ASS. REC. BY: CHALL REF: CCY ALS 220	10421/R003		
	1.1		
ASSI	GNMENT		
From: Date:	Veh No: Smr 2643L Yr Regn: 2020 1868		
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /		
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or		
To Inspect Vehicle No: SMU 2643L	Make: TOYOTA PRIWS HOA C.C 1798		
at Workshop m/s My CAR CONSULTAN	Colour WHTE A/C: Insured / Std / NI / NA		
of both LAM Hugh this 21	Sp.Reading [36366 T/Radio: Insured / Std / NI / NA		
Insured: MS	Eng/No:		
Policy No.	C/No: JTDKB3FU S03092770		
Claims No.	Gen. Cond: Good / Faigl Poor / Burnt		
Sum Insured: Excess:	Steering: Inforder / Jammed / Leaked / Burnt or		
(Client's Record)	Brake: (norder / Jammed / Leaked / Burnt or		
Make of Veh:	Modi : ANI I SIRIM, I STD A/Rim or		
	Tyre Size: F: 195/65815		
(Policy Condition)	R:		
(Policy Condition) Remark: The veh had commenced its N/S O/S			
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or FIRENCE		
Bal. or Market Value: [29K	Front Rear R/Bal. 6 mm		
IDAC Accident Rport: Consistent? : Yes or No	101 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 11111 - 4 - 11111 - 11111 - 4 - 11111 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 - 4 - 11111 -		
GIA / PR Seen: Consistent? : Yes or No	L/Bal. L/Bal. 6 mm		
Est. Repairs: days Res.: Yes or No	D.O.A. 19/10/22 D.O.I. 20/10/22		
Lum Sum: % 3 Val.: Yes or No	Survey held at My Cont		
CA / REV / REP. / 24 HRS	Des. of Damages Fr? Rear O/S N/S U/C Rooftop or		
Vehicle: IN / OUT	FRE, OSFRE & OS REAR		
Date: Person Contacted:	The U/C / Chassis frame Body Structure affected due to collision.		
Date / Time Action / Instruction REPRIL LIMIT - 84K			
hate/Time, File Pass to? : Preli. Report	Days Of Repair:		
: Final Report	Resurvey No. of Trip: Survey Fee:		
Date/Time, File Return to?			
Add Fee	Transportation:		
200166			
Report Format :	: Interview (\$) Photos		
· · · · · · · · · · · · · · · · · · ·	: Tech. Invs (\$) Others		
.ump Sum / I.B.I; (\$:Weekend (\$		

TOTAL

SJOG22AJ000D / JP Knights Pte Ltd ENTRY DATE & TIME: 19/10/2022 14:31 (SGT) SUBMITTED BY: SIU VERSION: 1 (19/10/2022 14:31 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 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 aforesaid.

ACCIDENT STATEMENT

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

19/10/2022 14:31 (SGT) Driver 19/10/2022 01:10 (SGT) Rochor Rd, Singapore JALAN BESAR Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMV2643L

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

Yes FOCUS RENTALS PTE LTD 2XXXXX450G operations@focusrentals.sg (Phone) +65-84988253 (Office) +65-98875600

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 Prius

Private hire

No - Claiming third party Private hire Auto 1798

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number India International Insurance Pte Ltd D20MFL0007747_01

DRIVER

Name of Driver NRIC No Date Of Birth

YAP THIAM POH SXXXXX074Z 02/03/1967 Outdoor

Date Of Driving Pass Driving experience

Gehder Mobile Number

Alt. Phone Number **Email 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

OTHER INFORMATION

Road Surface

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

Original language used in the statement

PASSENGER 1

Name Gender

PASSENGER 2

Name Gender UNKNOWN Male

02/09/2006

Male

460092

No

No

Hirer

Clear

Dry

No

Yes

No

Yes

3

No

2

16 YEARS AND 1 MONTH

operations@focusrentals.sq

Collision - Change/cross lane

92 BEDOK NORTH AVENUE 4 #06-1495

(Phone) +65-84988253

UNKNOWN Female

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

No

No

CIRCUMSTANCES OF ACCIDENT

ON 19/10/2022 AT AROUND 0110HRS, I WAS DRIVING VEHICLE A (SMV2643L) ALONG ROCHOR ROAD TOWARDS ROCHOR CANAL ROAD. I WAS DRIVING STRAIGHT ON LANE 2 OF THE SAID ROAD AND AS I WAS PASSING THROUGH THE CROSS JUNCTION OF ROCHOR ROAD AND JALAN BESAR/BENCOOLEN STREET, VEHICLE B (SMQ5868L) BEAT RED LIGHT AND TURNED RIGHT FROM JALAN BESAR TOWARDS BENCOOLEN STREET, INTO ROCHOR CANAL ROAD. THIS CAUSED THE FRONT OF VEHICLE B TO COLLIDE ONTO THE FRONT RIGHT OF VEHICLE A. VEHICLE A THEN SWERVED INTO THE PAVEMENT AND COLLIDED ONTO SOME CONSTRUCTION RAILINGS. I SUFFERED NECK AND BACK PAIN WHILE THE DRIVER OF VEHICLE B SUFFERED CHEST, NECK AND LEFT WRIST PAIN. NOBODY WAS CONVEYED TO THE HOSPITAL AND THERE WERE NO VEHICLES INVOLVED.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Yes No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer Vehicle Model Vehicle Variant

Vehicle Colour Vehicle Category 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)

SMQ5868L

Renault

Scenic

Red

Private hire

ANG SENG HUAT

(Phone) +65-92998933

Allianz Insurance Singapore Pte. Ltd.

