SS. REC. BY:	2014
ASSI	GNMENT
From: Date:	Veh No: SLU 362C Yr Regn: 2017 7NVV
Estimated Cost:	Type: M.Carl 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: SLW 362C	Make: TOYOTA PRIMSHYBRIO18 c.c 1798
at Workshop m/s Borne Motor	Colour CROY A/C: Insured J'Std J NI J NA
of Pansan crescent	Sp.Reading 435760 T/Radio: Insured Std / NI / NA
Insured: FCL	Eng/No:
Policy No.	C/No: JTPKB3FU003576006
Claims No.	Gen. Cond: Good Fair Poor Burnt
Sum Insured: Excess:	Steering: Inorder Jammed / Leaked / Burnt or
(Client's Record)	Brake: norder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NII I STE A/Rim or
The state of the s	Tyre Size: F: 195/65R15
(Policy Condition)	R: * * *
Remark: The veh had commenced its N/S O/S	BS (DUN/ EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO I YOKO or
Bal. or Market Value:	Front Rear
	R/Bal. 6 mm R/Bal. 6 mm
ADVIO VIONADIRE INPORTA	1/Bal. 6 mm
Day Marie No.	D.O.A. 17/1/22 D.O.I. 18/11/22
Cold (March 1)	9-01441- 0-0
Lum Sum: % 3 Val.: Yes or No	
CA / REV / REP. / 24 HRS	Des. of Damages: Fit / Rear / O/S / N/S / U/C / Roonop or
Vehicle: 1N / OUT Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
26000 1.55 - SQV	· · · · · · · · · · · · · · · · · · ·
KCP40C C.	*
1	
1	
ate/Time, File Pass to? : Preli. Report	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Fee:
	Transportation:
ate/Time, File Return to?	***
ate/Time, File Return to? Add Fe	



Borneo Motors



Customer Details

M/S Grab Rentals Pte Ltd

YrRe

Taxi

Inchcape

Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9 No. 2 PANDAN CRESCENT

SINGAPORE 128462, Tel no.: 6631 1188

Account Details

ESTIMATE

S1000005 / ICFIC1

Account No.

AS Firet	Canital Insurance I td		0,100000	• 1515-151 State 1	IN/S C	SIAD Remais) I to Liu			
36 Robins #16-01 C	First Capital Insurance Ltd Robinson Road 5-01 City House gapore 068877).	#01-0	lia Close 3/06 pore 13849	8			
	e 068877 or Claims Dept		Document Da 17/11/2022		Work	: 65703925				
Year	Model	Variant F	Reg. Date	Reg. No.	Kilome	eters V	Vip No.	Order No	. / Rem	narks
2017	ZVW50R AHX	XEBW Q2 2	1/11/2017	SLU0362C		0	18674	74 75/DS/SLU0362C		
С	hassis No.	Engine No.	Terms	SA / Counter		Ve	ehicle In	Co	llected	On
JTDKE	33FU003576006 2	2ZRS111198	60	Ng Mei Yen		//	0.00	//	-	0.00
_ Cd		Job/Parts Description				Qty	Unit Price	Disc %		Amount
2 B B B B B B B B B B B B B B B B B B B	DATE-IN: DATE NO OF REPAIR DAYS: BY: AUTHORIS BP-LAB2 CHECK WIF BP-LAB2 TO RESET BP-LAB2 DRILL HOLE BP-LAB2 REPL ACC A STRAIGHTEN & PANEL BP-RES2 RESPRAY A J52159-47913 COVE J52575-47040 RETAI J52576-47040 RETAI J52023-47030 REINF J52453-47030 GUAR J52565-47900 FILLEI J52161-16010 PIECE	ACC DATE:17/11 EXCESS: SURVEY: SED ON: RING & CONDUCT ECU AND REPROCE AND INSTALL RE	LEAK TEST GRAMME EVERSE SENS REA 7			1.00 1.00 1.00 1.00 1.00 1.00 10.00	127.4 126.1 126.1 1360.1 1506.2 133.6 14.8	0 0 0 20 80 80	30	198.00 198.00 198.00 198.00 3188.00 478.9 127.4 126.1 360.1 506.2 133.6 48.0
& on behalf of neo Motors (Singapore) Pte Ltd Customer's Signature Charge Summary					ary	Total				
		Please acknowledge red	ceipt of vehicle	Parts Labour Sublet Lubrication/Fluid Others			Less	unt Due		



