655.	FileC.	BY:

CS/LIP 23000789/Acp3 ASSIGNMENT

From: Date:	Veh No: SLK 273 t C · Yr Regn: 2017, Jan.
Estimated Cost:	Type: M.Car 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:	Make: Henda Shuttle c.c 1496
at Workshop m/s	Colour Silves. A/C: Insured / Std / NI / NA
of	Sp.Reading 104594 T/Radio: Insured / Std / NI / NA
insured:	Eng/No:
Dellarykla	C/No: 6 K81007748*
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil (S/Rim / STD A/Rim or
	Tyre Size: F: 185/55 R15
(Policy Condition)	R: 185/55R15
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC) OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO OT
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. Of mm R/Bal. of mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. mm
Est. Repairs: 19 days Res.: Yes or No	D.O.A. D.O.I. 26/01/23.
Lum Sum: % 3 Val.: Yes or No	Survey held at Kan u
CA / REV / REP. / 24 HRS	Des. of Damages. Fit (Rear O/S / N/S U/C Rooftop or
Vehicle: IN / OUT	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction 17 2; berly,	
	11 1 1 1 1
The state of the s	1 days with repairer. (Red. 21, 261.12, 447.)
mv:601c.	
PV:26K	
Nett: 34K	
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 19
Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
Add Fee:	The second secon
Av-ord Formet :	f: Interview (\$ 1 Shotes
A VIII S K WERRERS &	Con this is a contract of the

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

-				
	Vehicle	Owner	Particul	ars

Owner ID Type:

Owner ID:

Vehicle Details

Vehicle No.:

Vehicle to be Exported:

Intended Deregistration Date:

Vehicle Make:

Vehicle Model:

Primary Colour:

Manufacturing Year:

Engine No.:

Chassis No.:

Maximum Fower Output:

Open Market Value:

Original Registration Date:

First Registration Date:

Transfer Count:

Actual ARF Paid:

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

PARF Rebate Amount:

Intended COE Rebate Details

COE Expiry Date:

COE Category:

COE Period(Years):

QP Paid:

COE Rebate Amount:

Total Rebate Amount:

The information contained herein is correct as at 26 Jan 2023

Singapore NRIC

556B

SLK2734C

No

26 Jan 2023

HONDA

SHUTTLE 1.5G A

Silver

2016

L15B3539065

GK81007748

97.0 kW (130 bhp)

\$19,413.00

11 Jan 2017

11 Jan 2017

0

\$9,413.00

· Yes

10 Jan 2027

\$6,118.00

10 Jan 2027

A - Carup to 1600cc & 97kW (130bhp)

10

\$50,101.00

\$19,824.00

\$25,942.00

sgcarmari

Login Sign up

New Cars

Used Cars

Rental Cars

Sell My Car

Directory

Products Insurance Articles

Forum

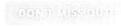
Resources





Toyota Alphard

The ultimate family car! Supreme road presence with space for the whole family and much more.



Post an Advertisement Sell it yourself! Advertise it at just \$68 until it's SOLD!

Post an Ad

Advertiser Login

Ways of Celling



Direct Owner



« Back (12) Next »

Sort by Date Posted 20 results/page

21 vehicles



Honda Shuttle 1.5A G

Any Category

Advanced Search

Make

Model

Price

Any

Depreciation

10-Jan-2017

Reg Date

Eng Cap

Mileage

Veh Type

Status Available

Search Selection

Shuttle

\$60,388

Anv

\$14,060 /yr

1,496 cc

66,500 km

Available

1 owner! Low mileage with 06 month warranty! Classy pearl white with black roof, black leather upholstery, superbly well maintained with 15" sports rims, ideal car family with very spacious boot and legroom space! Lowest fuel efficiency car in market! High loan and trade in...

This car comes with 6-mth Sgcarmart Warranty - the best protection for your car. Learn More

Wunder Auto Pte Ltd

Posted: 23-Jan-2023



Honda Shuttle 1.5A G

\$61,800

\$14,440 /vr

11-Jan-2017

1,496 cc

72,120 km Stationwagon

Available

1 owner only, guaranteed non - PHV unit! Low mileage. New road tax. Paintwork like brand new. Er hanced Pioneer audio system. 100% accident free! Huge and spacious boot space and legroom. Very good fuel efficiency of at least 16km/l. Flexible loan scheme available! L.

Posted: 09-Jan-2023



Honda Shuttle 1.5A G

\$63,800

\$14,580 /vr

03-Mar-2017

1.496 cc

Stationwagon

Available

Beautifully wrapped up in satin yellow wrap. We'll maintained unit. \$0 admin and processing fees for all bank loans. Other loans welcome.

Posted: 04-Dec-2022



Honda Shuttle 1.5A G

\$62,800

\$13,800 /yr

15-Apr-2017

1,496 cc

80,108 km

Stationwagon

Available

1 owner! Guaranteed non PHV usage! Elegance silver with black leather upholstery, superbly well maintained with 16" sports rims, original paintwork, ideal car family with very spacious boot and legroom space! Lowest fuel efficiency car in market! High loan and trade in avail.

