

ASS. REC. BY: Tough

REF:

03/CT 23007097/Tnp

ASSIGNMENT

2026 June

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: _____
at Workshop. m/s _____
of _____
Insured: _____
Policy No. _____
Claims No. _____
Sum Insured: _____ Excess: 100
(Client's Record)
Make of Veh: _____

Veh No: SDK8922G Yr Regn: 2006, June
Type: Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____
Make: Toyota Previa c.c. 2362
Colour: Silver A/C: Insured / Std / NI / NA
Sp. Reading: _____ T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: STE9052MX-07029721
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Modl: NI / S/Rim / STD A/Rim or
Tyre Size: F: 215/60R16
R: 215/60R16

(Policy Condition)
Remark: The veh had commenced its
repair at the time of inspection.

N/S	O/S

Bal. or Market Value: \$50K
IDAC Accident Report _____ Consistent?: Yes or No
GIA / PR Seen: _____ Consistent?: Yes or No
Est. Repairs: _____ days Res.: Yes or No
Lum Sum: _____ % 3 Val.: Yes or No
CA / REV / REP. / 24 HRS
Date: _____ Person Contacted: _____ Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or _____
Front _____ Rear _____
R/Bal. 6 mm R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. _____ D.O.I. 13/7/23
Survey held at Cheng Hwe WL
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Pire case.

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

Date / Time	Action / Instruction
	02/08/23 submit extensive total loss
	mv: 50k (est)
	Ita: \$ 13306
	nv: \$ 36694

Date/Time, File Pass to? ☐ : Prel. Report
1) ☐ : Final Report
Date/Time, File Return to?

Days Of Repair: _____
Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)
☐ : Interview (\$ _____)
☐ : Tech. Invs (\$ _____)
☐ : Weekend (\$ _____)

Survey Fee: _____
Transportation: _____
\$ + RS. \$ _____
Photos _____
Others _____
TOTAL _____

Rep. Format: _____
Lump Sum / L.B.B. (\$ _____)

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 12 Jul 2023)
Parts: M1-MPV TOYOTA PREVIA 2.4 8-SEATER (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)

SDK 8922G
 OD / China
 *Fire case

Print Code: Cheng Hoe Motor Pte Ltd/SDK8922G/12/07/2023 18:20

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

There are no new parts selected.

Cheng Hoe Motor Pte Ltd/SDK8922G/12/07/2023 18:20. Not valid without Reference section.
 Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

No Particulars

Lab.Type

Amount

Labour Items

1	Towing (from scene to Owners own workshop) - by owner	New	120.00
2	Towing (from own workshop to Cheng Hoe, Woodlands)	New	50.00

Gross Labour Cost (S\$) 170.00

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 Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

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:

Taufik 97495741 / 62563561
 Not authorize
 Ex: to be advise
 13/7/23 @ 230pm.
 Taufik @ hands on



Efficient Towing Services

402B Fernvale Lane #22-229 Singapore 792402

Ah Di Mobile: 8588 8877

Email: efficienttowing.sg@gmail.com

Business Reg. No: 53349344K

bigSAFE,

NO. 138571

Date: 12/7/23

CASH SALE / JOB ORDER

Messrs: Chang Hoe
车牌 SPK 8922 G 车型 Previa
Vehicle No. SPK 8922 G Model No: Previa
时间 (日/夜) 联络号码 62615262
Time (day/night): 62615262 Contact No: 62615262
由 10 Penjuru Ang Kah Hoe
Location: 10 Penjuru Ang Kah Hoe
到 38 Woodland Ind park e1 05-04
To: 38 Woodland Ind park e1 05-04
金额 \$50 其他
Cash S \$50 Others: Ken
经手人 Ah DP Tow Truck
Authorised By: Ah DP Driver Name: Ken

- ☐ Jump Start/Changing of battery
- ☐ Tyre Replacement
- ☐ Accident/Breakdown
- ☐ Multi/Basement
- ☐ With Load/Cargo Box
- ☐ King Dolly
- ☐ Transport Charge
- ☐ Low Body Kit
- ☐ Door Opening Service
- ☐ Crane Up/Winch Out
- ☐ Collect Doc/Key
- ☐ Repo
- ☐ Woodlands and Tuas Checkpoint

注意: 本公司对所拖之车辆, 在进行中如有任何损失或破坏,
一概由车主自行负责。

Note: Vehicle is towed at owner's risk. The company accepts no responsibility
for any damage to the vehicle whilst being towed.

