1-32-C6Z5

Not Nother We Print AAD2210-

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

SHC5048U

	Vehicle No.:		SHC50	048U
	Chassis No.:	0.0.007.000	JTDKB:	3FU303092766
	UEN No:	2 0 OCT 2022	20030	3878K
	Vehicle Make:		TOYO	
	Vehicle Model:	¥		GEN 4
	Date of Accident :		17/10/	/2022
	Third Party Insurer:		SLA76	604P/AIG
	Date of Registration:		20/11/	/2020
		ART		LIST
	1 COVER SUB-ASSY, FRONT PILLA	R, UPR RH	\$	100.40
	1 FENDER SUB-ASSY, FRONT RH		\$	By 977.80 ~
	1 LINER, FRONT FENDER, RH		\$	CM 202.50 -
	1 EMBLEM, SIDE PANEL		\$	Mcc 54.60
	1 FENDER SUB-ASSY, FRONT LH		\$	Bu 977.80 -
	1 LINER, FRONT FENDER, LH		\$	№ 210.30 X
	1 EMBLEM, SIDE PANEL		\$	m 54.60 -
	1 HUB CAP		\$	211.50 ×
	1 RIM		\$	1,900.10 X
	1 SUPPORT SUB-ASSY, RADIATOR,		\$	3 245.10 <u></u>
	 SUPPORT SUB-ASSY, RADIATOR, I 	LH	\$	A 245.10 —
	1 SUPPORT SUB-ASSY, RADIATOR, I	JPPER	\$	R 277.10
	1 COVER, RADIATOR SUPPORT OPE		q.	R _{377.10} —
	1 BAR, STABILIZER, FRONT		\$	211.50 7
	1 COVER, FRONT BUMPER		\$	353.60 7
	1 MOULDING, FRONT BUMPER SIDE	DLI	\$	R 521.00 -
	1 MOULDING, FRONT BUMPER SIDE		\$	cm 95.60 —
			\$	€ 95.60 X
	TOTAL MOINT BOINTEN EXTENS	ION MOUNTING	\$	Dit 110.50
	THE THE PROPERTY OF ASST, PROP	IT BUMPER	\$	7 716.60
	1 REINFORCEMENT, FRONT BUMPER	, NO.2	\$	
-	1 ABSORBER, FRONT BUMPER, LOWE	ER .	¢	246.10 ?
1		SY	.	cm 132.70 —
1		1	\$	CM 80.20 —
1			\$	82.30 7
1		1 8	\$	cm 80.10 w
	COVER, ENGINE UNDER, NO.1		\$	472.40 7
1	COVER SUB-ASSY, ENGINE UNDER,	NO.2	\$	
1	EXTENSION, FRONT BUMPER, LH		¢	241.90 7
			Ф	120.10 X

292.40 ?

67.00 7

646.80 7

% 1,783.20 –

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MOTOR AND PUMP ASSY, WINDSHIELD WASHER

INLET SUB-ASSY, WASHER

CONDENSER ASSY, COOLER

HOSE SUB-ASSY, SUCTION

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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		AAD2210-
SHC5048U 1 FRT NUMBER PLATE WITH HOLDER 1SET BUMPER CLIP FRT 1 TYRE 1SET FRNT BUMPER RETAINER CLIP 4L Radiator Coolant 1 HOOD INSULATOR CLIP 1 Engine Under Cover Clip 2 FRT FENDER LINER CLIP	\$ \$ \$ \$	140.00 45m 140.00 45m 140.00 605m 140.00 X 140.00 X 140.00 305m 140.00 305m 140.00 7 140.00 7 140.00 7 140.00 7 140.00 7 140.00 7 140.00 7 140.00 7 140.00 7
TOTAL PARTS	\$	43,108.18
LABOUR To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	.\$	~~ 380.00 X
Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	4,500.00 100d
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	~~ 380.00 X
To transfer of Tailgate fittings, attachments and perform water seepage test.	\$	^~ _{180.00} ⊀
To remove and refit electrical wiring, battery and other necessary items to facilitate bodywork repair.	\$	480.00 50
To transfer of Fender fittings, attachments and perform water seepage test.	\$	~~ 480.00 X
To dismantle and refit aircon assy and attachment, vacuum and charge-in-gas.	\$	380.00 1001
Labour charge to mount and dismount vehicle on jig bench, to facilitate repair.	\$	380.00 7

