

ASS. REC. BY:

REF:

CS/CT122009104/Rwy3

961K

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SM21363Eat Workshop m/s MY CAR CONSULTANTof 60, JLN LAM HWAT #05-21Insured: CTI

Policy No. _____

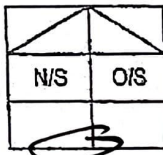
Claims No. _____

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: 138K

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: SM21363E Yr Regn: 2021 / APRType: Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: TOYOTA PRIUS H.B.A C.C. 1798Colour: GREY A/C: Insured / Std / NI / NA

Sp. Reading: _____ T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDKB3FU303091844Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or -

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 22/07/22D.O.I. 15/09/22Survey held at MY CAR CONSULTANTDes. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>REPAIR LIMIT - 88K</u>

Date/Time, File Pass to?



: Prel. Report

1)



: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

\$ + RS. \$ _____

Photos

Others

TOTAL

Report Format: _____

Lump Sum / L.S. (\$ _____)



MY CAR CONSULTANT PTE LTD

Reg no.: 201605878Z

Address: 60 JALAN LAM HUAT, CARROS CENTRE #05-68 5737986

HP: 98888885

Estimation

Date:

14/9/2022

Vehicle:

SMZ1363E

Make / Model:

TOYOTA PRIUS

INSURANCE

CHINA TAIPIING

No.	Description	Unit	Unit Price	Amount
1	TAILGATE X	1	\$ 1,598.00	\$ 1,598.00
2	TAILGATE WEATHERSTRIP X	1	\$ 212.00	\$ 212.00
3	TAILGATE OUTER GARNISH cut ✓	1	\$ 521.00	\$ 521.00
4	TAILGATE NUMBER PLATE LAMP X	2	\$ 54.00	\$ 108.00
5	TAILGATE EMBLEM PRIUS t ✓	1	\$ 89.40	\$ 89.40
6	TAILGATE LOGO X	1	\$ 82.30	\$ 82.30
7	TAILGATE EMBLEM HYBRID no ✓	1	\$ 78.00	\$ 78.00
8	TAILGATE DETECTOR ?	1	\$ 321.00	\$ 321.00
9	TAILGATE LOCK X	1	\$ 312.00	\$ 312.00
11	REAR BUMPER de ✓	1	\$ 658.00	\$ 658.00
12	REAR BUMPER SIDE RETAINER X	2	\$ 112.00	\$ 224.00
13	REAR BUMPER REINFORCEMENT ?	1	\$ 350.50	\$ 350.50
14	REAR BUMPER BRACKET X	2	\$ 114.00	\$ 228.00
15	REAR BUMPER LIP de ✓	1	\$ 728.90	\$ 728.90
16	REAR BUMPER REFLECTOR RH ?	1	\$ 68.00	\$ 68.00
17	REAR BUMPER TOP REFLECTOR RH X	1	\$ 312.00	\$ 312.00
18	REAR BUMPER UNDER COVER LH X	1	\$ 321.00	\$ 321.00
19	REAR BUMPER UNDER COVER RH X	1	\$ 251.00	\$ 251.00
20	REAR END PANEL de ?	1	\$ 712.00	\$ 712.00
21	REAR END PANEL TOP GARNISH X	1	\$ 287.00	\$ 287.00
22	REAR FLOOR PANEL TOP BOARD X	1	\$ 398.00	\$ 398.00
23	REAR FLOOR PANEL TOP SIDE SPONGE X	2	\$ 312.00	\$ 624.00
				\$ 8,484.10
			Less 20%	\$ 1,696.82
			Total	\$ 6,787.28
	S/Nett items:			
1	REAR BUMPER CLIPS de ✓	1	\$ 80.00	\$ 80.00 30
2	REAR TAILGATE INNER TRIM BOARD CLIPS X	1	\$ 80.00	\$ 80.00 X
3	REAR REVERSE SENSOR ?	1	\$ 250.00	\$ 250.00 200?
4	REAR END PANEL TOP GARNISH CLIPS X	1	\$ 80.00	\$ 80.00 X
5	REAR END PANEL SEALANT X	1	\$ 60.00	\$ 60.00 X
				\$ 550.00
	Labour to:			
1	TO CHECK REAR ELECTRICAL WIRING	1	\$ 150.00	\$ 150.00 X
2	TO REMOVE AND RENEW REVERSE SENSOR	1	\$ 150.00	\$ 150.00 40
3	TO REMOVE AND REFIT REAR GLASS	1	\$ 150.00	\$ 150.00 X
4	REMOVE AND RENEW REAR GARNISH / UPHOLSTERY	1	\$ 200.00	\$ 200.00 X
5	REMOVE AND RENEW TAILGATE MECHANISM	1	\$ 80.00	\$ 80.00 X
8	APPLY ANTI RUST ON AFFECTED AREAS	1	\$ 200.00	\$ 200.00 X
9	SPRAY PAINTING ON AFFECTED AREAS	1	\$ 1,000.00	\$ 1,000.00 300