This car comes with 6-mth Sgcarmart Warranty - the best protection for your car. Learn More

Posted: 16-Jan-2023



Toyota launches new ad spot for the Crown

The new ad spot showcases the sedan's dynamic presence and styling, designed to make drivers stand out from the crowd.

Find out more!



Honda Shuttle Hybrid 1.5A

\$67,800

\$61.800

\$15,470 /vr

17-Apr-2017

1,496 cc

54,000 km

Stationwagon

Available

Fuel Type: Petrol-Electric

Rare 1 Owner Shuttle Hybrid! Best Reliability With Excellent Fuel Consumption at 25km/L! Tip-Top Condition With No Touch Up & Repair Require. Low Mileage Clocked, STA Grading Welcome For A Peace Of Mind! Full Loan Available With High/Fast Approval! Bank Loan & PH...

SG Car Choice Pte Ltd

Posted: 08-Jan-2023

Honda Shuttle 1.5A G

\$13,660 /yr

19-Apr-2017

1,496 cc

68,000 km

Stationwagon

Available

Well maintained, no repairs needed. Accident free. Welcome any 3rd party workshop inspection. Trade in your car are welcome. Bank and in house loan available. Insurance are available too. Viewing by appointment only.

Posted: 05-Dec-2022

SK00231G0004 / KANG CAR REPAIRERS PTE LTD ENTRY DATE & TIME: 16/01/2023 15:04 (SGT) SUBMITTED BY: Norazielawati Binte Anma VERSION: 1 (16/01/2023 15:04 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
- 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	16/01/2023 15:04 (SGT) Both 14/01/2023 12:30 (SGT) Singapore KPE TOWARDS ECP Singapore
DETAILS OF	OWN VEHICLE
Vehicle Registration Number	SLK2734C
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No	No KATHERINE KOH POH CHOO @EER POH CHOO SXXXX556B KATKOH77@YAHOO.COM.SG (Phone) +65-97697187
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	Honda Shuttle - Private use No - Claiming third party Private car Auto 1496
INSURANCE COMPANY	
Name of Insurance Company Policy Number / Cover Note Number	Income Insurance Limited 5087398119-06
DRIVER	
Name of Driver NRIC No Date Of Birth Occupation	TAN CHEW MENG @SNG CHEW MENG SXXXX556D 31/08/1954 Indoor

Date Of Driving Pass 01/04/1976 Driving experience 46 YEARS AND 9 MONTHS Gender Male Mobile Number (Phone) +65-97709252 Alt. Phone Number Email Address JMPASG1@YAHOO.COM.SG Address APT BLK 608 ELIAS ROAD Address complement #12-178 Postcode 510608 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 Chain 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 4 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 5 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 PASSENGER 1 Name KATHERINE KOH POH CHOO Gender Female PASSENGER 2 Name JACINTHA TAN YANYI Gender Female PASSENGER 3 Name KOH SIEW HOON Gender Female PASSENGER 4 Name KENNETH TAN JUNYI Gender Male **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Pasir Ris Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005852999 Alt. Police Station Phone No (Fax) +65-65855261 Police Station Address 1 Pasir Ris Drive 4 #01-01 Singapore 519457 Was notice of intended Prosecution given? No

If yes, against whom?

REFER TO POLICE REPORT NO.: T/20230114/2111.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

Yes

Yes

WILL EMAIL TO INSURANCE.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJE323Z Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver SUN RENWANG NRIC No SXXXX540D Contact Number (Phone) +65-97708547 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident **VEHICLE B** No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SDJ87A Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver HO BING HUI NRIC No SXXXX706C Contact Number (Phone) +65-97803040 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident VEHICLE C No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SFF1520G Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver ONG PO KENG NRIC No SXXXX723F Contact Number (Phone) +65-91826667 Address Address complement Postcode Insurance Company Name Nature Of Damage

INJURED PERSONS DETAILS

Male

INJURE	D PERSONS DETAILS
INJURED 1	
N. C. C.	
Name of injured person	TAN STIEW MENG
Gender	Maic
Phone No	
Address	
Address Complement	
Post Code	
Approximate Age Years Old	
Injuries Sustained	
Injured person in which vehicle?	SLK2734C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No
INJURED 2	
Name of injured names	
Name of injured person Gender	
	1 citiale
Phone No Address	(Phone) +65-97697187
Address Complement	
Approximate Age Years Old Injuries Sustained	
Injuries Sustained Injured person in which vehicle?	
Were seat belts worn?	021127010
Was this injured conveyed to hospital by ambulance?	Yes
vido uno injured conveyed to nospital by ambulance:	No
INJURED 3	
Name of injured person	JACINTHA TAN YANYI
Gender	Female
Phone No	-
Address	
Address Complement	-
Post Code	-
Approximate Age Years Old	· -
Injuries Sustained	
Injured person in which vehicle?	SLK2734C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No
INJURED 4	
Name of injured person	INCIT OIL VI I COIV
Gender	
Phone No	
Address	
Address Complement	
Post Code	
Approximate Age Years Old	
Injuries Sustained	
Injured person in which vehicle?	02:12:010
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	No
INJURED 5	
Name of injured person	KENNETH TAN JUNYI
Gender	Male

Address Complement

Phone No Address

Post Code

Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLK2734C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust 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 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' 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;
- (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' law yers/law firms, may/are permitted to coilect, 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.

