

ASS. REC. BY:

REF:

A15/ 23002225/Kw

C

Kenneth

DU1658

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD/TP/WS/TPRES/ODRES/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.

N/S	O/S

Bal. or Market Value: 893k

IDAC Accident Rpt: _____ 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: PMN184AYr Regn: 07, 19

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

Truck / Traller or _____

Make: Toy Pientac.c. 1496Colour: M.P. White

A/C: Insured / Std / NI / NA

Sp. Reading: 97066

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: NHP1707071436Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: _____

R: 195/60R15

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

TOYO / YOKO or Tourado

Front

Rear

R/Bal. 6 mmR/Bal. 3 mmL/Bal. 6 mmL/Bal. 3 mmD.O.A. 28/2/23D.O.I. 2/3/2023

Survey held at _____

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

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

Date / Time Action / Instruction

23/5 21 Lm @ 4250. Carh @ 05 days (Red \$2,647.70 / 38%)

Date/Time, File Pass to?

☐ : Prel. Report☒ : Final Report

1) Typist

Date/Time, File Return to?

Days Of Repair: 05

Resurvey No. of Trip: _____

Survey Fee:

Transportation

S - RS. \$

Fees

Others

TOTAL

Add Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech Invs (\$☐ : Weekend (\$Report Format: 00Lump Sum / I.B.I.: (\$ 4,250.00)

REPAIR DETAILS

SMN184A
OD/Allianz

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 01 Mar 2023)
Parts: M1-MPV TOYOTA SIENTA HYBRID 1.5 G (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: Cheng Hoe Motor Pte Ltd/SMN184A/01/03/2023 15:46
Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*1 PC FRT BUMPER	0.00	0.00	*180.00 F
2	1		*2 PCS FRT BUMPER SIDE RETAINERS @45/PC	0.00	0.00	*90.00 F
3	1		*6 PCS FRT BUMPER TOP RUBBER CLIPS @2/PC	0.00	0.00	*12.00 F
4	1		*1 PC FRT BUMPER LOGO	0.00	0.00	*40.00 F
5	1		*1 PC FRT BUMPER TOP BEAM	0.00	0.00	*50.00 F
6	1		*2 PCS HEADLAMPS @380/PC	0.00	0.00	*760.00 F
7	1		*1 PC FRT SUPPORT PANEL	0.00	0.00	*450.00 F
8	1		*1 PC FRT BRACE PANEL	0.00	0.00	*60.00 F
9	1		*1 PC AIR-CON CONDENSER	0.00	0.00	*500.00 F
10	1		*1 PC INVERTER RADIATOR	0.00	0.00	*400.00 F
11	1		*1 PC BONNET	0.00	0.00	*280.00 F
12	1		*1 PC BONNET LOCK	0.00	0.00	*55.00 F
13	1		*2 PCS BONNET HINGES @40/PC	0.00	0.00	*80.00 F
14	1		*1 PC FRT SUPPORT TOP AIR-GUARD	0.00	0.00	*80.00 F
15	1		*1 PC FRT RH FENDER EMBLEM (HYBRID)	0.00	0.00	*40.00 F
16	1		*1 PC FRT BUMPER REINFORCEMENT	0.00	0.00	*140.00 F

F=Franchise part.

Sub Total (\$\$) 3,217.00
+ Margin on L,N Items 10.00% (\$\$) 321.70
Total Parts (\$\$) 3,538.70

Cheng Hoe Motor Pte Ltd/SMN184A/01/03/2023 15:46. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

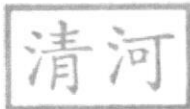
No	Qty	Particulars	Amount
1	1	1 PC FRT NUMBER PLATE	40.00
Sub Total (\$\$)			40.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
1	REMOVE & REFIX FRT BUMPER ASSY,GRILLE,HEADLAMPS,BONNET & ATTACHMENT,RADIATOR,FRT FENDERS,TO CUT,WELD & RENEW FRT SUPPORT PANEL,KNOCK & REPAIR FRT CHASSIS,FRT RH FENDER INNER PANEL AND REALIGN THE SAME	New	800.00
2	REMOVE & REFIX AIR-CON,CHECK,VACUUM & REFILL GAS	New	100.00
3	PUTTY & RESPRAY ON FRT RH DOOR,FRT BUMPER,REINFORCEMENT AND BEAM,BONNET AND HINGES,FRT SUPPORT PANEL,FRT RH FENDER INNER PANEL	New	1,000.00
Gross Labour Cost (\$\$)			1,900.00