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CO./GST Reg. No. 201019626G

SHC5048U

the Repairer of the following: To resurvey before/after spray painting (PART-BY-PART) Repair Days		25 DAYS		
LKK Auto Consultants hence notify. Over All Total	\$	55,39	8.18	
		12,29	0.00	•
TOTAL	<u>\$</u>	12 20	Mark to	. X
To conduct and perform a comprehensive vehicle diagnostic check and reset vehicle warning indicators.		•		
To conduct and perform a comprehensive webit at the		J.	00.00	1
necessary items to enable bodywork repair.	\$	3	80.00	7
To remove and refit radiator support cross-member and other				
To lift-up / out engine with gear box and refit.	\$	4	40.00	?
To replace, refix and top up coolant for radiator	\$	1	70.00	501
To transfer of tire, rim and on wheel balancing.	\$	An 2	20.00	X
perform water seepage test.	\$	10 38	80.00	X
To transfer of luggage floor panel fittings, attachment and				
To Check Electrical Lighting Concerned.	\$	1	70.00	201
To reinstall rear bumper parking sensor.	\$	1 1	70.00	X
Putty And Spray Painting Of The Affected Portion.	\$	2,2	00.00	132
Towing Fees	\$	1	50.00	601
To Rust-Proofing and apply undercoat Of The Affected Areas.	\$.2!	50.00	1201
To check steering geometry and computer wheel alignment	\$	22	20.00	601

- 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

Date:

Signature:

AAD2210-

25 DAYS 14 day,

© SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

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.

The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for Investigation.
 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.
 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

18/10/2022 16:43 (SGT) Date of Submission Driver Reported by 17/10/2022 06:30 (SGT) Date of Accident Singapore **Exact Location of Accident** ALONG ANG MO KIO AVE 6 BEFORE ANG MO KIO AVE 9 Additional Location Information JUNCTION TOWARDS LENTOR Singapore Country/State of Loss

DETAILS OF OWN VEHICLE SHC5048U Vehicle Registration Number INSURED/POLICYHOLDER Is company? Name Of Registered Owner TRANS-CAB SERVICES PTE LTD Company Reg No 2XXXXX878K **Email Address** claims@transcab.com.sg Mobile Phone No (Phone) +65-62876666 Alternative Phone No VEHICLE PARTICULARS Manufacturer Toyota Model **Prius** Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to vour vehicle? No - Claiming third party Vehicle Category Transmission Auto 1798 **INSURANCE COMPANY** AXA Insurance Pte Ltd

Name of Insurance Company Policy Number / Cover Note Number VFX/P2413997

DRIVER

Name of Driver **TONG CHEE HIONG** NRIC No SXXXX990B Date Of Birth 24/09/1957



37-C645

Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number **Fmail 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

Outdoor 23/08/1979 43 YEARS AND 2 MONTHS Male (Phone) +65-96693067

Claims@transcab.com.sg HDB Hougang, 165 Hougang Avenue 1

530165 No Hirer

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collision - Cross Junction Raining Wet

OTHER INFORMATION

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? Yes Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement

DETAILS OF POLICE ACTION

Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?

Yes Ang Mo Kio North Neighbourhood Police Centre (Phone) +65-18004849999 (Fax) +65-62181399 51 Ang Mo Kio Avenue 9 Singapore 569784 No

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO.T/20221018/2063

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 SLA7604P Vehicle Manufacturer Kia Vehicle Model Forte

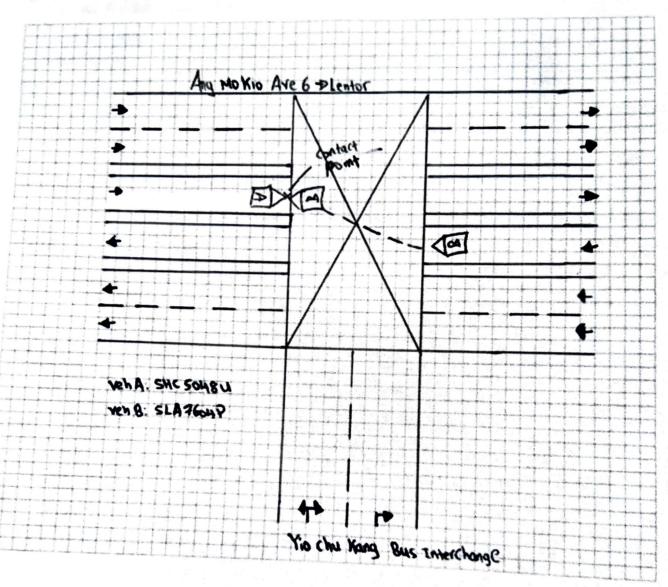
Vehicle Variant	_
Vehicle Colour	Black
Vahida Catagon	
	Private car
Name of Driver	ya
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	2
PASSENGER 1	
Name	P1
Gender	
Genuel	remale