Borneo Motors



Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9 No. 2 PANDAN CRESCENT

SINGAPORE 128462, Tel no.: 6631 1188

ESTIMATE

		Account Det	tails	Account No.			C	ustomer C	Details	
MS First Capital Insurance Ltd 36 Robinson Road #16-01 City House Singapore 068877			S1000005 / ICFIC1 Document No. 0		M/S Grab Rentals Pte Ltd 3 Media Close #01-03/06 Singapore 138498					
		Claims Dept		Document Da 17/11/2022		Work: 6570	3925			
Yea	г	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip I	No.	Order No.	/ Remarks
201	7	ZVW50R	AHXEBW Q2	21/11/2017	SLU0362C	0	186	74	75/DS/SL	.U0362C
	Cl	hassis No.	Engine No.	Terms	SA / Counter		Vehicle	e In	Coll	ected On
JTI	DKB	33FU003576006	2ZRS111198	60	Ng Mei Yen	/-	-/	0.00	//	0.00
L	Cd		Job/Parts Des	scription			Qty Un	it Price	Disc %	Amount
15 16	_	LKK Auto Consul the Repairer of tr • To resurvey before! • To display damage: • Parts prices are sui • Third party survey: • No illegal modifical	lafter spray painting d part(s) during resurvey bject to confirmation is on a "Without Prejudice" tion(s) is allowed m(s) must be resurveyed ar pproval from Insurance Cor	basis ad mpany	Rasin Hp 900100 3 days 18/11/22@ Res Sef	G8 1520 an full	1.00	69.90 544.40	1	69.90 544.40
		behalf of Motors (Singapore) Pt	te Ltd	er's Signature dge recelpt of vehicle	Charge S Parts Labour Sublet Lubrication/Fluid		2,883.60 6,486.00 0.00 0.00		.00%	9,369 655
					Others		0.00			

SA1Z22BH0003 / Appraisals Associates Pte Ltd ENTRY DATE & TIME: 17/11/2022 15:58 (SGT) SUBMITTED BY: Jenny Ong VERSION: 1 (17/11/2022 15:58 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> 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

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	17/11/2022 15:58 (SGT) Driver 17/11/2022 07:10 (SGT) Woodlands Ave 3, Singapore TOWARDS WOODLANDS ROAD, AFTER WOODLANDS STREET 31
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

SLU362C

INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	Yes GRAB RENTALS PTE LTD 2XXXXX200G gr.sg.accident@grab.com (Phone) +65-90905770 (Office) +65-66550005

VEHICLE PARTICULARS

Vehicle Registration Number

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	,
your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	
CC	Auto
	1798

INSURANCE COMPANY

C Accident report CA17000

Name of Insurance Company Policy Number / Cover Note Number	MSIG Insurance (Singapore) Pte. Ltd. 400000730
---	--

DRIVER

Name of Driver		
NRIC No.	51	TEC
Date Of Birth		SXX
	The state of the s	451

Occupation Date Of Driving Pass Outdoor Driving experience 22/05/2003 Gender 19 YEARS AND 6 MONTHS Mobile Number Male Alt. Phone Number (Phone) +65-93801643 **Email Address** gr.sg.accident@grab.com Address APT BLK 473A UPPER SERANGOON CRESCENT Address complement #13-319 Postcode 531473 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 - Change/cross lane 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? Yes Was any injured conveyed to hospital by ambulance? No 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 Hougang Neighbourhood Police Post Police Station Address Blk 357 Hougang Avenue 7 #01-805 Singapore 530357 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT

ON 17.11.2022, AT OR ABOUT 0710 HOURS, I WAS DRIVING MY MOTORCAR BEARING REGISTRATION NUMBER SLU362C AND ON THE LEFTMOST LANE OF THREE LANES ROAD ALONG WOODLANDS AVENUE 3 TOWARDS WOODLANDS ROAD, AFTER WOODLANDS STREET 31. SUDDENLY I FELT AN IMPACT FROM MY REAR RIGHT AND REALISED THAT A WHITE MAN TRUCK PRIME MOVER BEARING REGISTRATION NUMBER XE4777E HAD COLLDED ONTO THE REAR RIGHT PORTION OF MY CAR WHIKST I WAS CONSTANTLY TRAVLLING ON THE LEFTMOST LANE.

THE DRIVER OF THE SAID MAN TRUCK AND I STOPPED AND EXCHANGED PARTICULARS. I WISH TO STATE THAT I HAD ONE FEMALE PASSENGER AT THE MATERIAL TIME.

I LATER FELT BODILY PAIN AND CONSULTED A DOCTOR AND RECEIVED 7 DAYS OF MEDICAL LEAVE. I THEREFORE LODGED A POLICE REPORT IN RELATION TO THE ACCIDENT FOR WHICH REPORT NUMBER IS T/20221117/2048 AND IO INCHARGE IS IO MUHAMMAD NOOR FROM TRAFFIC POLICE (CTC: 6547 6219).