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< END OF ESTIMATES >

**CHENG HOE MOTOR PTE LTD**

Blk 1019, Yishun Industrial Park A, #01-374/382, Singapore 768761

Tel : 67556142 Fax : 67557719

Email: chmotor@singnet.com.sg

INSURER: **Allianz Insurance Singapore Pte. Ltd. (HQ)****PARTICULARS OF CLAIM**

Claim Type:	OD (OWN DAMAGE)	Ref. No:	OD/ALLIANZ
Policy No:	SPCM1000000487	Date of Loss:	28/02/2023
Vehicle Reg. No.:	SMN184A	Driveable?	
Driver Age/Info:		Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	TAN XUE LI		
Driver:	CHER HUI AIK(XU HUIYI)		
Make/Model:	TOYOTA SIENTA HYBRID, 1.5 G (A)	Vehicle Reg. Date:	23/07/2019
Vehicle Colour:	WHITE		
Engine No:	1NZR469830	Chassis No:	NHP1707071436
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	0		
Description of Accident/Loss	REFER TO GIA REPORT ATTACHED.		
Remarks:	VEHICLE CURRENTLY LYING AT YISHUN WORKSHOP.		
Present Location:	CHENG HOE MOTOR PTE LTD (YISHUN)		

*Not Authorized
Repair B4 repair
Ex 82000/r
5 days*

COST OF CLAIMS

	Amount
Parts	3,538.70
Miscellaneous Items	40.00
Labour	1,900.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	5,478.70
+ GST 8.00% (S\$)	438.30
Nett Amount (S\$)	5,917.00

This claim is handled by: SHARON CHIONG BENG CHOON

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG **Version:** 1.0 (Last Synchronised: 10 Mar 2023)

Parts: M1-MPV **TOYOTA SIENTA HYBRID 1.5 G (A)** (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: Cheng Hoe Motor Pte Ltd/SMN184A/10/03/2023 10:26

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Suppl
SMN184A

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*1 PC RADIATOR	0.00	0.00	*650.00 F
2	1		*1 PC FRT GRILLE	0.00	0.00	*350.00 F
3	1		*1 PC AIR FILTER HOUSING	0.00	0.00	*290.00 F
Sub Total (S\$)						1,290.00
+ Margin on L,N Items 10.00% (S\$)						129.00
Total Parts (S\$)						1,419.00

F=Franchise part.

Cheng Hoe Motor Pte Ltd/SMN184A/10/03/2023 10:26. Not valid without Reference section.
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Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

There are no labour items selected.

Cheng Hoe Motor Pte Ltd/SMN184A/10/03/2023 10:26. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 131A

Vehicle Details

Vehicle No.: SMN184A
Vehicle to be Exported: No
Intended Deregistration Date: 28 Feb 2023
Vehicle Make: TOYOTA
Vehicle Model: SIENTA HYBRID 1.5G CVT
Primary Colour: White
Manufacturing Year: 2016
Engine No.: 1NZR469830
Chassis No.: NHP1707071436
Maximum Power Output: 73.0 kW (97 bhp)
Open Market Value: \$25,177.00
Original Registration Date: 23 Jul 2019
First Registration Date: 23 Jul 2019
Transfer Count: 1
Actual ARF Paid: \$17,248.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 22 Jul 2029
PARF Rebate Amount: \$12,936.00

Intended COE Rebate Details

COE Expiry Date: 22 Jul 2029
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$30,009.00
COE Rebate Amount: \$19,183.00
Total Rebate Amount: \$32,119.00

The information contained herein is correct as at 28 Feb 2023

OK

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	28/02/2023 16:51 (SGT)
Reported by	Driver
Date of Accident	28/02/2023 06:38 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE TWDS ANG MO KIO AVE 5 EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN184A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN XUE LI
NRIC No	SXXXX131A
Email Address	caelyntan@gmail.com
Mobile Phone No	(Phone) +65-81111480
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	SIENTA HYBRID 1.5G CVT
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SPCM1000000487

