

(08/11/13) Wef

ASS. REC. BY: Prou

REF:

CS/LIP 23 0000 75/RUG3

270A

**ASSIGNMENT**

From:

Date:

Estimated Cost:

OD (TP) / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: SMT 78086at Workshop m/s Wah Hongof 38, TON GUAN IN EAST #0157

Insured:

LIP

Policy No.

Claims No.

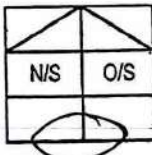
Sum Insured:

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:

163K

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lump Sum:

%

3 Val.: Yes or No.

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

REPAIR LIMIT - 114K

Veh No:

SMT 78086

Yr Regn:

2020 JulyType: (M.Car) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

TOYOTA NOAH HYBRID 1.8X c.c. 1797

Colour:

BLACK

A/C: Insured / Std / NI / NA

Sp. Reading:

66781

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

ZWR 800433473Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

215 / 50ZR17

R:

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

TOYO / YOKO or

TOURADO

Front

Rear

R/Bal.

6 mm

R/Bal.

6 mm

L/Bal.

6 mm

L/Bal.

6 mm

D.O.A.

29/12/22

D.O.I.

06/01/23

Survey held at

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

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

Date/Time, File Pass to?



: Prel. Report

Days Of Repair:

1)



: Final Report

Resurvey No. of Trip:

Survey Fee:

Date/Time, File Return to?

Transportation:

2)

Add Fee:



: Site Insp (\$

) : S + RS, SI



: Interview (\$

) : Photos



: Tech. Invs (\$

) : Others



: Weekend (\$

) : TOTAL

Report Format :

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

TOTAL



(199806235M)

**Page No. 1**

QTY	DESCRIPTION	CONDITION	REPAIRER'S ESTIMATE(\$\$)	SURVEYOR'S ADJUSTMENT
<b><u>PARTS (LIST ITEMS)</u></b>				
1	Boot lid <i>bme /</i>		1719.00	
1	Boot lid emblem 'Hybrid synergy drive' <i>an /</i>		62.00	
1	Rear bumper <i>de /</i>		580.00	
2	Rear bumper clips RH/LH @ 2*\$231 <i>an X</i>		462.00	
1	End panel <i>repair</i>		679.00	
		Part Items Total:	3502.00	
			-25% -875.50	
			2626.50	
<b><u>SPECIAL NETT ITEMS</u></b>				
1	Rear windscreen sealant <i>an /</i>		<del>60.00</del>	<i>EO</i>
1	Rear Car plate <i>X</i>		35.00	<i>X</i>
SN Items Total:			95.00	
Total Parts			2721.50	



# Wah Hona Motors & Credit Pte Ltd

Enterprise Hub 38 Toh Guan Road East #01-57 S(608581)

Email: motor@wahhong.sg

(199806235M)

Vehicle No. SMT7808G TOYOTA NOAH 1.8

Page No. 2

S/N	DESCRIPTION	REPAIRER'S ESTIMATE (\$)	SURVEYOR'S ADJUSTMENT
	<b>LABOUR</b>		
1	To remove the affected parts & fittings to commence repairs; panel beat & reshape the affected areas and replace the damaged parts and components	<del>800.00</del>	600
2	To supply paint materials, expandable items & putty, respray paint on parts replaced & repaired	600.00	
3	To remove and refix wiring system at accident damaged area and check for all electrical proper function	<del>60.00</del>	40
4	To remove and refit rear windscreen	100.00	
5			
Labour Total :		1560.00	
TOTAL (PARTS & LABOUR):		4281.50	

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- 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

Signature:

Date:

Rasul

Hp 90010068

6 days

W/S

06/01/23 @ 1110

Regny after repair





# 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	30/12/2022 12:56 (SGT)
Reported by	Both
Date of Accident	29/12/2022 17:58 (SGT)
Exact Location of Accident	28 Jln Lempeng, Singapore
Additional Location Information	CLEMENTI AVE 6 TOWARDS PIE
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMT7808G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	ROSLEE BIN NADI
NRIC No	SXXXX270A
Email Address	ROSLEE65@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-96559124
Alternative Phone No	-

## VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Noah
Variant	-
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	1797

## INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/00933798/01

## DRIVER

Name of Driver	ROSLEE BIN NADI
NRIC No	SXXXX270A
Date Of Birth	18/04/1965
Occupation	Indoor

Date Of Driving Pass .....  
Driving experience .....  
Gender .....  
Mobile Number .....  
Alt. Phone Number .....  
Email 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 .....

13/06/2012  
10 YEARS AND 6 MONTHS  
Male  
(Phone) +65-96559124  
-  
ROSLEE65@YAHOO.COM.SG  
104 TECK WHYE LANE  
#02-456  
680104  
Yes  
-  
No  
-  
-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident .....  
Weather Conditions .....  
Road Surface .....

Collision - Head to Rear  
Clear  
Dry

#### 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? .....  
Was any other vehicle or property damaged? .....  
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 .....

No  
2  
No  
-  
Yes  
2  
No  
-  
-  
-  
-

#### PASSENGER 1

Name .....  
Gender .....

NORRIDAH  
Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....  
Was notice of intended Prosecution given? .....  
If yes, against whom? .....

No  
No  
-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO SKETCH PLAN & SUMMARY

#### 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 .....  
Vehicle Manufacturer .....  
Vehicle Model .....  
Vehicle Variant .....

SJF5332J  
-  
-  
-

Vehicle Colour .....  
Vehicle Category .....  
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) .....

-  
Private car  
NAY LIN TUN  
-  
-  
-  
-  
-  
-



## 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 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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 workshop 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' lawyers/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;

(ii) investigating the accident and/or my claims;

(iii) 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)



TEO SEK LIAN


Sketch Plan

**Describe Circumstance of the Accident**

On 29/12/2022 at about 17:58. I was travelling along Clementi Ave 6 towards PIE. Before merging lane, suddenly veh SJH 5322J hit on my rear.  
Nobody was injured.

**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



Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

TED SEOK LAM



## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	270A

### Vehicle Details

Vehicle No.:	SMT7808G
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Dec 2022
Vehicle Make:	TOYOTA
Vehicle Model:	NOAH HYBRID 1.8X CVT
Primary Colour:	Purple
Manufacturing Year:	2020
Engine No.:	2ZR0F26824
Chassis No.:	ZWR800433473
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$33,775.00
Original Registration Date:	16 Jul 2020
First Registration Date:	16 Jul 2020
Transfer Count:	0
Actual ARF Paid:	\$29,285.00

### Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Jul 2030
PARF Rebate Amount:	\$21,963.00

### Intended COE Rebate Details

COE Expiry Date:	15 Jul 2030
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$34,989.00
COE Rebate Amount:	\$26,382.00
<b>Total Rebate Amount:</b>	<b>\$48,345.00</b>

The information contained herein is correct as at 30 Dec 2022

OK



# Toyota Noah Hybrid 1.8A X

**Overview**

Financial

Accessories

Similar

Research

Photos

Map



Member of:



AUTOMOBILE IMPORTER  
& EXPORTER ASSOCIATION (SINGAPORE)  
新加坡汽车进出口商协会



Price

**\$154,800**

Depreciation ?

\$19,880 /yr

[View models with similar depre](#)

Reg Date

20-Jan-2020

(7yrs 12days COE left)

Mileage

24,000 km (8.1k /yr)

Manufactured ?

2019

Road Tax ?

\$974 /yr

Transmission

Auto

Dereg Value ?

\$48,401 as of today (change)

Fuel Type

Petrol-Electric

COE ?

\$37,000

OMV ?

\$34,151

Engine Cap

1,797 cc

ARF ?

\$29,812

Curb Weight ?

1,610 kg

Power

100.0 kW (134 bhp)