Accident report SA1722PU0000

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

Details of property damaged in accident No. Of Passenger (Including Driver)

Yes Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number XE4777E Vehicle Manufacturer Man Vehicle Model TGS 18.360 4X2 BLS Vehicle Variant Vehicle Colour White Vehicle Category Commercial vehicle Name of Driver YANG XUE Passport No/FIN GXXXX374T **Contact Number** (Phone) +65-86027066 Address Address complement Postcode Insurance Company Name Nature Of Damage

INJURED PERSONS DETAILS

INJURED 1

Name of injured person TEO SWEE BUCK STEVEN Gender Male Phone No (Phone) +65-93801643 Address APT BLK 473A UPPER SERANGOON CRESCENT Address Complement #13-319 Post Code 531473 Approximate Age Years Old Injuries Sustained **Boidly Pain** Injured person in which vehicle? SLU362C Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the dietails 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.
- 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 forw arded 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 w orkshop 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 :
- (ii) 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 w ith my instructions or responding to any enquiries by me;
- (w) 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 taw 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' taw yers/law tirms, 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 discosed 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 of singapore, for one or more of the above Purposes.

TEO SWEE BUCK STEVEN SURIA Policyholder's Signature / Date & Driver's Signature (if driver is not the policyholder) / Drate Witnessed by Reporting Centre Time & Time 17.11.2022 @ 1500hrs Personnel Sketch Plan WOODLANDS AVENUE 3 TOWARDS WOODLANDS ROAD AFTER WOODLANDS STREET 31 VEHICLE A SLU362C VEHICLE B. XE4777E VEH A VEH B > CASSEGAL ECON SERANDI SELLEM SECAL CON

3

7

.

The Charles and Call Colonial Colonial

A Southern L. A. Marie

STCH PLAN #2

Describe Circumstances of the Accident

ON 17.11.2022, AT OR ABOUT 0710 HOURS, I WAS DRIVING MY MOTORCAR BEARING REGISTRATION NUMBER SLU362C AND ON THE LEFTMOST LANE OF THREE LANES ROAD ALONG WOODLANDS AVENUE 3 TOWARDS WOODLANDS ROAD, AFTER WOOD LANDS STREET 31. SUDDENLY I FELT AN IMPACT FROM MY REAR RIGHT AND REALISED THAT A WHITE MAN TRUCK PRIME MOVER BEARING REGISTRATION NUMBER XE4777E HAD COLLDED ONTO THE REAR RIGHT PORTION OF MY CAR WHIKST I WAS CONSTANTLY TRAVLLING ON THE LEFTMOST LANE.

THE DRIVER OF THE SAID MAN TRUCK AND I STOPPED AND EXCHANGED PARTICULARS. I WISH TO STATE THAT I HAD ONE FEMALE PASSENGER AT THE MATERIAL TIME.

I LATER FELT BODILY PAIN AND CONSULTED A DOCTOR AND RECEIVED 7 DAYS OF MEDICAL LEAVE. I THEREFORE LODGED A POLICE REPORT IN RELATION TO THE ACCIDENT FOR WHICH REPORT NUMBER IS T/20221117/2048 AND IO IN-CHARGE IS 10 MUHAMMAD NOOR FROM TRAFFIC POLICE (CTC: 6547 6219).

Declaration

I/We declare the foregoing particulars are true in every

TEO SWEE BUCK STEVEN

Driver's Signature (If driver is not the policyholder) / Date & Time 17.11.2022 @ 1500hrs

Witnessed by Reporting Contro

Policyholdar's Signatura / Data & Time

SURIA Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Dwner ID Type:	Company
Owner ID:	200G
/ehide No±	SLU362C
ehide to be Exported:	Nd
ntended Deregistration Date:	21 Nov 2022
(ehicle Make:	Toyora
Ænice Model:	PRIUS HYBRID 18 CYT
Primary Colour:	SINE
danufacturing Year:	2017
ngine Noz	2ZRS111198
Chassis No.	JTDKB3FU003576006
Yaxlmum Power Output:	90.0 kV
Open Market Value:	531.C
Original Registration Date:	21Nov 2017
First Registration Date:	21 Nov 2017
Fransfer Count:	D
Actual ARF Paid:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Nov 2027
PARF Rebate Amount:	\$3,788.∞
COE Expiry Date:	20 Nov 2027
COE Category:	B-Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
OP Paid:	\$57,414.00
COE Rebate Amount:	\$28,701.00
Total Rebate Amount	\$32,489.00

The information contained herein is correct as at 21 Nov 2022

Toyota Prius Hybrid 1.8A

Overview

Financial

Accessories

Similar

Research

Photos

Мар

OTOPOC MOTORS

Price

\$109,000

Depreciation ②

\$16,360 /yr

View models with similar depre

Reg [

25-Oct-2018

(5yrs 11mths 3days COE left)

Mileage

51,600 km (12.7k /yr)

Manufactured ⑦

2018

Road Tax ②

\$976 /yr

Transmission

Auto

Dereg Value 🕖

\$36,565 as of today (change)

Fuel Type

Petrol-Electric

COE ①

\$31,302

OMV ()

\$30,006

Engine Cap

1,798 cc

ARF

\$24,009

Curb Weight (2)

1,500 kg

Power

100.0 kW (134 bhp)