

A.S.S. REC. BY:

REF:

CS/CT120012090/R1f3

0652

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SLF 6340Eat Workshop m/s VANTAGE Automotiveof 305, MCKINRA RD #02-01Insured: CTI

Policy No. _____

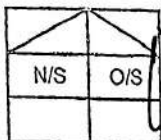
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 57K

IDAC Accident Rpt: _____ 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

Veh No: SLF 6340E Yr Regn: 2016 / SEPType: ☒ M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: MAZDA 3 4-DOOR SD 1.5L c.c 1496Colour: BLACK A/C: Insured / Std / NI / NASp. Reading: 81564 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: Jm 6BM 42A86 038724Gen. Cond: Good / ☒ Fair / Poor / BurntSteering: In order / ☒ Jammed / Leaked / Burnt orBrake: In order / ☒ Jammed / Leaked / Burnt orModi: Nil / ☒ S/Rim / STD A/Rim orTyre Size: F: 205/60R16

R: _____

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

TOYO / YOKO or Fireza

Front

Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 31/10/2020 D.O.I. 09/11/2020Survey held at VANTAGEDes. of Damages: Frt / Rear / ☒ N/S / U/C / Rooftop or

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

Date / Time

Action / Instruction

finalise \$2750, 5days 3050, 5DAYS RED:

red: 4575.84, 62% RED: 2750, 37%

7325.84

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: 5

1)

Date/Time, File Return to?

☐ : Final Report

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

Report Format: _____

Lump Sum / I.B.H. (\$) _____

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

Vantage Automotive Limited

Vantage Automotive Limited

Registration No. 192600045M GST Registration No. M2-0000551-1

Alexandra Road

42 Singapore

6272 8828

6477 7398



GST Registration No. M2-0000551-1

ESTIMATE

Estimate No. : B9 4835
Date Estimated : 03/11/2020
Prepared By : Andy Ooi Lee Keong

Page No. : 1 of 1

- ESTIMATE REPAIR FOR -
Sime Darby Services Private Limited
305 Alexandra Road
#02-01 Vantage Automotive Centre
Singapore 159942

- ACCOUNT - 31432
China Taiping Insurance (Singapore) Pte Ltd
3 ANSON ROAD
#16-00 Springleaf Tower
Singapore 079909

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLF6340E	JM6BM42A8G0338724	01/09/2016	MAZDA	0

DESCRIPTION

VALUE

TO CONDUCT TP CLAIM CHINA TAIPING INS AGAINST-GW1142M
DOA.31.10.20

0.00

TO REMOVE AND REPLACE FRONT DOOR RH, REAR DOOR
RH, REAR FENDER RH AND AFFECTED AREAS.

1200 2,000.00

TO RESPRAY AND PUTTY FRONT DOOR RH, REAR DOOR
RH, REAR FENDER RH AND AFFECTED AREAS. RM

1250 1,500.00

TO TRANSFER AND REFIT FRONT DOOR FITTING, GLASS, TRIM
AND MECHANICAL COMPONENT.

150 300.00

TO TRANSFER AND REFIT REAR DOOR RH FITTING, GLASS, TRIM
AND MECHANICAL COMPONENT.

150 300.00

TO CARRY OUT BODY CAVITY PRESERVATION.

X 250.00

Total Labour 1: 4,350.00

PART NUMBER	DESCRIPTION	QTY	PRICE	DISC	VALUE
	REAR DOOR RH repair	1	1,049.00	20.00	839.20
	REAR DOOR RUBBER BEADING RH X	1	126.00	20.00	100.80
	FRONT DOOR RH repair	1	1,200.00	20.00	960.00
	FRONT DOOR RUBBER BEADING RH X	1	111.80	20.00	89.44
	REAR FENDER RH repair	1	1,233.00	20.00	986.40
Total Parts :					2,975.84

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

Customer Name & Signature / Company Stamp

Date

Labour 1	:	4,350.00
Parts	:	2,975.84
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	512.81
Grand Total	:	7,838.65

The above estimates are based on visual inspection and it is possible that further materials and labour may be required upon dismantling. Should this occur, we will submit supplementary quotation for further approval. This estimate is valid for a period of 30 days only.

