

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SMY 2205Cat Workshop m/s HIAI LEEK Automobileof 160, SAN MINH DR HOS-17Insured: CTI

Policy No. _____

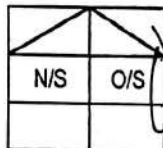
Claims No. _____

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: 81K

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: _____ 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: SMY 2205C Yr Regn: 2016 / JulyType (M.Car) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: KIA SORENTO 2.2(A) CRDI C.C. 2199Colour WHITE A/C: Insured / Std / NI / NASp. Reading 168748 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KNAPH81BMH5210082Gen. Cond: Good (F) / Poor / BurntSteering: (Inorder) / Jammed / Leaked / Burnt orBrake: (Inorder) / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 235/60R18R: 235/60R18

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

TOYO / YOKO or ROADSTONE

Front

R/Bal. 6 mmL/Bal. 6 mmD.O.A. 12/09/22

Survey held at

Rear

R/Bal. 6 mmL/Bal. 6 mmD.O.I. 13/09/22HIAI LEEKDes. of Damages: Frt / Rear / Q18 / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

REPAIR LIMIT - 37KESTIMATE RANGE OF REPAIR / NO. OF DAYS - (4K - 5K) / 6 days

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

Survey Fee: _____

2)

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)

) S + RS, SI

☐ : Interview (\$ _____)

) Photos

☐ : Tech. Invs (\$ _____)

) Others

☐ : Weekend (\$ _____)

Report Format : _____

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

Send/Fax to: _____

Submitted: _____

SINGAPORE ACCIDENT STATEMENT

BASIC INFORMATION			
Date of Accident:	12/09/2022	Time of Accident:	10.00am
Exact Location:	Ubi Ave 1 (At near 63 Ubi Ave D)		

DETAILS OF OWN VEHICLE			
Vehicle Registration No.	SMY 22 05 C	NRIC / FIN / Passport no:	S83706428
Name of Registered Owner:	Teo Yee Chong		
Owner's Email:	Vincent83@outlook.com		
Owner's Address:	Blk 182B Woodlands Street 13 #07-739 (S) 732/82		
Vehicle Make:	Kia	Vehicle Model:	Sorento 2.2 (A)
Engine Capacity (cc):	2200CC	Transmission:	(Auto) Manual
Type of Claim:	Own Damage / (Third Party) / Reporting Only		
Vehicle Category:	(Private) Commercial / Motorcycle / Private Hire		
Name of Insurance Co:	China Tai Ping		
Type of Policy:	Comprehensive / Third Party / Third Party, Fire & Theft		
Policy Number:	DMPCSNW00024042200		

DRIVER			
Name of Driver:	Teo Yee Chong <input checked="" type="checkbox"/> same as		
NRIC / FIN / Passport no:	S83706428	Date of Birth:	24/02/1983
Occupation:	Indoor / Outdoor	Driving Pass Date:	30 May 2007
Contact Number:	9070 5882	Gender:	(Male) / Female
Address:	Blk 182B Woodlands Street 13 #07-739 (S) 732/82		
Relationship with Owner:	(Owner) Employee / Spouse / Child / Hirer / Other:		
Translator Name:		Translator NRIC:	
Translator Contact no:		Translator email:	


GENERAL INFORMATION OF THE ACCIDENT			
Type of Collision:	Chain collision / Side Swipe / Front to Rear / Others: Front to Side		
Weather Condition:	(Clear) Raining / Others:	Road Surface:	(Dry) Wet
Video available:	(Yes) No		
Was anybody injured?	Yes / No	Police Report Made?	(Yes) No
No. of passenger onboard (including driver):	1		

DETAILS OF OTHER VEHICLE			
	Vehicle 1	Vehicle 2	Vehicle 3
Vehicle Registration No:	SMV 6907 A		
Vehicle Make / Model:	Honda VTEC		
Name of Driver:	Liu Li Zheny		
NRIC / FIN / Passport no:	S8479903C		
Contact Number:			
Name of Insurance Co:			

DETAILS OF WITNESS	
Name:	Contact Info:

DETAILS OF INJURED PERSON			
	Person 1	Person 2	Person 3
Name / in which vehicle?:			

Driver's Declaration: I declare that the information given in this report are true and accurate to the best of my collection and I bear full responsibility for any consequences arising from incomplete or inaccurate information that are submitted.


Signature of Driver

12/9/2022 14:40hr
Date and time


Describe Circumstance of the Accident


As per police report.


The video is at owner end.