INJURED PERSONS DETAILS

INJURED 1

Name of injured person

Gender Phone No Address

Address Complement

Post Code

Approximate Age Years Old

Injuries Sustained

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

INJURED 2

Name of injured person

Gender Phone No Address

Address Complement

Post Code

Approximate Age Years Old

Injuries Sustained

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YAP THIAM POH

(Phone) +65-84988253

92 BEDOK NORTH AVENUE 4 #06-1495

460092

55

NECK AND BACK PAIN

SMV2643L

Yes

ANG SENG HUAT

Male

(Phone) +65-92998933

CHEST, NECK AND LEFT WRIST

SMQ5868L

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 Authorised Driver
- 3. Information provided must be as <u>truthful</u> and <u>accurate as possible</u>. Any willful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 insurence 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)

Lunderstand, acknowledge, agree and consent that

- (a) My insurer in 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' law yers/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.
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (bc) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could invoive disclosure of certain personal data about me to bring about delivery of the same as wiell 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

FLASH ACCIDENT CONTROL REPORTING OFFICER
FRO SUFIYAN

Witnessed by Reporting Centre

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date 8 Time 19/10/2022 0230HRS

Sketch Plan



A - SMV2643L

Personnel

- B SMQ58681
- ROCHUR CANAL ROAD C CONSTRUCTION RAILINGS

Describe Circumstances of the Accident

ON 19/10/2022 AT AROUND 0110HRS, I WAS DRIVING VEHICLE A (SMV2643L) ALONG ROCHOR ROAD TOWARDS ROCHOR CANAL ROAD. I WAS DRIVING STRAIGHT ON LANE 2 OF THE SAID ROAD AND AS I WAS PASSING THROUGH THE CROSS JUNCTION OF ROCHOR ROAD AND JALAN BESAR/BENCOOLEN STREET, VEHICLE B (SMQ5868L) BEAT RED LIGHT AND TURNED RIGHT FROM JALAN BESAR TOWARDS BENCOOLEN STREET, INTO ROCHOR CANAL ROAD. THIS CAUSED THE FRONT OF VEHICLE B TO COLLIDE ONTO THE FRONT RIGHT OF VEHICLE A. VEHICLE A THEN SWERVED INTO THE PAVEMENT AND COLLIDED ONTO SOME CONSTRUCTION RAILINGS. I SUFFERED NECK AND BACK PAIN WHILE THE DRIVER OF VEHICLE B SUFFERED CHEST, NECK AND LEFT WRIST PAIN. NOBODY WAS CONVEYED TO THE HOSPITAL AND THERE WERE NO VEHICLES INVOLVED.

Declaration

Date/Tim

Date/Time.

eport Fo

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

Offiver's Signature (if driver is not the policyholder) / Date
4 Time 19/10/2022 0230HRS

FLASH ACCIDENT

Witnessed by Reporting Centre Personnel

> Back to OneMotoring

Enquire PARF/CDE Repate for Registered Vehicle

Owner ID:	Company 450G
Vehicle to be Exported: Intended Deregistration Date: Vehicle Make: Vehicle Model: Primary Colour: Manufacturing Year: Engine No.: Chassis No: Maximum Power Output: Open Market Value: Original Registration Date: First Registration Date: Transfer Count: Actual ARF Paid:	SMV26A3L No 21 Oct 2022 TOYOTA PRIUS 5DR HATCHBACK (AUTO) White 2020 2ZR2H20459 JTDKB3FU503092770 90.0 kW (120 bhp) \$26,807.00 24 Sep 2020 0 \$19,530.00
PARF Eligibility: PARF Eligibility Expiry Date: PARF Kelale Arraune	Yes 23 Sep 2030 \$2.4.647.00
COE Expiry Date: COE Category: COE Period(Years): OP Paid: COE Rebate Amount: Total Rebate Amount	23 Sep 2030 B - Car above 1600cc or 97kW (130bhp) 10 \$37,900.00 \$30,025.00 \$44,672.00

OK

Toyota Prius Plus Hybrid 1.8A

<u>Overview</u> Fina	incial Accessories Sin	nilar Research	Photos Map
Price	\$131,800		
Depreciation ()	\$14,790 /yr View models with similar depre	Reg Date	25-Nov-2020 (8yrs 1mth 3days COE left)
Mileage	37,396 km (19.6k /yr)	Manufactured ()	2019
Road Tax ()	\$976 /уг	Transmission	Auto
Dereg Value (1)	\$51,294 as of today (change)	Fuel Type	Petrol-Electric
COE (*)	\$41,101	OMV ()	\$30,007
Engine Cap	1,798 cc	ARF (i)	\$24,010
Curb Weight	1,500 kg	Power	100.0 kW (134 bhp)
Type of Vehicle	MPV	No. of Owners 🚯	<u>1</u>