CO1248 Rpa3 2mg
1
Wehthe: SLN 4807P Yr Regn: 2017 7 May
Type: M.Carl M.Cycle Bus Yen Long Tax Prime Mover
- Truck#Tableror
Make: TOYETA VIOS 1.5E CVT or 1496
Colour GREY A/C: Insured / Std / NI / NA
Sp.Reading 260% TRadio: Insured I Std I MI NA
Eng/No:
C/No: MHFB 29 F390 26 (1497
Gen. Cond: Good / Fain / Poor / Burnt
Steering: inforder # Jammed / Leaked / Burnt or
Brake: norder Jammed /Leaked / Burnt or
Modi: NH 15/Rim 1 STD A/Rim or
Tyre Size: F: 198 508 6
R: (5) SUCIO
BS/DUNIEXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/
TOYOTYOKO OF
<u> </u>
Rear Rear Rear Rear
170-1
1 1 min 1 1 1 1 1 1 1
tolintan
Survey held at Bornio
Des. of Damages: Fit / Rear / OIS / N/S / U/C / Rooftop or
The U/C / Chassis frame / Body Structure affected due to collision.
Days Of Repair:
Days Of Repair: Resurvey No. of Trip: Survey Fee:
Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportation:
Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportation: ee: : Site Insp (\$)s+Rssi
Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportation:

TOTAL



Borneo Motors

TOYOTA

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

SINGAPORE 128462, Tel no.: 6631 1188

ESTIMATE

					IIMAIE			
Account Details			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Account No.		Customer Details		
RD PARTY CLAIM				S1000020 / TPCLAIM Document No. 0 M/S Grab Rentals Pte Ltd 3 Media Close #01-03/06 Singapore 138498				
		1		12/12/20		Work: 657039	25	
ar		Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No. / Remarks
17		NSP151R	CEXRKT Q1	24/05/2017	SLN9807P	0	19087	75/DS/SLN9807P
	Ch	assis No.	Engine No.	Terms	SA / Counter	r V	/ehicle In	Collected On
AHF	B2	9F3902011497	2NRX156488	60	Ng Mei Yer			0.00
C	d		Job/Parts Des	cription		Auto Consultants, i Repairer of the follor esurvey before/after spr		Disc % Amou
2 3 4 5 6	BBBB	BP-LAB2 CHEKC BP-ECU2 TO RES BP-LAB2 CONDU BP-LAB2 R/I FRO BP-LAB2 R/I FRO	'S: DRISED ON: WIRING AND CON SET ECU AND REP CT WHEEL ALIIGH NT LEFT UNDERC, NT LEFT DOOR CO	ROGRAMME TMENT ARRIGE	is sul	legal modification(s) is a plementary item(s) must bject to final approval fro vledged by Repairer ire:	L. C.	198.0 198.0 198.0 198.0 7.62.0
7 B BP-LAB2 REPLACC AFF AREA STRAIGHTEN & PANEL BEAT ACC AFF AREA 9 S BP-RES2 RESPRAY ACC AFF AREA 10 1 K52119-0U920 COVER, FR BUMPER, L/ 11 2 K52536-0D190 RETAINER, FR BUMPER (**) 12 3 K52128-0D250 COVER, FR BUMPER HOL 13 4 K53112-0D360 GRILLE, RADIATOR, LW 14 5 T52161-16010 PIECE, RR BUMPER ** 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				587.30 81.80 71.40 342.20 5.30	796 792.0 2376 4752.0 2624 4592.0 198.0 587.3 81.8 71.4 342.2 53.00			
For & on behalf of Borneo Motors (Singapore) Pte Ltd Customer's Signa		s Signature	Charge Su	mmary	Total			
			Please acknowledg	e receipt of vehicle	Parts Labour Sublet		Less	