Policyholder's Signature / Date &

Witnessed by Reporting Centre Personnel

Time

Driver's Signature (If driver is not the policyholder) / Date

Sketch Plan

SFF 1520G

Describe Circumstances of the Accident	
was driving along kpt towards ECP. My front slow down and stop. I also follow to slow do The car behind me cannot stop in time and comy car's rear portion. The impact force my car collided onto the front car. I alight and not a chain collision involving 4 cars. My car's are damaged and my passenges suffered from	vehicle
Now down and stop. I also follow to slow do	wn and stop.
The car behind me cannot stop in time and co	lided onto
my one's rear partian. The impact force my co	er forward and
callided anto the Anot pay I alight and no	tire that it is
a chair callistan involving 4 cars My car's	Annt and rear
are demand and my ressences suffered form	injuries.
are damaged and my passenges suffered from	7.000
	(0000) 1-1-1-1
	•

Declaration

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

& Time

Driver's Signature (# driver is not the policyholder) / Date

1401/03 1430 has

Witnessed by Reporting Centre

Personnel



T/20230114/2111

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Report No. T/20230114/2111

Tel No: 1800-5852999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/01/2023 23:16		Made:	Vide Report No.:	Station Diary No.:	
Informa	nt's Partic	ulars			
	f Informant EW MENG		Address: 608 ELIAS ROAD #12-178 SINGAPORE 510608		
ID Type / ID No.: NRIC NO / S0025556D			Contact No.: Home/Office: Mobile: 97709252		
National SINGAP	ity: ORE CITIZ	'EN	Email:		
Sex: Male	Age; 68	Date of Birth: 31/08/1954	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Retiree			Driving Licence Information: Class: 3	Date of Expiry:	

General Infor	mation of the Acc	ident		
Type of Injury Others		Drink Drive: No	Date/Time of Accident: 14/01/2023 12:0	Type of Location Straight Road
KALLANG PA Weather: Clear	YA LEBAR EXPRI	Road Surface:		Road Speed Limit:
Dual Carriage Way		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance:

Details of V	ehicle invo	ved			O SAME AND A SAME AS	<u>GENELEMENTER</u>
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SDJ87A	Car					0
SFF1520G	Car				Slightly Damaged	0
SJE323Z					Slightly Damaged	0
SLK2734C	Car				Seriously Damaged	4



Tel No: 1800-5852999

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

CONTINUATION OF REPORT



2013

Report No. T/20230114/2111

Any Pedestrian I					
No. of Pedestrian		Use of Ped	destrian	Cross	ing: NA
Driver	。 · · · · · · · · · · · · · · · · · · ·		ID No.		S0025556D
Name	TAN CHEW MENG	AND THE REPORT OF	ID No.		00020000
Related Vehicle	SLK2734C (Car)		Conta	ct No.	97709252
Related Vollioro	CEITE/ BY B (GBI)				Allege de la companya della companya
Hospital/Clinic	NIL		Class	of	Class: 3
			Driving	 \$288,500,000,000 	Date of Expiry: NIL
		Managara 1	Licent	8 2008-002500	
Data Tanakanan	NU	Deta Dies		NIL	
Date Treatment		Date Disc		I RESIDENCE	
No. of Days gran	ted Medical Leave 02	Degree of	Injury	Slight	

Brief Details.

On the 14/01/2023 at about 1200hrs i was driving my vehicle (SLK2734Z) on the 1st lane (most right) at KPE highway tunnel heading towards ECP. I also had 4 other passengers in my vehicle. I saw the vehicle in front of me slowed down as such, i did an emergency brake. After my vehicle successfully slowed down, a white Maserati car bearing a plate number of SJE323Z collided into the rear of my vehicle. That caused a chain collision which involved the cars mentioned above. After the accident, we exchanged particulars and only my vehicle was towed away. Subsequently, we went to Sengkang General Hospital to get ourselves checked and i received 2 days MC and the number of NIC days received for my family members who were in the vehicle varies from 2-5 days. The damages suffered to my vehicle were dents on the front and rear of my vehicle.



Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999



3 of 3 Report No. T/20230114/2111

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

G / SGT 1 MUHAMMAD NASRULLAH AFIQ BIN ZULKIFLIE	W
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	

Signature of Officer Recording The Report:

Signature Of Informant:	
	C*
Date/Time: 14/01/2023 23:16	
Classification Of Case:	

NP168