10	PANEL BEATING ON AFFECTED AREAS	1	\$ 1,000.00	\$ 1,000.00 300
				\$ 2,930.00
			Parts Replacement Amount	\$ 7,337.28
			Total Amount for Labour	\$ 2,930.00
			Total Amount	\$ 10,267.28

Panel
HP 90010068
3 days
HS
15/09/22 @ 1700
Res after repair

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 Authorised 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	25/07/2022 10:39 (SGT)
Reported by	Driver
Date of Accident	22/07/2022 18:48 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG NEWTON FLYOVER TOWARDS BALMORAL PLAZA
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ1363E
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	LUMENS AUTO PTE LTD
Company Reg No	2XXXXX961K
Email Address	KOKHOWA.TAY@LUMENS.SG
Mobile Phone No	(Phone) +65-87781765
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D20MFL0005826-01

DRIVER

Name of Driver	WONG WING CHIONG
NRIC No	SXXXX2021
Date Of Birth	07/02/1962
Occupation	Outdoor

Date Of Driving Pass	20/11/1984
Driving experience	37 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82546888
Alt. Phone Number	-
Email Address	KOKHOW.TAY@LUMENS.SG
Address	50L FABER HEIGHTS, #04-83
Address complement	-
Postcode	129205
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	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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	PASSENGER
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 SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMM6238U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
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 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.
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

CITY AUTO PTE LTD

Blk 8 Sin Ming Road

#01-58/60/62 Sin Ming Ind Est

Singapore 575643

Tel: 6453 1235 Fax: 6453 7944

(Claims Section)

Witnessed by Reporting Centre Personnel

Sketch Plan

A SM2 1363R

B SM2 6238U

Newton flyover



BTVA

Salmon Rd
↑






Describe Circumstances of the Accident

I was travelling along Newton Flyover toward Patmora plaza when vehicle in front stop I follow to stop vehicle behind me did not stop on time and hit onto my rear

Declaration

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

CITY AUTO PTE LTD
 B/k 8 Sin Ming Road
 #01-58/60/62 Sin Ming Ind Est
 Singapore 575643
 Tel: 6453 1235 Fax: 6453 7944
 (Claims Section)
 Witnessed by Reporting Centre Personnel

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 961K

Vehicle Details

Vehicle No.: SMZ1363E

Vehicle to be Exported: No

Intended Deregistration Date: 18 Sep 2022

Vehicle Make: TOYOTA

Vehicle Model: PRIUS 5DR HATCHBACK (AUTO)

Primary Colour: Silver

Manufacturing Year: 2020

Engine No.: 2ZR2G89853

Chassis No.: JTDKB3FU303091844

Maximum Power Output: 90.0 kW (120 bhp)

Open Market Value: \$26,807.00

Original Registration Date: 12 Apr 2021

First Registration Date: 12 Apr 2021

Transfer Count: 0

Actual ARF Paid: \$14,530.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 11 Apr 2031

PARF Rebate Amount: \$10,897.00

Intended COE Rebate Details

COE Expiry Date: 11 Apr 2031

COE Category: B - Car above 1600cc or 97kW (130bhp)

COE Period(Years): 10

QP Paid: \$45,001.00

COE Rebate Amount: \$38,545.00

Total Rebate Amount: \$49,442.00

The information contained herein is correct as at 18 Sep 2022

OK

Toyota Prius Plus Hybrid 1.8A

Overview

Financial

Accessories

Similar

Research

Photos

Map

Republic Auto



A member of the Jardine Cycle & Carriage Group

Price **\$133,800**

Depreciation \$14,920 /yr
[View models with similar depre](#)

Reg Date 28-Dec-2020
(8yrs 3mths 9days COE left)

Mileage 38,511 km (22.3k /yr)

Manufactured 2020

Road Tax \$976 /yr

Transmission Auto

Dereg Value \$52,650 as of today ([change](#))

Fuel Type Petrol-Electric

COE \$45,012

OMV \$27,507

Engine Cap 1,798 cc

ARE \$20,510

Curb Weight 1,500 kg

Power 100.0 kW (134 bhp)

No. of Owners

1