

ASS. REC. BY:

REP:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

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.

N/S	O/S

Bal. or Market Value: _____

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: SJX1454 A Yr Regn: 2009 / Feb.Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Altis C.C. 1598Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 184889 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR0S3ZEE106138375Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orMod: Nil / S/Rim / STD A/Rim orTyre Size: F: 205/55R16R: 205/55R16BS: DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 29/4/22Survey held at Xin Hua

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Front N/S

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

Date / Time	Action / Instruction
	<u>TP Allianz</u>
	<u>COE Expiry: 04/02/29</u>
	<u>MV: 52K</u>
	<u>PV: 16K</u>
	<u>Nett: 86K</u>

Date/Time, File Pass to?

☐ : Preli. 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 (\$)☐ : Techn. Insp (\$)

Photos

Others

Report Format: _____

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 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 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	28/11/2022 16:06 (SGT)
Reported by	Both
Date of Accident	25/11/2022 17:37 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	MIDVIEW CITY MULTI-STOREY CARPARK (LEVEL 4)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN1454A
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KOH CHENG WAI
NRIC No	SXXXX840Z
Email Address	kcwbai@gmail.com
Mobile Phone No	(Phone) +65-97107565
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	ALTIS 1.6 AUTO
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1598

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	-

DRIVER

Name of Driver	KOH CHENG WAI
NRIC No	SXXXX840Z
Date Of Birth	09/10/1989
Occupation	Indoor

Date Of Driving Pass	20/02/2010
Driving experience	12 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97107565
Alt. Phone Number	-
Email Address	kcwbai@gmail.com
Address	BLK 827 WOODLANDS STREET 81 #11-86
Address complement	-
Postcode	730827
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 on collision
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)	1
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	-

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

ON THE STATED DATE AND TIME, I WAS TRAVELING STRAIGHT ALONG MIDVIEW CITY MULTI STOREY CARPARK LEVEL 4. VEHICLE BEARING CARPLATE SMX6532L SUDDENLY CAME OUT FROM THE CARPARK LOT WITHOUT OBSERVING THE TRAFFIC, CAUSING THE COLLISION AND DAMAGES TO THE FRONT LEFT HANDPORTION OF MY VEHICLE

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	SMX6532L
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 Police Officer who is the Author of the Report.
3. Information provided must be as accurate and as complete as possible. Any willful misrepresentation or withholding of material facts may result in insurance companies to refuse to pay claims.
4. The issue and acceptance of this Form by the Police Officer constitutes a solemn declaration of truth and veracity on the part of the officer and is conditional.
5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the officers to the GSA Records Management Centre established by the General Insurance Association of Singapore (GIAS) for retention and that access of the report will be made available to an insurance company by electronic means.
7. By the signature of the officer at the bottom, the officer certifies that the information contained in the report is true and correct and is a true and correct report being made by the officer.
8. Consent under the Personal Data Protection Act (PDPA)

I understand and acknowledge, agree and consent that:

a. I am aware of my obligation to the General Insurance Association of Singapore (GIAS) to provide accurate and complete information to the GSA Records Management Centre established by the General Insurance Association of Singapore (GIAS) for retention and that access of the report will be made available to an insurance company by electronic means.

b. I have provided information to the GSA Records Management Centre established by the General Insurance Association of Singapore (GIAS) for retention and that access of the report will be made available to an insurance company by electronic means.