DRIVER

Name of Driver	CHER HUI AIK (XU HUIYI)
NRIC No	SXXXX642J
Date Of Birth	26/01/1976
Occupation	Outdoor

Date Of Driving Pass	07/06/2007
Driving experience	15 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81111488
Alt. Phone Number	-
Email Address	davecher21@gmail.com
Address	BLK 617 YISHUN RING RD #03-3264
Address complement	-
Postcode	760617
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	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	PASSENGER
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNE3118H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBL6423L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-

Describe Circumstance of the Accident

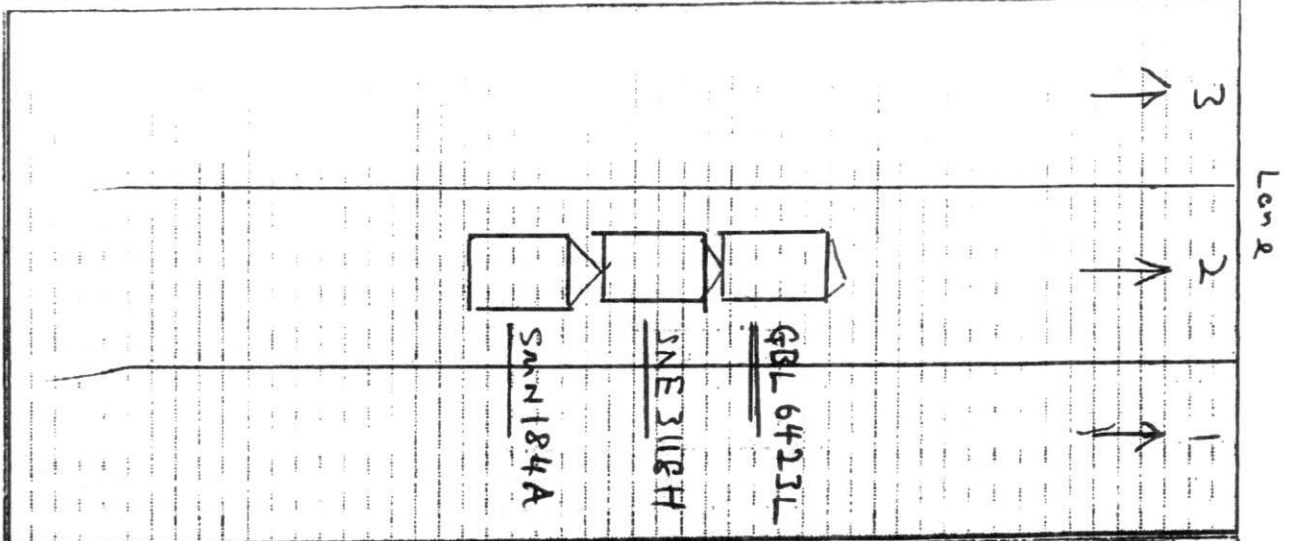
** NOTE PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14 DAYS TIME FRAME for you to submit OWN DAMAGE

Claim under your Own Comprehensive policy. Pls check your policy for more information.

(☒) Claim Own Policy () Claim Third party () Reporting Only

() Claim OD/ TP at other workshop ()

Sketch Plan



I was travelling along CTE Toward Ang Mo Kio Ave 5 Exit in the middle lane suddenly GBL 6423L Jam brake and SNE 3118H also follow jam brake but hit the front van. I could not manage to stop in time and hit SNE 3118H. The road is wet due to rain. No injury involved.

Declaration

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

[Signature]

Policyholder's Signature / Date & Time

[Signature]

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

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

[Signature] 28/2/23
(45)

SKETCH PLAN

VEHICLE SMN 184 A
INSURER Allianz
DATE OF ACC 28/2/23 @ 06:38am

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.

[Signature]

Policyholder's Signature / Date & Time

[Signature]

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

[Signature] 28/2/23

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

(45)

Sketch Plan

PLEASE
TURN
OVER