

ASS. REC. BY:

REF: TU /Kenneth

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. _____

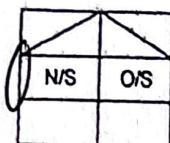
Sum Insured: _____

Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 8125-135k

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 05 days Res.: Yes or NoLum Sum: 1-B.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SNB 7799GYr Regn: OP, 21

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Hyundai Palisade3470Colour: A. Black

A/C: Insured / Std / NI / NA

Sp. Reading: 36123

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHR381CMMU335695Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm or

Tyre Size: F: _____

R: _____

245/50R20

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

TOYO / YOKO or _____

Front

Rear

R/Bal. 8 mmR/Bal. 5 mmL/Bal. 8 mmL/Bal. 5 mmD.O.A. 3/12/22D.O.I. 12/12/2022

Survey held at _____

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

N/S body

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

Date / Time

Action / Instruction

EST NOT READY

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 (\$)

Report Format :

Lump Sum / I.B.I. (\$) _____

TOTAL

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	03/12/2022 10:34 (SGT)
Reported by	Both
Date of Accident	03/12/2022 08:15 (SGT)
Exact Location of Accident	Lor 6 Toa Payoh, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SNB7799G

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	VERONICA LOW CHOON YEE
NRIC No	S7316618G
Email Address	veronicavass@gmail.com
Mobile Phone No	(Phone) +65-96169941
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	LX2 PALISADE 3.5 AT SR
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 car
Transmission	Auto
CC	3470

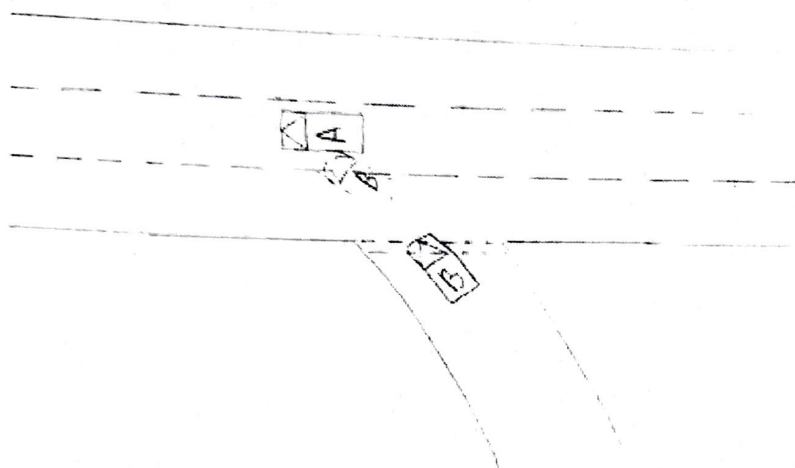
INSURANCE COMPANY

Name of Insurance Company	Direct Asla Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/01077521

DRIVER

Name of Driver	STEPHEN VASS
NRIC No	S2712675H
Date Of Birth	08/12/1959
Occupation	Indoor

SKETCH PLAN



A: 3NB7799G
B: 3N4741Y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 3/12/2021 at about 0815hrs. I was driving straight along Lor 6 Toa Payoh
towards PIE. When suddenly vehicle B who was coming out from Kim Keat
Link and collided onto my vehicle.

DECLARATION

I/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:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

➔ Back to OneMotoring

Inquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

618G

Vehicle Details

Vehicle No.:

SNB7799G

Vehicle to be Exported:

No

Intended Deregistration Date:

06 Dec 2022

Vehicle Make:

HYUNDAI

Vehicle Model:

LX2 PALISADE 3.5 AT SR

Primary Colour:

Black

Manufacturing Year:

2021

Engine No.:

G6DCMA675707

Chassis No.:

KMHR381CMMU335695

Maximum Power Output:

204.0 kW (273 bhp)

Open Market Value:

\$39,163.00

Original Registration Date:

15 Sep 2021

First Registration Date:

15 Sep 2021

Transfer Count:

0

Actual ARF Paid:

\$46,829.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

14 Sep 2031

PARF Rebate Amount:

\$35,121.00

Intended COE Rebate Details

COE Expiry Date:

14 Sep 2031

COE Category:

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

COE Period(Years):

10

QP Paid:

\$62,600.00

COE Rebate Amount:

\$54,914.00

Total Rebate Amount:

\$90,035.00

The information contained herein is correct as at 05 Dec 2022

OK