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JKH

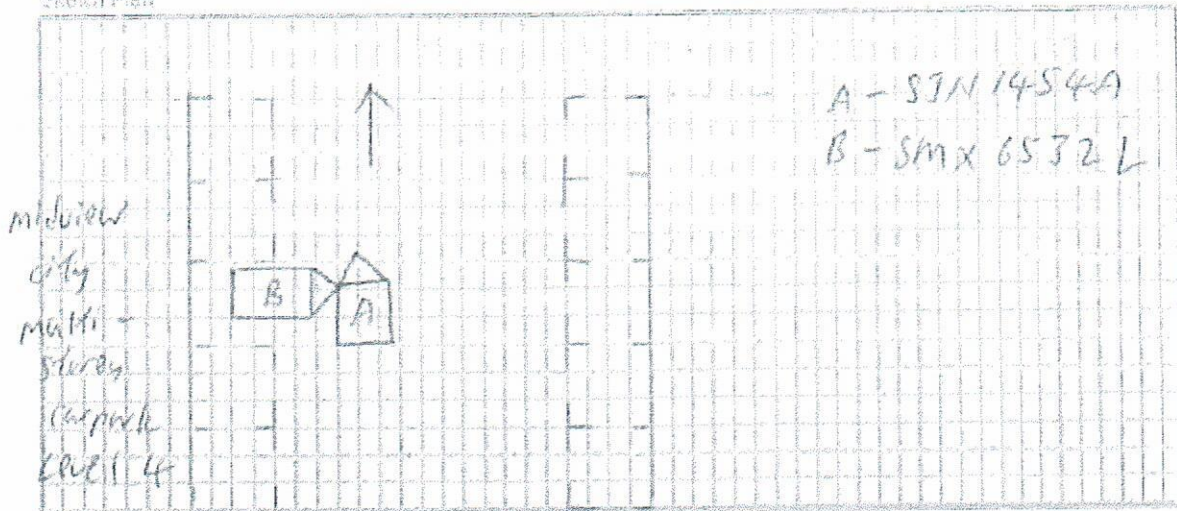
JKH

Police Officer's Signature / Date / Time

Police Officer's Signature / Date / Time

Insurance Company's Signature / Date / Time

Sketch Plan



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	840Z
Vehicle Details	
Vehicle No.:	SJN1454A
Vehicle to be Exported:	Yes
Intended Deregistration Date:	29 Nov 2022
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Blue
Manufacturing Year:	2008
Engine No.:	3ZZ4862512
Chassis No.:	MR053ZEE106138575
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$16,167.00
Original Registration Date:	05 Feb 2009
First Registration Date:	05 Feb 2009
Transfer Count:	3
Actual ARF Paid:	\$16,167.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	04 Feb 2029
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$25,727.00
COE Rebate Amount:	\$15,909.00
Total Rebate Amount:	\$15,909.00

The information contained herein is correct as at 29 Nov 2022

OK

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Used Car Comparison

--- Comparing 4 Vehicles ---

Toyota Corolla Altis 1.6A (COE till 02/2029)

[Add to Shortlist](#)
Toyota Corolla Altis 1.6A (COE till 01/2029)

[Add to Shortlist](#)
Toyota Corolla Altis 1.6A (COE till 03/2029)

[Add to Shortlist](#)
Toyota Corolla Altis 1.6A (COE till 04/2029)

[Add to Shortlist](#)
[Clear All](#)
[Add all to Shortlist](#)
[Back to search result](#)

CAR DETAILS

	Toyota Corolla Altis 1.6A (COE till 02/2029)	Toyota Corolla Altis 1.6A (COE till 01/2029)	Toyota Corolla Altis 1.6A (COE till 03/2029)	Toyota Corolla Altis 1.6A (COE till 04/2029)
Price	\$52,800	\$56,800	\$56,800	\$59,800
Instalment	N.A.	N.A.	N.A.	N.A.
Registration Date	03-Feb-2009	04-Feb-2009	14-Apr-2009	07-May-2009
Manufactured	2008	2008	2009	2009
Mileage	173,619 km	-	-	223,300 km
Transmission	Auto	Auto	Auto	Auto
Engine Cap	1,598 cc	1,598 cc	1,598 cc	1,598 cc
Road Tax	\$1,039 /yr	\$1,039 /yr	\$1,039 /yr	\$1,039 /yr
Power	80.0 kW (107 bhp)	80.0 kW (107 bhp)	80.0 kW (107 bhp)	80.0 kW (107 bhp)
Curb Weight	1,195 kg	1,195 kg	1,195 kg	1,195 kg
Features	1.6L fuel efficient 16 valve DOHC VVT-I engine, smooth auto transmission, ECT, dual SRS airbags, ABS, 4 x disc brakes, digital climate control aircon.	-	-	-
Accessories	Leather seats, sports rims, factory fitted audio with steering control, reverse sensors, auto retractable side mirrors with indicators, fog lights.	-	-	-
Description	\$0 downpayment available. 90% loan of the car price approval by GV Cars financing at 3.28% in 24 hours. Add on 2 years warranty on engine and gearbox by GV Motorworks. 1 to 1 exchange without cash top up. Operating hours from 10am to 10pm. Enquiries 24/7.	Excellent condition private use. Nice and clean interior, no repairs needed.Full loan and insurance provided. Monthly 890, trade in welcome.	Full Loan Available! We Are Sgcarmart Premium Dealer! Buy With Confidence! In House Loan Or Bank Loan Available! Fast And Easy Loan Approval! All Our Vehicles Has Undergone A 120 Points Check At SW Werks! Peace Of Mind! Accident Free! No Worries! Warranty Provided By SW Werks! Open Daily Including Weekends And Public Holidays!	New Road Tax, New Leather, New Tyres, Welcome, 90% Loan Attractive Interest Rates Today! Price Gst.
COE	\$25,727	\$26,047	\$25,525	\$26,175
OMV	\$16,084	\$16,167	\$16,990	\$17,500
ARF	\$7,608	\$16,167	\$3,822	\$17,500
Depreciation	\$8,540 /yr	\$9,190 /yr	\$8,960 /yr	\$9,310 /yr
No. of Owners	4	3	2	5
Type of Vehicle	Sedan	Sedan	Sedan	Sedan
Category	COE Car, Premium Ad Car	COE Car	COE Car	COE Car
Availability	Available	Available	Available	Available