Borneo Motors

TOYOTA

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

SINGAPORE 128462, Tel no.: 6631 1188

ESTIMATE

				ES	IIVIAIE				
Account Details Account			No.		Custom	er Details			
HIRD	PA	RTY CLAIM		S10000	020 / TPCLAIM	M/S Grab Par			
			Documer 0	Document No.		M/S Grab Rentals Pte Ltd 3 Media Close #01-03/06			
				Documen 12/12/2		Singapore 138 Work: 6570392			
Yea	ır	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No.	/ Remarks
201	7	NSP151R	CEXRKT Q1	24/05/2017	SLN9807P	0	19087	75/DS/SL	N9807P
	С	Chassis No.	Engine No.	Terms	SA / Counter	V	ehicle In	Colle	ected On
M	IFB	329F3902011497	2NRX156488	60	Ng Mei Yen	//	0.00		0.00
L	Cd		Job/Parts Desc	cription	0	Qty	Unit Price	Disc %	Amount
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34	7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 5 6 7 8 9 0 1 2 3 4 5 5 6 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7	K67404-0D160 K67862-0D210 K67924-0D120 K75922-0D170 K60118-0D170 K87940-0D740 K87945-0D919 K81150-0D831 K61404-0D230 K42611-0DC00	PANEL, FR FENDER, PROTECTOR, FR FE SEAL, FR FENDER, T LINER, FR FENDER, APRON SUB-ASSY, SUB-ASSY, FOVER, FR DOOR SEUN, FR DOOR GLAFRAME SUB-ASSY, F WEATHERSTRIP, FR CUSHION, FR DOOR TAPE, BLACK OUT, N COVER SUB-ASSY, F MIRROR ASSY, F MIRROR ASSY, COVER, OUTER MIRICAL SUB-ASSY, LIREINFORCE SUB-ASSY, WHEEL, DISC 500.	ROR, Y	Resure Schar	1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00	836.90 57.90 54.60 361.10 707.10 1453.60 498.90 1355.10 43.10 145.60 120.20 243.50 62.70 57.20 37.90 1496.60 129.50 722.00 651.50 2311.40		836.96 57.96 54.66 361.10 707.10 1453.60 498.90 1355.10 43.10 145.60 120.20 243.50 62.70 57.20 37.90 1496.60 129.50 722.00 651.50 2311.40
1000		behalf of Motors (Singapore) i	Pte Ltd Customer's Please acknowledge		Charge Sum Parts Labour Sublet Lubrication/Fluid	12,482.10 11,622.00 198.00 0.00	Total GST 7.00% Less	ò	24,302.10 1,701.15 0.00
			2		Others	0.00	Amount Due	•	26,003.25

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 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

Country/State of Loss

10/12/2022 19:30 (SGT)

Driver

10/12/2022 11:15 (SGT)

Hougang Ave 10, Singapore

HOUGANG AVE 10 & HOUGANG AVE 4 (JUNCTION)

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLN9807P

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) +65-94244257

(Office) +65-66550005

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

Vios

Private hire

No - Claiming third party

Private hire

Auto

1497

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

MSIG Insurance (Singapore) Pte. Ltd. G400001194MCX

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

NG CHONG TIONG SXXXX324Z

10/06/1956

Outdoor

Accident report SA1K22CA0003

nate Of Driving Pass priving experience 07/12/2011 Gender 11 YEARS Mobile Number Male Alt. Phone Number (Phone) +65-94244257 **Email Address** Address gr.sg.accident@grab.com BLK 636 HOUGANG AVENUE 8 #13-87 Address complement Postcode Is the driver the policyholder? 530636 If No, Relationship of the Driver with the Insured No Does Driver Own Other Vehicles? Hirer Vehicle Registration Number of Other Vehicle Owned by Driver No Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collision - Cross Junction 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? Yes Was any other vehicle or property damaged? Yes 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 UNKNOWN Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Hougang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18004890999 Alt. Police Station Phone No (Fax) +65-63128989 Police Station Address 60 Hougang Ave 9 Singapore 538775 Was notice of intended Prosecution given? No If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