E. & O. E.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 342G

Vehicle Details

Vehicle No.: SDK8922G
Vehicle to be Exported: No
Intended Deregistration Date: 10 Jul 2023
Vehicle Make: TOYOTA
Vehicle Model: PREVIA 8 SEATER
Primary Colour: Silver
Manufacturing Year: 2006
Engine No.: 2AZ2231698
Chassis No.: JTEGD52MX07029721
Maximum Power Output: 125.0 kW (167 bhp)
Open Market Value: \$36,202.00
Original Registration Date: 06 Jun 2006
First Registration Date: 06 Jun 2006
Transfer Count: 1
Actual ARF Paid: \$39,823.00

Intended PARF Rebate Details

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

Intended COE Rebate Details

COE Expiry Date: 31 May 2026
COE Category: B - Car (1601cc & above)
COE Period(Years): 10
PQP Paid: \$46,048.00
COE Rebate Amount: \$13,306.00
Total Rebate Amount: \$13,306.00

The information contained herein is correct as at 10 Jul 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	10/07/2023 18:19 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	09/07/2023 02:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	118A ALKAFF CRESCENT ALKAFF LAKEVIEW UN/LOADING BAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDK8922G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHUA KOK WEI
NRIC No	SXXXX342G
Email Address	edwinchua8922@gmail.com
Mobile Phone No	(Phone) +65-98418922
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	PREVIA 8 SEATER
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	2362

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNA00134292215

DRIVER

Name of Driver	SHERMAINE CHUA SI MIN
NRIC No	SXXXX813I
Date Of Birth	11/11/1995

Occupation	Indoor
Date Of Driving Pass	23/06/2014
Driving experience	9 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-98758922
Alt. Phone Number	-
Email Address	shermainechua15@gmail.com
Address	BLK 708 CLEMENTI WEST ST. 2 #1-301
Address complement	-
Postcode	120708
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	Fire, explosion or lightning
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
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	FRIEND
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Tanglin Division Headquarters
Police Station Phone No	(Phone) +65-18003910000
Alt. Police Station Phone No	(Fax) +65-63964900
Police Station Address	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

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

118A Alkaff Crescent Lakeview Car Park



SDK 8922G

Refer to Police Report No: E/20230710/7025

*Vehicle currently at 10 Penjuru Rd - Ang Kah Hoe Automobile

Declaration

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



Policyholder's Signature / Date & Time

Can

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



10/7/23

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

(45)

SKETCH PLAN

VEH NO. SDK 8422 G.

INSURER: China Taiping

DATE OF ACC: 09/7/23 @ 02:00am

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) (YS)

Sketch Plan

PLEASE
TURN
OVER



SINGAPORE POLICE FORCE



E/20230710/7025

1 of 2

POLICE REPORT (NP299)

Report No. E/20230710/7025

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No:1800-3910000

Date/Time Report Made 10/07/2023 13:52	Vide Report No.	Station Diary No.
Name Of Informant SHERMAINE CHUA SI MIN	Address 708 CLEMENTI WEST STREET 2 #11-301 SINGAPORE 120708	
ID Type / ID No. NRIC NO / S9541813I	Contact No. Home/Office: Mobile: 98758922	
Nationality SINGAPORE CITIZEN	Email Address SHERMAINECHUA15@GMAIL.COM	
Occupation Primary school teacher	Sex Female	Age 27
Institution/School Name	Date of Birth 11/11/1995	Race Chinese
Date/Time Of Incident 09/07/2023 02:00 - 09/07/2023 02:10	Language English	
	Location Of Incident 118A ALKAFF CRESCENT ALKAFF LAKEVIEW SINGAPORE 341118	

Brief details.

At 2 a.m., I was in the car which was stationary at the loading bay. I saw smoke coming out from the front wheel on the left and immediately turned off the engine and stepped out.

Soon, I saw sparks under the car and called 995. Then I went to find the hdb hose and sprayed water towards the car.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 10/07/2023 13:52
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



E/20230710/7025

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20230710/7025

After a couple of minutes, the fire started beneath the car and the fire engine came. While the fireman were putting out the fire, it grew bigger under the bonnet. The engine was burning.

The fire was completely extinguished in 30 minutes.

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
10/07/2023 13:52

Classification Of Case: