| | 1.5 |
|--|---|
| ASS REC BY: VALUE REF: CSINC 230 | 500366 Ruk 3 |
| ADDITION OF THE PARTY OF THE PA | 7004 |
| ASS | EIGNMENT |
| From: Date: | Veh No: SLK 2958 Z Yr Regn: 2017 / Jan |
| Estimated Cost: | Type:/M.Cat / 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: SLK 2958Z | Make: TOYOTA PRINS HYBRIS 1.8CM C.C 1798 |
| at Workshop m/s PORNE METUL | |
| | - 0000 |
| of 2 PANNIN CLEGARY | _ (32010 |
| Insured: NTML | Eng/No: |
| Poticy No. | C/No: STOK\$3FU603542880 |
| Claims No. | Gen. Cond: Good / Fair Poor / Burnt |
| Sum Insured: Excess: | Steering: morder/ Jammed / Leaked / Burnt or |
| (Client's Record) | Brake: thorder / Jammed / Leaked / Burnt or |
| Make of Veh: | Modi: NII / SKRim / STD A/Rim or |
| | Tyre Size: F: 195 65815 |
| (Policy Condition) | R: |
| Remark: The veh had commenced its N/S O/S | BS TOUND EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / |
| repair at the time of inspection. | TOYOTYOKO or |
| Bal. or Market Value: 60K | Front Rear |
| IDAC Accident Rport: Consistent? : Yes or No | R/Bal. 6 mm |
| GIA / PR Seen: Consistent? : Yes or No | L/Bal. 6 mm |
| Est. Repairs: days Res.: Yes or No | D.O.A. 06 01 23 D.O.I. 10 01 23 |
| Lum Sum: % 3 Val.: Yes or No. | Survey held at BORNEO MOTHE |
| 01 / 05// / 050 / 04/100 | Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or |
| CA / REV / REP. / 24 HRS Vehicle: 1N / OU | 015 Cod |
| Date: Person Contacted: | The U/C / Chassis frame / Body Structure affected due to collision. |
| Date / Time Action / Instruction | |
| ROMAIR LIMIT - 33K | |
| | - comment comments |
| | |
| | |
| | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| | |
| Date/Time, File Pass to? : Prell. Report | Days Of Repair: |
| 1) : Final Report . | Resurvey No. of Trip: Survey Fee: |
| Date/Time, File Return to? | , Transportation: |
| 2) Add F | ee: : Site Insp (\$)s+Rssi |
| d as a section of the | : Interview (\$) Photos |
| Papart Format | : Tech. Invs (\$) Others |
| Report Format: | :Weekend (\$) |
| Lump Sum / I.B.I: (\$ | TOTAL |
| | IVING |

:/



Borneo Motors

Inchcape

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

SINGAPORE 128462, Tel no.: 6631 1188

CKK Auto Consultar is i enter n tify 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 **ESTIMATE**

| | | | | E31 | IIVIAIE | | Signature: | | | | |
|--|-----------------|--|---|--|--|-------|--------------------------------------|---|----------------------|------------|--|
| | | Account Detai | le | Account No | | | Date: | Custom | er Details | | |
| THIE | RD F | ARTY CLAIM | | Account No S100002 | 0 / TPCLAIM | M/S | Grab Rental | 0.0000000000000000000000000000000000000 | - Details | | |
| THE PROPERTY OF THE PROPERTY O | | Document t | Document No. | | 3 Media Close #01-03/06 Singapore 138498 | | | | | | |
| | | | | Document 07/01/202 | | Wo | rk: 65703925 | | | | |
| Υe | ar | Model | Variant | Reg. Date | Reg. No. | Kilon | neters V | Vip No. | Order No | o. / Rema | rks |
| 20 | 16 | ZVW50R AH | IXEBW Q2 | 12/01/2017 | SLK2958Z | | 0 | 19541 | 75/DS/ | SLK2958 | Z |
| | (| Chassis No. | Engine No. | Terms | SA / Counter | | Ve | ehicle In | Co | ollected O | n |
| J | ГDК | B3FU603542880 | 2ZRR987591 | 60 | Ng Mei Yen | | // | 0.0 | 00/ | | 0.00 |
| L | Cd | | Job/Parts Descri | ption | | | Qty | Unit Pric | e Disc % | А | mount |
| 1 2 3 4 5 6 7 8 9 10 11 | B B B B 1 2 3 4 | TP VEH NO.:SLL7343J TOW IN:06/01/23 DATE-IN: DATE NO OF REPAIR DAYS: BY: AUTHORI BP-LAB2 CHECK WI BP-ECU2 TO RESET BP-LAB2 R/I FRONT BP-LAB2 REPL ACC STRAIGHTEN AND PAI BP-RES2 RESPRAY U68101-47230 GLAS U67401-47010 FRAM U68125-47030 GLAS U87910-47450 MIRR | EXCESS: SURVEY: SED ON: RING AND CONDU ECU AND REPRO RIGHT DOOR CO AFF AREA | JCT LEAK TES DGRAMME MPARTMENT FF AREA SU- | ST | | 1.00 1.00 1.00 1.00 1.00 | 173. 383. 1727. | 00 30 90 70 | 854 | 198.00 198.00 792.00 2376.00 977.00 173.30 383.90 1727.70 130.70 |
| | | ehalf of lotors (Singapore) Pte Ltd | Customer's | Signature | Charge Si | umma | ary | Total | | 1 | 0,992.6 |
| | | , | Please acknowledge n | eceipt of vehicle | Parts Labour Sublet | | 3,392. 7,600. | .00 | 3.00% | | 879.4 |
| | | | | | Lubrication/Fluid | | | 00 Less | | | 0.0 |
| | | | | - | Others | | 0. | .00 Amou | int Due | 1 | 1,872.0 |

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 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 Reported by **Date of Accident Exact Location of Accident** Additional Location Information Country/State of Loss

07/01/2023 09:52 (SGT) 06/01/2023 17:30 (SGT) Keong Saik Rd., Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLK2958Z

Singapore

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No.

GRAB RENTALS PTE LTD 2XXXXX200G gr.sg.accident@grab.com (Phone) +65-82236029 (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

Private hire

Tovota

Prius

No - Claiming third party Private hire Auto 1798

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number India International Insurance Pte Ltd D21MFL0000447 02

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

SEAH JIA WEI SXXXX097J 05/03/1990 Outdoor



te Of Driving Pass riving 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

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

DETAILS OF POLICE ACTION

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

CIRCUMSTANCES OF ACCIDENT

ON 06/01/23 AT ABOUT 1730HRS, I WAS DRIVING VEHICLE A (SLK2958Z) ALONG KEONG SIAK ROAD WHEN SUDDENLY VEHICLE B (SLL7343J) PASSENGER OPENED THE DOOR AND HIT ONTO THE RIGHT SIDE MIRROR OF MY VEHICLE. NO INJURIES.

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 **SLL7343J** Vehicle Manufacturer Honda Vehicle Model Vezel Vehicle Variant Vehicle Colour

Vehicle Category Private car

Accident report SJ0G23170002

08/12/2015 7 YEARS AND 1 MONTH

Male

(Phone) +65-82236029

gr.sg.accident@grab.com

BLK 970 HOUGANG STREET 91 #05-166

530970

No

Hirer

No

Collision - Opening Door of Vehicle

Clear Dry

No

No

Yes

No

No

No

Intermeted for Driver

RIC No
Contact Number

Address

Address complement

Postcode
Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

V

ion ian'

il. Q AC SIA ESI LU SAW THAN HTAIK OO SXXXX296J (Phone) +65-92704645

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SKETCH PLAN

IMPORTANT NOTICE

- 1. Please correctly report the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorized Driver.
- 3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may
- 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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 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.
- (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 involvedisclosure 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.

FLASH ACCIDENT REPORTING OFFICER
FRO AMIN

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time 060123 1855

cyholder) / Date Witnessed by Reporting Centre 060123 1855 Personnel

Sketch Plan

A - SLK2958Z
B - SLL7343J

KEONG SIAK ROAD

Declaration

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

S.

FLASH ACCIDENT COMPONENT REPORTING OFFICER
FRO AMIN

| nquire PARF/COE Rebate for Registered Vehicle Owner Particulars | |
|--|-----------------------------------|
| Owner ID Type: | Company |
| Owner ID: | 5 200G |
| Vehicle Details | |
| Vehicle No.: | SLK2958Z |
| Vehicle to be Exported: | No . |
| Intended Deregistration Date: | 10 Jan 2023 |
| Vehicle Make: | TOYOTA |
| Vehicle Model: | PRIUS HYBRID 1.8 CVT |
| Primary Colour: | Silver |
| Manufacturing Year: | 2016 |
| Engine No.: | 2ZRR987591 |
| Chassis No.: | JTDKB3FU603542880 |
| Maximum Power Output: | 90.0 kW (120 bhp) |
| Open Market Value: | \$31,008.00 |
| Original Registration Date: | 12 Ján 2017 |
| First Registration Date: | 12 Jan 2017 |
| Transfer Count: | 2 |
| Actual ARF Paid: | \$5,412.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 11 Jan 2027 |
| PARF Rebate Amount: | \$3.788.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 11 Jan 2027 |
| COE Category: | B - Car above 1600cc or 97kW (130 |
| COE Period(Years): | 10 |
| QP Paid: | \$56,089.00 |
| OE Rebate Amount: | \$22,450.00 |