500

ENROUTE TO HOUGANG POLYCLINIC AND AT THE JUNCTION OF HOUGANG AVENUE 10 AND HOUGANG AVENUE 4. I WAS ARROW APPEARS AND I MOVED TO MAKE A RIGHT TURN, SUDDENLY A VEHICLE (V2: SKX1568R) FROM THE OPPOSITE JUNCTION COLLIDED INTO THE LEFT FRONT SIDE OF MY VEHICLE. BOTH MY WIFE AND I GOT OUT OF OUR VEHICLE. THE CHEST, RIGHT SIDE OF HER NECK AND ON HER HEAD AS WELL. MY NECK AND SHOULDER ARE ALSO ACHING. TRAFFIC POLICE AND AMBULANCE CAME. TRAFFIC POLICE TOOK DOWN OUR PARTICULARS AND INTERVIEWED. AMBULANCE CHECKED ON MY WIFE AND CONVEYED HER TO SENGKANG GENERAL HOSPITAL. I HAVE A DASH CAMERA INSTALLED IN MY VEHICLE AND THE TP OFFICER (SSS T07293 A. RAHMAN) TOOK THE SD CARD. CURRENTLY, MY WIFE IS STILL IN THE HOSPITAL SO I AM UNSURE OF HER CONDITION OR HOW MANY DAYS MC SHE WILL HAVE. MY VEHICLE IS BADLY DAMAGED ESPECIALLY ON THE FRONT LEFT SIDE AND IS UNABLE TO MOVE. IT GOT TOWED TO MY WORKSHOP. THAT IS ALL.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKX1568R Vehicle Manufacturer Audi Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver LIM WEN XI ALVIN NRIC No SXXXX837F Contact Number (Phone) +65-97371336 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

the

ins.

MIL

Name of injured person

Gender

Female

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?

PASSENGER

Female

SEMALE SEMALE

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 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. The 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.
- 8. Consent under the Personal Data Protection Act(PDPA)

lunderstand, 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) w ho have insured vehicle(s) involved in this accident (all insurer(s) w ho 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:
- (i) investigating the accident and/or my claims:
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) 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 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 REPORTING OFFICER **FRO VICKY**

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 10/12/2022 1630HRS

Witnessed by Reporting Centre Personnel

Sketch Plan



A-SLN9807P B-SKX1568R

HOUGANG AVE 10 HOUGANG AVE 4 **NEARBY HOUGANG** CLINIC

	of the Accident		
PL! RE	PORT NO T/20221210/2049		
1	Doctoration		

Declaration

alu RI Seel airs: um:

1 R

Jale:

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

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

10/12/2022 1630HRS

FLASH ACCIDENT **FRO VICKY**

Witnessed by Reporting Centre Personnel

Policyholder's Signature / Date &

Enquire PARF/COE Rebate for Registered \ Vehicle Owner Particulars	/ehicle
Owner ID Type:	Company 1 1 1 1 1 1 2 1 2 2 2 2 2 2 2 2 2 2 2
Owner ID: Vehicle Details	200G
Vehicle No.:	SLN9807P
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Dec 2022
Vehicle Make:	ТОУОТА
Vehicle Model:	VIOS 1.5E CVT
Primary Colour:	Silver
Manufacturing Year:	2017
Engine No:	2NRX156488
Chassis No:	MHFB29F3902011497
Maximum Power Output:	79.0 kW (105 bhp)
Open Market Value:	\$12.855.00
Original Registration Date:	24 May 2017
First Registration Date:	24 May 2017
Transfer Count:	
Actual ARF Paid:	\$7,855.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	23 May 2027
PARF Rebate Amount: Intended COE Rebate Details	\$5,498.00
COE Expiry Date:	23 May 2027
COE Category:	A - Carup to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$52,000.00
COE Rebate Amount:	\$23,106.00
Total Rebate Amount:	\$28.604.00

Toyota Vios 1.5A E

Overview

Financial

Accessories

Similar

Research

Photos

Мар

CLASSIC CREDIT



SGCARMART'S PREMIUM DEALER 2013 / 2014 / 2015 / 2016 / 2017

Price \$56,800

Depreciation \$11,890 /vr

View models with similar depre

Reg Date

22-May-2017

(4yrs 5mths 8days COE left)

Mileage

N.A.

Manufactured

2017

Road Tax

\$682 /yr

Transmission

Auto

Dereg Value

\$28,698 as of today (change)

OMV

\$13,026

COE

\$52,000

ARF

\$8,026

Engine Cap

1,496 cc

Power

79.0 kW (105 bhp)

Curb Weight

1,065 kg

No. of Owners

2