

ASS. REC. BY:

REF CS3/FCI1901/3275/Bcd3ST

Special Instruction:

Survey: Mr Jim
CWS

ASSIGNMENT (Office)

From (Person): Joanne Yong of FCI Date/Time: 2:45pm 29/7/19

Estimated Cost: Bill to:

OD/TP/WS/TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SKP 1123H Insured: SH 7347L

at Workshop m/s Team Autopro Tel: 90927279

of 160 Sin Ming Drive # 01-14

Policy No: Claim No: D19004810MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 20/7/2019
(Client's Record)

CA / REV / REP. / REV 24 HRS COS H.O.D. Endorsement:

Date/Time: 2:48pm 29/7/19 Person Contacted: Alan Vehicle: IN/OUT

Date/Time	Action/Instruction
	Johny X
	SKP 1123H
	SH 7347L - NS/INC1901/0901/K/fd3s2 DOA: 18/6/2019
	Diamond: 31/7/2019

MOTOR SURVEY ASSIGNMENT

Date 23-07-2019 Our Ref No. D19004810MFSH
Accident Date 20-07-2019 Claim Type. Third Party
Insured Vehicle SH7347L Third Party Vehicle. SKP1123H
Survey Location 160 SIN MING DR, #01-14 SIN MING AUTOCITY
Contact Person. ALAN KOH
Contact No. 90927279/ 96746635 Fax No. 62581956
Survey Type WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:
Appointed Surveyor LKK AUTO CONSULTANTS PTE LTD
Contact Person NA Fax No. 68416315
Contact Number. NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop TEAM AUTOPRO PTE LTD Attention. NIL
Cc : TP Solicitor NA TP Solicitor Fax No. NA
Officer Incharge JOANNEY

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

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 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. 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 Report	22/07/2019 17:46
Date Of Accident	20/07/2019 10:20
Exact Location Of Accident	YIO CHU KANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP1123H
Insured/Policyholder	
Name Of Registered Owner	YEO CHENG GUI
NRIC No	S1370622J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96773054
Alternative Phone No	OFFICE-96773054

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	CLA180
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	YEO CHENG GUI
NRIC No	S1370622J
Date Of Birth	22/12/1959
Occupation	INDOOR
Date Of Driving Pass	10/03/1978
Driving Experience	41 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96773054
Fax Number	
Contact Number	OFFICE-96773054
EEmail Address	NOEMAIL

Address	-
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER ATTACHED.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH7347L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

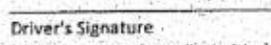
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:



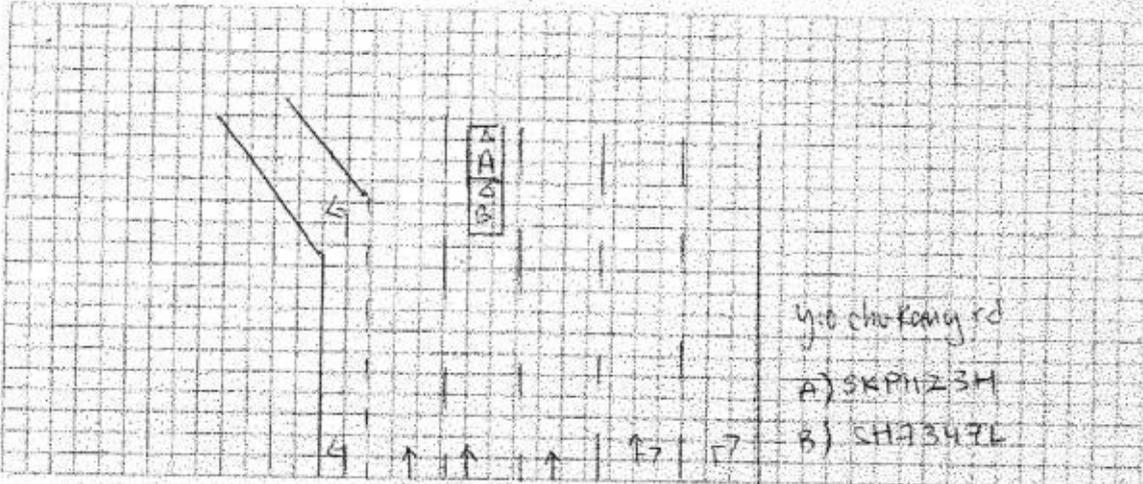
Driver's Signature
(if driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle 'A' was travelling on the stated venue. I was travelling straight in my lane and as the traffic was red hence I stop. I was stationary for awhile, suddenly I felt a huge impact on my vehicle rear. Shortly I got down and realised vehicle 'B' SH7347L had collided against my stationary vehicle rear portion.

