-**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SNG1604ZTo Check Electrical Lighting Concerned. \$ 170.00 *200*To check steering geometry and computer wheel alignment \$ *22* 220.00 *X***TOTAL \$ 5,610.00****Over All Total \$ 14,499.11****(PART-BY-PART) Repair Days** *20 days**5 days*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:

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 Actual 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	31/08/2022 16:12 (SGT)
Reported by	Driver
Date of Accident	26/08/2022 07:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	AYE MCE EXIT FILTER ONTO ALEXANDRA ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNG1604Z
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TRANS LEASING PTE LTD
Company Reg No	201603575K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	(Phone) +65-98002270
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Ioniq
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5128626563

DRIVER

Name of Driver	Lee Kay Hiang (Li Jiaxian)
NRIC No	S7616238G
Date Of Birth	08/06/1976
Occupation	Outdoor

Date Of Driving Pass	26/07/1995
Driving experience	27 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-98002270
Alt. Phone Number	-
Email Address	CLAIMS@TRANSCAB.COM.SG
Address	Blk 592A MONTREAL LINK #10-02
Address complement	-
Postcode	751592
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 - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

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?	Yes
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	UNKNOWN
Gender	Female

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

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	Adv to upload onto motorvideo@income.com.sg

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YQ3442C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	Islam Mohammad tarikul
Passport No/FIN	G2338802U
Contact Number	(Phone) +65-86541351
Address	-
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	Lee Kay Hiang
Gender	Male
Phone No	(Phone) +65-98002270
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SNG1604Z
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

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 Actual 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 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 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 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.

Policyholder's Signature / Date & Time

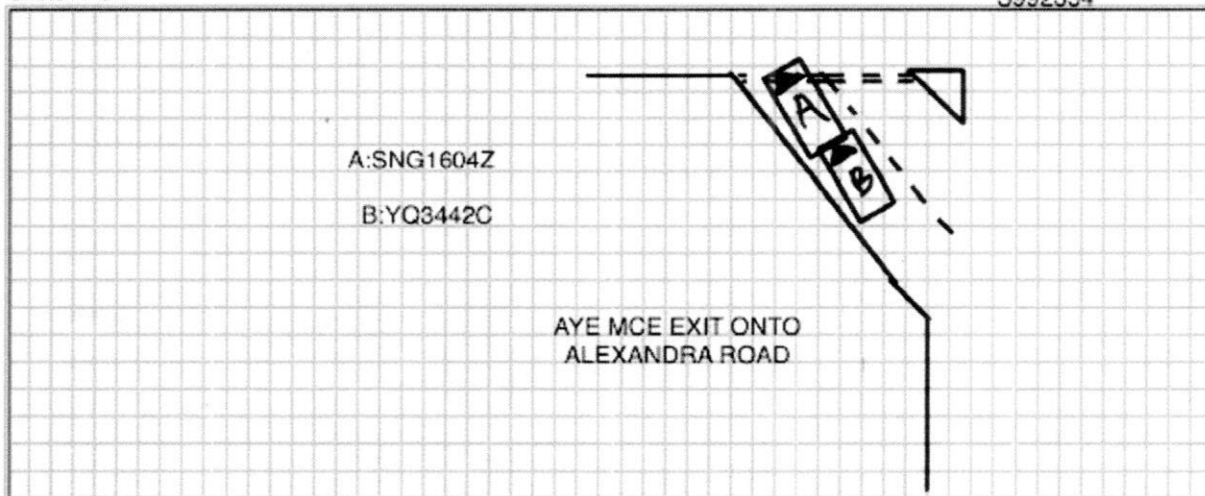
Driver's Signature (if driver is not the policyholder) / Date & Time

31/8/2022 1600

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Tee Hong da
S992334

Sketch Plan



Describe Circumstance of the Accident

Refer to POLICE report

Declaration

I/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

31/8/2022 1600

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Tee Hong da S992334

2



**SINGAPORE
POLICE FORCE**



T/20220826/7028

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

2 of 3

Report No. 1/20220826/7028

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEE KAY HIANG	ID No.	S7616238G
Related Vehicle	SNG1604Z (Car)	Contact No.	98002270
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	26/08/2022	Date	26/08/2022
No. of Days granted Medical Leave	07	Degree of	Serious

Brief Details.

On 26th Aug 2022, at about 0740am

I was driving on aye towards Alexander hospital. At the slip road i was turning left at the slip road exit to Alexander hospital. Suddenly veh b yq3442c hit onto my rear of my car, the impact was very big and i was feeling pain from my neck and back, my passenger call the 995 and i was convey to hospital.



SINGAPORE POLICE FORCE



T/20220826/7028

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

1 of 3

Report No. 1/20220826/7028

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/08/2022 14:50	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: LEE KAY HIANG	Address: 592A MONTREAL LINK #10-02 SINGAPORE 751592		
ID Type / ID No.: NRIC NO / S7616238G	Contact No.: Home/Office: Mobile: 98002270		
Nationality: SINGAPORE CITIZEN	Email: JOHNLEEKH@HOTMAIL.COM		
Sex: Male	Age: 46	Date of Birth: 08/06/1976	Type of Informant: Driver
Race: Chinese	Language: English	Institution / School Name:	
Occupation: Phv driver	Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 26/08/2022 07:40	Type of Location: Bend
Location: ALEXANDRA ROAD				
Weather: Heavy rain		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SNG1604Z	Car	HYUNDAI	Ioniq	Grey	Seriously Damaged	1
YQ3442C	Lorry		Lorry		Seriously Damaged	5

**SINGAPORE
POLICE FORCE**

T/20220826/7028

3 of 3

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

Report No. 1/20220826/7028

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
JOFILIANO BIN MOHAMED ALI
Contact No.: 65476960

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
26/08/2022 14:50

Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	575K
Vehicle Details	
Vehicle No.:	SNG1604Z
Vehicle to be Exported:	Yes
Intended Deregistration Date:	27 Aug 2022
Vehicle Make:	HYUNDAI
Vehicle Model:	AE IONIQ HEV 1.6 DCT
Primary Colour:	Grey
Manufacturing Year:	2022
Engine No.:	G4LENU234760
Chassis No.:	KMHC851CVNU292616
Maximum Power Output:	96.7 kW (129 bhp)
Open Market Value:	\$25,881.00
Original Registration Date:	14 Jul 2022
First Registration Date:	14 Jul 2022
Transfer Count:	0
Actual ARF Paid:	\$13,234.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Jul 2032
PARF Rebate Amount:	\$9,925.00
Intended COE Rebate Details	
COE Expiry Date:	13 Jul 2032
COE Category:	A - Car-Details at OneMotoring
COE Period(Years):	10
QP Paid:	\$68,001.00
COE Rebate Amount:	\$54,400.00
Total Rebate Amount:	\$64,325.00

The information contained herein is correct as at 27 Aug 2022

OK