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	02/11/2020 09:24
Date Of Accident	31/10/2020 20:05
Exact Location Of Accident	CHANGI RD TWDS GELYANG RD (NEAR 116 CHANGI RD)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF6340E
Insured/Policyholder	
Name Of Registered Owner	SIME DARBY SERVICES PTE LTD
Co Reg No	1XXXXX065W
Email Address	OPERATIONS@HERTZ.SIMEDARBY.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-85337214

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.4 SEDAN 1.5L SP.6EAT (A)
Exact Purpose for which vehicle was being used at time of accident	CARS FOR HIRE
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	COMMERCIAL VEHICLE

Insurance Company

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

Driver

Name of Driver	STANLEY SOH JUNWEI
NRIC No	SXXXX207H
Date Of Birth	28/12/1998
Occupation	INDOOR
Date Of Driving Pass	24/10/2017
Driving Experience	3 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98535213
Fax Number	
Contact Number	
Email Address	SOHJS98@GMAIL.COM

Address
Postcode 470139
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE
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? YES
Was any injured conveyed to hospital by ambulance? NO
Was any other material or property damaged? YES
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? YES
If Yes, Please state which Police Station
Police Station Name TRAFFIC POLICE DIVISION HQ
Police Station Address ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: SINGAPORE
Police Station Contact TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GW1142M
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category GOODS VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number 97342250
Address
Postcode
Insurance Company Name
Nature Of Damage

Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

STANLEY SOH JUNWEI

Approximate Age

Injuries Sustain

SLIGHT

Injured person in which vehicle?

SLF6340E

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan

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 report 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.
- (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.

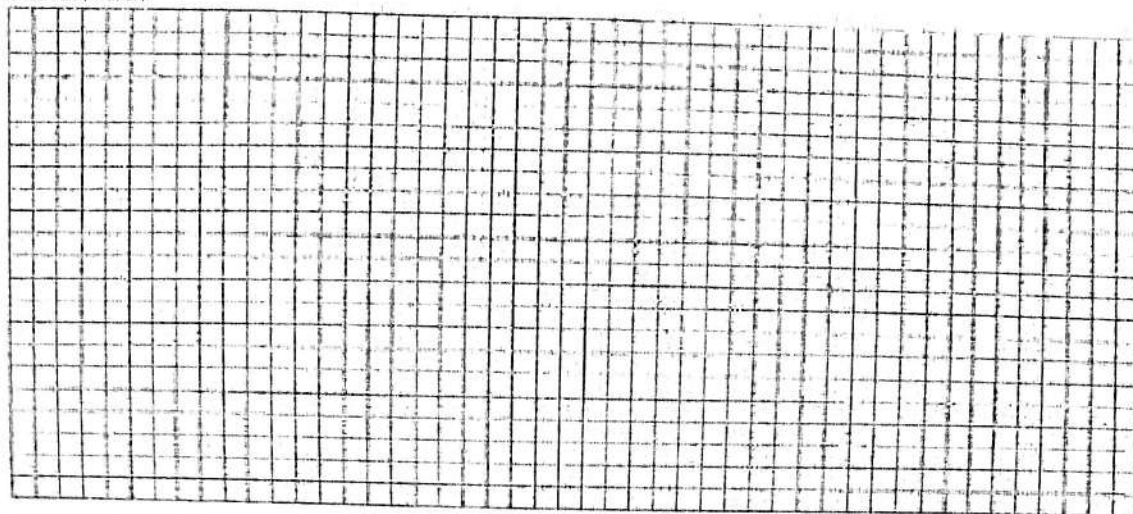
Policyholder's Signature
Date & Time:

Stanley Soh
Driver's Signature
(if driver is not the policyholder)
Date & Time: 01/11/2020


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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 31/10/2020 at about 2007hrs, I was driving my motor car, SLF6340E, along Changi Road, towards Gaylang Road. It was a 5-lane road which includes bus lane on the extreme left and parallel parking lots on the extreme right. At that moment, I was travelling on third lane when a commercial van, GW1142M, was inching out from the parallel parking lot on the first lane. The van then suddenly accelerated to the third lane and I immediately sounded my horn. However, the van driver was too fast and collided into my car. The location of accident is near to 116 Changi Road, right in front of the Chinese temple. My car was deeply scratch from the front driver door to the rear passenger door. Photographs were taken and both drivers exchanged contact details.

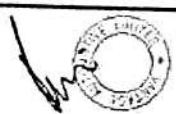
I felt giddiness and suffered neck and back pain due to the accident. Therefore, I went to Mount Alvernia Hospital to consult a doctor and was granted with 3 days medical leave.

DECLARATION

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

Policyholder's Signature
Date & Time:

Stanley Sok
Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20201101/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 4

Report No. T/20201101/7010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/11/2020 12:27		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: STANLEY SOH JUNWEI		Address: 139 BEDOK RESERVOIR ROAD #02-1489 SINGAPORE 470139	
ID Type / ID No.: NRIC NO / S9843207H		Contact No.: Home/Office: Mobile: 98535213	
Nationality: SINGAPORE CITIZEN		Email: SOHJS98@GMAIL.COM	
Sex: Male	Age: 21	Date of Birth: 28/12/1998	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Sales and related associate professional nec		Driving Licence Information: Class: 3	
Date of Expiry:			

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 31/10/2020 20:05	Type of Location: Straight Road
Location: CHANGI ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
GW1142M	Van	TOYOTA	LITEACE 4 DR	Silver	Slightly Damaged	0
SLF6340E	Car	MAZDA	3	Black	Slightly Damaged	0

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20201101/7010

Police Station Of Origin:

2 of 4

Traffic Police

Report No. T/20201101/7010

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SLF6340E	MSIG INSURANCE (SINGAPORE) PTE. LTD.			

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Unknown Driver	ID No.	NIL
Related Vehicle	GW1142M (Van)	Contact No.	97342250
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	STANLEY SOH JUNWEI	ID No.	S9843207H
Related Vehicle	SLF6340E (Car)	Contact No.	98535213
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	31/10/2020	Date	31/10/2020
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On 31/10/2020 at about 2007hrs, I was driving my motor car, SLF6340E, along Changi Road, towards Geylang Road. It was a 5-lane road which includes bus lane on the extreme left and parallel parking lots on the extreme right. At that moment, I was travelling on third lane when a commercial van, GW1142M, was inching out from the parallel parking lot on the first lane. The van then suddenly accelerated to the third lane and I immediately sounded my horn. However, the van driver was too fast and collided into my car. The location of accident is near to 116 Changi Road, right in front of the Chinese temple. My car was deeply scratch from the front driver door to the rear passenger door. Photographs were taken and both drivers exchanged contact details.

I felt giddiness and suffered neck and back pain due to the accident. Therefore, I went to Mount Alvernia Hospital to consult a doctor and was granted with 3 days medical leave.

Attached are the damage photographs of both vehicles.

Sketch Plan #5



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20201101/7010

3 of 4

Report No. T/20201101/7010

CONTINUATION OF REPORT

I have the front and back of the car camera video footage however I am unable to upload into the report attachment.



**SINGAPORE
POLICE FORCE**



T/20201101/7010

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

4 of 4

Report No. T/20201101/7010

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
JUREMAH BINTE AHMAD
Contact No.: 65476219

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
01/11/2020 12:27

Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	
Owner ID:	Company
	065W
Vehicle No.:	SLF6340E
Vehicle to be Exported:	No
Intended Deregistration Date:	09 Nov 2020
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Primary Colour:	Black
Manufacturing Year:	2016
Engine No.:	P520359131
Chassis No.:	JM6BM42A8G0338724
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$17,134.00
Original Registration Date:	01 Sep 2016
First Registration Date:	01 Sep 2016
Transfer Count:	0
Actual ARF Paid:	\$12,134.00
PARF/COE Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Aug 2026
PARF Rebate Amount:	\$9,100.00
COE Details	
COE Expiry Date:	31 Aug 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$53,334.00
COE Rebate Amount:	\$30,982.00
Total Rebate Amount:	\$40,082.00

The information contained herein is correct as at 09 Nov 2020

OK

Black



► Mazda 3 1.5A Deluxe

Overview

Financial

Accessories

Similar

Research

Photos

Map

Price \$59,800

Depreciation ⓘ \$8,460 /yr
View models with similar depre

Reg Date 29-Dec-2016
(6yrs 1mth 19days COE left)

Mileage 70,000 km (18.1k /yr)

Manufactured ⓘ 2016

Road Tax ⓘ \$682 /yr

Transmission Auto

Dereg Value ⓘ \$42,380 as of today (change)

OMV ⓘ \$20,569

COE ⓘ \$49,751

ARF ⓘ \$15,797

Engine Cap 1,496 cc

Power 88.0 kW (118 bhp)

Curb Weight ⓘ 1,321 kg

No. of Owners ⓘ 2

Type of Vehicle Mid-Sized Sedan

Features

1.5L DOHC 16 Valves SkyActiv-G Engine, 6 Speed Auto, ABS, Airbags, Auto Headlights And Rain Sensors, Immobilizer With Push Start Button. View specs of the Mazda 3 Sedan (2014-2019)

Accessories

Sunroof, Electric Leather Seats, Sports Rims, Factory Fitted Audio With AUX/USB/Steering Control, GPS, Reverse Camera/Sensors, Solar Film, Fog Lights.