INJURED PERSONS DETAILS

Yes

INJURED 1 Name of injured person TONG CHEE HIONG Gender Male Phone No (Phone) +65-96693067 Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SHC5048U Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? Yes **INJURED 2** Name of injured person MALE DRIVER Gender Male Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SLA7604P Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? Yes INJURED 3 Name of injured person **FEMALE PASSENGER** Gender **Female** Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SLA7604P Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance?





Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer Ang Qi Hao, Victor Witnessed by Reporting Centre Personnel





1 of 3

Report No. T/20221018/2063

ambulance:

No

Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Between Moving Vehicles - Head On

Tel No: 1800-4849999

Date/Tim	ne Report I 122 15:11	C ACCIDENT Made:	Vide Report No.:				Station Diary No.: 34	
		ulars						
Informant's Particulars Name of Informant: TONG CHEE HIONG ID Type / ID No.: NRIC NO / S1263990B			Address: APT BLK 165 HOUGANG AVENUE 1 #05-1608 SINGAPORE 530165					
			Contact No :			Mobile: 9	: 96693067	
Nationali	AND DESCRIPTION OF THE PARTY OF		Email:					
Sex: Male	Age: 65	Date of Birth: 24/09/1957	Type of Informant: Driver Institution / School Nan			- / Cahool Name		
Race: Chinese			English			n / School Name.		
Occupation: Taxi driver			Driving Licence Information: Class: Date of Expiry:			xpiry:		
Type of Accident: Accident: Accident:			Drink				Type of Location Straight Road	
Location	n: O KIO AVE	ENUE 6						
Weather:			Road Surface: Wet				Road Speed Limit:	
Traffic Flow: One Way			Traffic Control: Not Controlled				Traffic Volume: Light	
ype of (Collision:		200				Anyone conveyed by	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHC5048U	Car		251			0
SLA7604P	Car					0





2 of 3

Report No. T/20221018/2063

Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No: 1800-4849999

CONTINUATION OF REPORT

Brief Details.

Reference to report number F/20221017/0040

On 17/10/2022 at about 0630hrs I was traveling along ang Mo Kio Ave 6 towards Lentor.

I was at the junction between the Ang Mo Kio Ave 6 and the road from the bus interchange where the buses come out.

Suddenly I saw two headlights coming towards me from the opposite direction. I quickly pressed the brakes to avoid the impact.

Unfortunately the car (SLA 7604P) directly banged onto my car at the front .

After few seconds I came out of my car and saw a motor cycle at the center of the junction. The motorcyclist then pointed me to a car (SLA7604P).

I then approached the car and the driver was inspecting his car. He admitted that he drove into my lane accidently and banged onto my car.

Ambulance came and conveyed me and the motorcyclist to KTPH.

I was given 7 days of medical leave.

damage to my car:

- 1) the front portion completely damaged
- 2) the rear tyres were punctured

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle				
Vehicle Owner Particulars				
Owner ID Type:	Company			
Owner ID: Vehicle Details	878K			
Vehicle No.:	SHC5048U			
Vehicle to be Exported:	Yes			
Intended Deregistration Date:	19 Oct 2022			
Vehicle Make:	TOYOTA			
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)			
Primary Colour:	Red *			
Manufacturing Year:	2020			
Engine No.:	2ZR2H21048			
Chassis No.:	JTDKB3FU303092766			
Maximum Power Output:	90.0 kW (120 bhp)			
Open Market Value:	\$26,807.00			
Original Registration Date:	20 Nov 2020			
First Registration Date:	20 Nov 2020			
Transfer Count:	0			
Actual ARF Paid: Intended PARF Rebate Details	\$14,530.00			
PARF Eligibility:	Yes			
PARF Eligibility Expiry Date:	19 Nov 2028			
PARF Rebate Amount: Intended COE Rebate Details	\$10,897.00			
COE Expiry Date:	19 Nov 2028			
COE Category:	A - Car up to 1600cc & 97kW (130bhp)			
COE Period(Years):	8			
PQP Paid:	\$29,180.00			
COE Rebate Amount:	\$22,188.00			
Total Rebate Amount:	\$33,085.00			

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 19 Oct 2022

Message