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


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

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

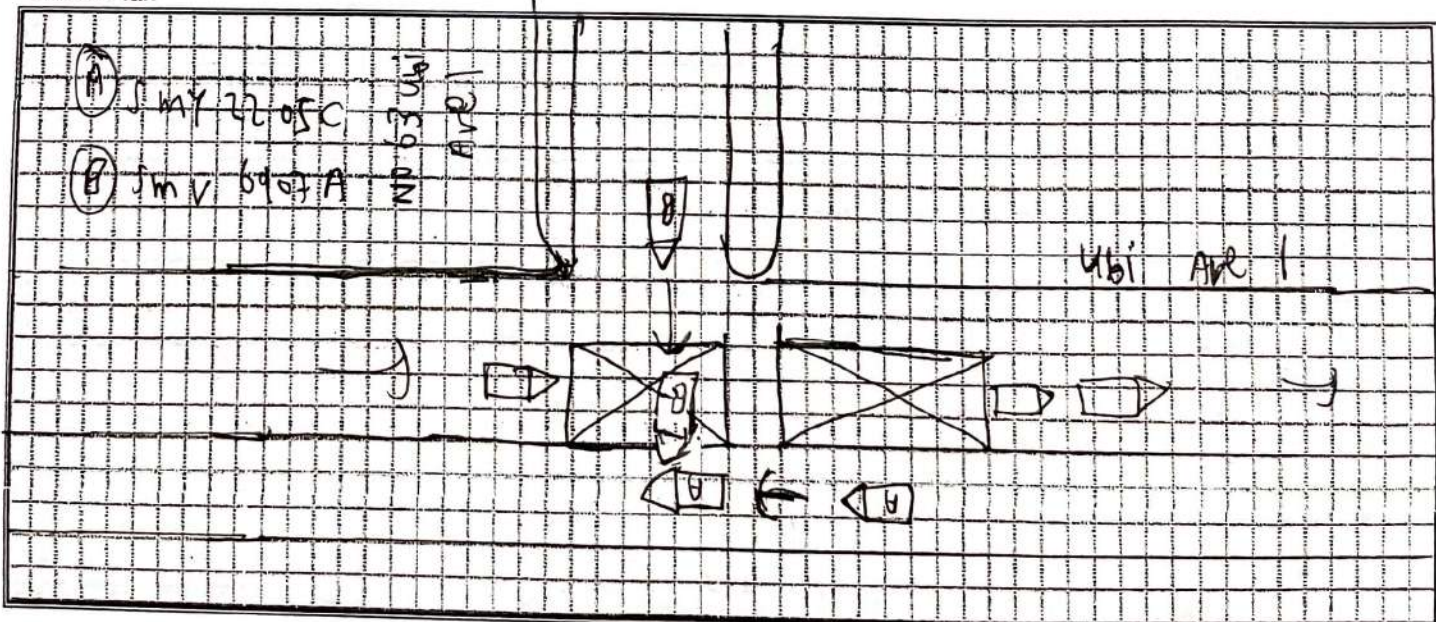
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

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

Sketch Plan




Describe Circumstance of the Accident


As per police report.


The video is at owner end.

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


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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	642B
Vehicle No.:	SMY2205C
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Sep 2022
Vehicle Make:	KIA
Vehicle Model:	SORENTO 2.2(A) CRDI 2WD
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	D4HBGH269642
Chassis No.:	KNAPH81BMG5210082
Maximum Power Output:	147.0 kW (197 bhp)
Open Market Value:	\$29,393.00
Original Registration Date:	21 Jul 2016
First Registration Date:	21 Jul 2016
Transfer Count:	2
Actual ARF Paid:	\$33,151.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Jul 2026
PARF Rebate Amount:	\$21,548.00
COE Expiry Date:	20 Jul 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$56,089.00
COE Rebate Amount:	\$21,591.00
Total Rebate Amount:	\$43,139.00

The information contained herein is correct as at 14 Sep 2022

OK

Kia Sorento Diesel 2.2A CRDi Sunroof

Overview

Financial

Accessories

Similar

Research

Photos

Map

M LABEL

A CAR FOR EVERYONE
Car Dealership & Automotive Aesthetic Services

Price **\$79,778**

Depreciation ⓘ \$15,910 /yr
View models with similar depre

Reg Date 22-Jun-2016
(3yrs 9mths 7days COE left)

Mileage N.A.

Manufactured ⓘ 2016

Road Tax ⓘ \$2,126 /yr

Transmission Auto

Dereg Value ⓘ \$46,862 as of today (change)

Fuel Type Diesel
(Euro 5 Engine and Above)

COE ⓘ \$56,000

OMV ⓘ \$34,011

Engine Cap 2,199 cc

ARF ⓘ \$39,616

Curb Weight ⓘ 2,039 kg

Power 147.0 kW (197 bhp)