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:

[Signature]
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

(GP/PS/34-2012/PlanForm_01)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	622J
Vehicle Details	
Vehicle No.:	SKP1123H
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Jul 2019
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	CLA180 (R18 BI)
Primary Colour:	Red
Manufacturing Year:	2014
Engine No.:	27091030396425
Chassis No.:	WDD1173422N091896
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,675.00
Original Registration Date:	06 Jun 2014
First Registration Date:	06 Jun 2014
Transfer Count:	0
Actual ARF Paid:	\$19,345.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	05 Jun 2024
PARF Rebate Amount:	\$13,541.00
Intended COE Rebate Details	
COE Expiry Date:	05 Jun 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$71,335.00
COE Rebate Amount:	\$34,616.00
Total Rebate Amount:	\$48,157.00

The information contained herein is correct as at 29 Jul 2019

OK

4-10.5

Dep 13700p

MV 76,000p

PV 48,157p

NV 27,843p

TGM Lin
29/7/19

Posted: 27-Jul-2019 Tags: 2014 Mercedes-Benz CLA180, 2014 mercedes-benz cla180, Mercedes-Benz CLA180, mercedes-benz cla180, Mercedes-Benz, CLA180, cla180, Used Mercedes-Benz



Mercedes-Benz CLA-Class CLA180 **\$73,800** **\$12,960 /yr** **24-Jun-2014** **1,595 cc** **94,000 km** **Luxury** **Available**

C&C Unit. Sheltered Park. Well Maintained. STA/Viacom Inspection Welcome. Highest Trade In. Bank Loan, Balloon Loan, In House Loan. 100% Loan Available. Test Drive Today. Fast Deal.

PREMIUM ED.

Posted: 17-Jul-2019 Tags: 2014 Mercedes-Benz CLA180, 2014 mercedes-benz cla180, Mercedes-Benz CLA180, mercedes-benz cla180, Mercedes-Benz, CLA180, cla180, Used Mercedes-Benz



Mercedes-Benz CLA-Class CLA180 **\$75,000** **\$13,250 /yr** **18-Jun-2014** **1,595 cc** **-** **Luxury** **Available**

Flexi-Loan/High-Trade Ins Available! Wear And Tear Fully Replaced With Receipts Proof By Reputable Workshop. New Nardo Grey Paintwork Less Than A Year Old! Full AMG Bodykit With 18" Sports Rims. Guaranteed Worry-Free Purchase. Call For An Non-Obligatory...

DRIFT OWNER

Posted: 12-Jul-2019 Tags: 2014 Mercedes-Benz CLA180, 2014 mercedes-benz cla180, Mercedes-Benz CLA180, mercedes-benz cla180, Mercedes-Benz, CLA180, cla180, Used Mercedes-Benz



Mercedes-Benz CLA-Class CLA180 **\$78,800** **\$14,030 /yr** **18-Jun-2014** **1,595 cc** **78,449 km** **Luxury** **Available**

New Road Tax. Cycle Unit. Wear And Tear Parts Restored. Pristine Condition. Maintained By 1 Owner. Stylish And Eye Catching Model. Kindly Call/WhatsApp For A Test Drive Soon. View To Believe. Loan Assist Available Trade In Welcome. Om

Posted: 12-Jul-2019 Tags: 2014 Mercedes-Benz CLA180, 2014 mercedes-benz cla180, Mercedes-Benz CLA180, mercedes-benz cla180, Mercedes-Benz, CLA180, cla180, Used Mercedes-Benz



Mercedes-Benz CLA-Class CLA180 **\$77,800** **\$14,060 /yr** **02-Jun-2014** **1,595 cc** **86,000 km** **Luxury** **Available**

Interest Rate 2.28% Only! Secured And Well Maintained By Fussy Owner. Immaculate Condition Inside & Outside. Certified With Assurance. Give Yourself A Peace Of Mind! Buy It From Us! A Company With Professional Sales Serviced Assured. Call Our Sales Team A...

Posted: 24-Jul-2019 Tags: 2014 Mercedes-Benz CLA180, 2014 mercedes-benz cla180, Mercedes-Benz CLA180, mercedes-benz cla180, Mercedes-Benz, CLA180, cla180, Used Mercedes-Benz

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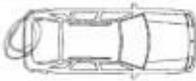
LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

PRE-REPAIR INSPECTION REPORT			
MS FIRST CAPITAL INSURANCE LTD		Ref: CS3/FCI19013275/Bcd3s2	
36 ROBINSON ROAD		Date: 06-08-2019	
#16-01 CITY HOUSESINGAPORE 068877			
Code: FCI2			
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	SH 7347L	Veh. Inspected	SKP 1123H
Policy No.		Coverage (\$)	0.00
Claim No.	D19004810MFSH	Excess (\$)	0.00
Assign From	JOANNE YONG	Assign Date	29/07/2019
2. Vehicle Particulars & Condition			
Make & Model	MERCEDES BENZ CLA180	c.c	1595
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	WDD1173422N091896	Colour	RED
Odometer	119997 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	225/40ZR18	MICHELIN	6 mm
L/H Front Tyre	225/40ZR18	MICHELIN	6 mm
R/H Rear Tyre	225/40ZR18	MICHELIN	6 mm
L/H Rear Tyre	225/40ZR18	MICHELIN	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
5. General Information			
Accident Date	20/07/2019	Inspect Date / Time	29/07/2019 (03:53 PM)
Survey held at	TEAM AUTOPRO PTE LTD 160 SIN MING DRIVE #01-14 SINGAPORE 575722		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) MARKET VALUE: \$76,000.00			

Report Ref No. CS3/FCI19013275/Bcd3s2

Inspected By

LIM TEOW GUAN

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MinstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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