(08/11 /13) wef		
ASS_ REC. BY: / Tayfilm REF:	G1	
ASS	SIGNMENT	2023 Sep
From: Date:	Veh No: 3557724C	Yr Rean: Wolf, Syp
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorr	y / Taxi / Prime Mover /
OD / TP WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	
To In spect Vehicle No:	Make: Trysta Vios	c.c 1497 -
at Workshop m/s	- 1	A/C: Insured / Std / NI / NA
of		T/Radio: Insured / Std / NI / NA
Insured:		Intadio, modicar otariar
Policy No.	Eng/No:	Y4305080603
Claimas No.	Gen. Cond: Good / Fair / Poor / Burnt	J95 87 80805
Sum Insured: Excess:	. 📈	
(Client's Record)	Steering: Inorder / Jammed / Leaked / Bu	*
Make of Veh:	Brake: Injuryer / Jammed / Leaked / Bu	rnt or
	Modi: Nil / SRim / STD A/Rim or	7/15
(Policy Condition)	1,100,20	3 10/3
Remark: The veh had commenced its N/S O/S	R:	
repair at the time of inspection.	BS / DUN/ EXNOVA / GY / FS / LIZA / MIC	C/OHTSU/PIR/SUMI/
Bal. or Market Value: \$\\ 2500	TOYO / YOKO or	
IDAC Accident Rport: Consistent? : Yes or No	1	Rear
GIA / PR Seen: Consistent? : Yes or No	1.00	R/Bal. G mm
Est. Repairs: days Res.: Yes or No		/Bal. mm
Lum Sum: % 3 Val.: Yes or No		0.0.1. 03/6/25.
I'M?	2	
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages : Frt / Real / O/S / N/S	S / U/C / Rooftop or
Date:Person Contacted:	The U/C / Chassis frame / Body Str	The state of the s
Date / Time Action / Instruction **	The ere remassis traine r body Str	acture affected due to collision.
Report limit \$1500		
	· · · · · · · · · · · · · · · · · · ·	
	4	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:	-
1) : Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?		ransportation:
2) Add Fee:	Site Inch (\$	_S+RS,SI
	: Interview (\$	Photos
Report Format :	: Tech Invs (\$	Others
Lump Sum / I.B.I: (\$)	· : Weekend (\$	
		TOTAL





TeamWork Garage Pte Ltd

53 Ubi Avenue 1 #01-23/24 Spore 408934

Paya Ubi Industrial Park

Tel: 6844 2475

E-mail: claims@teamworkgarage.com

ROC number : 201015366H REPAIR PERFORMA INVOICE

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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 722Z

Vehicle Details

Vehicle No.;SJJ7724CVehicle to be Exported:Yes

Intended Deregistration Date: 12 Jun 2023
Vehicle Make: TOYOTA
Vehicle Model: VIOS E AUTO

Primary Colour: Blue Manufacturing Year: 2008

Engine No.: 1NZX801906

 Chassis No.:
 MR053HY9305080603

 Maximum Power Output:
 80.0 kW (107 bhp)

Open Market Value:\$11,834.00Original Registration Date:24 Sep 2008First Registration Date:24 Sep 2008

Transfer Count: 3

Actual ARF Paid: \$11,834.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited

PARF Eligibility Expiry Date: PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 23 Sep 2023

COE Category: A - Car (1600cc & below)

COE Period(Years): 5

 PQP Paid:
 \$16,170.00

 COE Rebate Amount:
 \$907.00

 Total Rebate Amount:
 \$907.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 12 Jun 2023

SR05236D0002 / Roset Limousine Services Pte Ltd ENTRY DATE & TIME: 13/06/2023 11:42 (SGT) SUBMITTED BY: KhierthiiVT VERSION: 1 (13/06/2023 11:42 (SGT))



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 6. This report will, for a fee, be made available upon application by interested parties.

 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

13/06/2023 11:42 (SGT) Date of Submission Owner Reported by 10/06/2023 16:30 (SGT) Date of Accident 1 Queensway, Singapore 149053 Exact Location of Accident Additional Location Information QUEENSWAY Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJJ7724C

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner
Company Reg No ROSET LIMOUSINE SERVICES PTE LTD 200406722Z khierthii@rosetlimo.com Email Address (Phone) +65-87420435 Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

Toyota Manufacturer Vios Model E AUTO Variant Exact purpose for which vehicle was being used at time of Private hire

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category

Transmission CC

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5124311472-01-000046

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

MUHAMMAD AZRI BIN AZMAN S9038019B 03/10/1990 Indoor

No - Claiming third party

Private car Auto

1497



Accident report SR05236D0002

Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Phase report correctly 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 will ulmsrepresentation or withholding of material facts may alow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Formby insurance companies is not an admission of policy fability on the part of the insurance
- 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 ledgement 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 lawyers/law firms, the Monetary Authority of Singapore and any rolevant government agency/authority (such as the police), for the purpose(s) of :
- (i) processing, handling and/or dealing with my cloims including the settlement of the claims and any necessary investigations relating to
- (a) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquities by me;
- (iv) administering my claims (including the making 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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (colectively the "Purposes")
- (b) at 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 GM to their third party service providers or agents (including their last, ers/law tirms), which may be sited outside of Singapore, for one or more of the above Purpose.

Pulcyrolder's Signature / Date &

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

Witnessed by Reporting Centre

Personnel.

Khierthii Varmaan

Sketch Plan

Reliel

A- 23777246 B-STEBUDJ

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IWe declare the foregoing particulars are true in every respect;

Policyholders Signature / Date & Time

Diver's Signature (F Univer is not the policyholder) / Date & Time

Khierthii Varmaan

Witnessed by Reporting Centre Personnel