

ASS. REC. BY:

REF:

CC3/EQ120014637/Aqd3

ASSIGNMENT

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. **DM20HO01966/JT**

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: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: **4** days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: **SKW437Y** Yr Regn: **2015, Oct.**Type: **M.Car** / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: **Mazda CX5** c.c. **1998**Colour: **White** A/C: Insured / Std / NI / NASp. Reading: **83424** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **JM6KE107260337048**

Gen. Cond. Good / Fair / Poor / Burnt

Steering: **In order** / Jammed / Leaked / Burnt orBrake: **In order** / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: **225/65R17**R: **225/65R17**

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

TOYO / YOKO or **Nexen**

Front _____ Rear _____

R/Bal. **db** mm R/Bal. **db** mmL/Bal. **db** mm L/Bal. **db** mmD.O.A. _____ D.O.I. **23/12/20**Survey held at **People**

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

Front N/S

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

Date / Time Action / Instruction

TP EQ

29/12/20@5.45pm Email GIA report to EQI.

02/02/21@12.38pm revised to Jaime Tay by email.

MV: 62K

PV: 45.4K.

Nett: 16.6K

LS \$3400, 4 days (Red \$4045.55, 54%)

Date/Time, File Pass to?

☐

Preli. Report

1) 02/02 Typist

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: **4**Resurvey No. of Trip: **2**

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Report Format: **TP**Lump Sum **3400**

Date Of Driving Pass	10/03/1988
Driving experience	32 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98762942
Alt. Phone Number	+65-98762942
Email Address	jc3365@singnet.com.sg
Address	BLK 104A DEPOT RD #25-547
Address complement	-
Postcode	101104
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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 STATEMENT.

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	SLL6082T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-



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 Submission	22/12/2020 10:45 (SGT)
Date of Accident	21/12/2020 15:30 (SGT)
Exact Location of Accident	Alexandra Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW437Y
-----------------------------	---------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHIA KOK TUCK
NRIC No	SXXXX113C
Email Address	jc3365@singnet.com.sg
Mobile Phone No	(Phone) +65-98762942
Alternative Phone No	+65-98762942

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	Cx-5
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?	No - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	FWD
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	PNPV2019-00005747-01
Cover Note Number	-

DRIVER

Name of Driver	CHIA KOK TUCK
NRIC No	SXXXX113C
Date Of Birth	18/08/1969
Occupation	Outdoor




Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLANIMPORTANT 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.
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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.
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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.

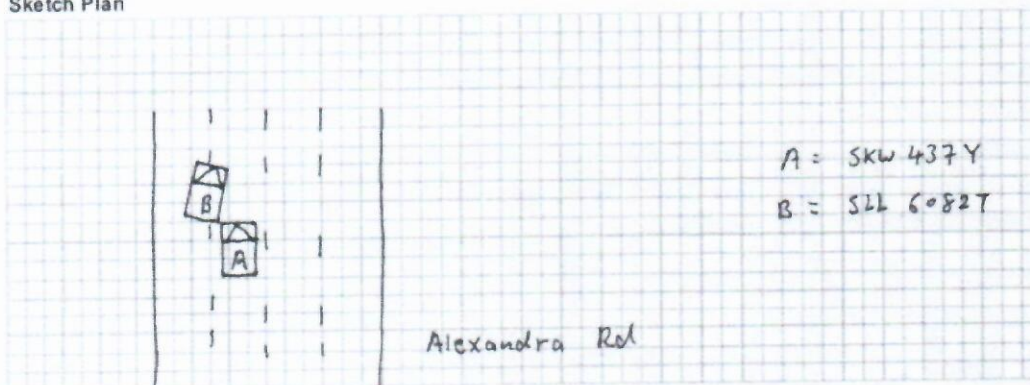


Policyholder's Signature / Date &
Time



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

Witnessed by Reporting Centre
Personnel

Sketch Plan

Describe Circumstances of the Accident

I was travelling along Alexandra ~~the~~ road on the second lane from the left, while going straight, suddenly Veh B from the extreme left lane cut into my lane and hit onto my Veh left front portion. I wish to state, Veh B never check the blind spot and abruptly cut into my lane

Declaration

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



Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 22 Dec 2020 / 11:38:44

Receipt Date/Time : 22 Dec 2020 / 11:35:59

Tax Invoice/Receipt

Receipt No. : ITNET-00000-201222-001548

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SLL6082T				
As at 21 Dec 2020/15:30:00				
Insurance Co: EQ INSURANCE COMPANY LTD				
1	Insurance Enquiry - SLL6082T Enquiry Fee 20201222113454905897	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	452419XXXXXX0018	eNETS Credit Card		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	113C
Vehicle Details	
Vehicle No.:	SKW437Y
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Dec 2020
Vehicle Make:	MAZDA
Vehicle Model:	CX-5 5-DOOR WAGON 2.0L SP.6EAT
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	PE10266223
Chassis No.:	JM6KE1072G0337048
Maximum Power Output:	121.0 kW (162 bhp)
Open Market Value:	\$22,140.00
Original Registration Date:	14 Oct 2015
First Registration Date:	14 Oct 2015
Transfer Count:	1
Actual ARF Paid:	\$22,996.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Oct 2025
PARF Rebate Amount:	\$16,097.00
Intended COE Rebate Details	
COE Expiry Date:	13 Oct 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$58,696.00
COE Rebate Amount:	\$29,205.00
Total Rebate Amount:	\$45,302.00

The information contained herein is correct as at 23 Dec 2020

OK

BUY 1 GET 2 FREE
OFFER ENDS 31 OCT 2020

MANDARIN SELF STORAGE

- ✓ FREE VAN M
- ✓ \$0 DEPOSIT
- ✓ 24 HOURS A

FOR SALE BY OWNER

Post an Advertisement
Sell it yourself! Advertise it at just **\$58 until it's SOLD!**

 Post an Ad |
  Advertiser Login |
  Ways of Selling

Rare Hyundai I40 Wagon!

1 And Only Hyundai I40 Wagon With Low Mileage And Low Depreciation!




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 Save Search  |
 Print  |
 Sort by Date Posted  |
 20 results/page 


2 vehicles |
 Search |
 Advanced Search  |
 Search  |
 View All 










Make  |
 Model  |
 Price  |
 Depreciation  |
 Reg Date  |
 Eng Cap  |
 Mileage  |
 Veh Type  |
 Status 

Search Selection

Search Selection	Mazda CX-5	Any	Any	2015	Any	Any	Any	Any	Available
	<input type="checkbox"/> Mazda CX-5 2.0A	\$64,800	\$11,050 /yr	20-Oct-2015	1,998 cc	79,998 km	SUV	Available	
Most Popular Mazda SUV For Your Family. Spacious & Reliable. Well Maintained & Fully Service With Eurokars Mazda Come With MVC.Certificate.Beautiful Original Paintwork With Clean & Neat Interior. Bank Or In-House Loan Available. Bank Or In-House Loan Availa...									
Henly Enterprises Co ☆ Posted: 19-Dec-2020 Tags: 2015 Mazda CX-5, 2015 mazda CX5, Mazda CX-5, mazda CX5, Mazda, CX-5, CX5									

	<input type="checkbox"/> Mazda CX-5 2.0A	\$65,800	\$10,920 /yr	18-Dec-2015	1,998 cc	47,000 km	SUV	Available	
Super Low Mileage Low Ownership, Be Amazed With The Condition Its Kept In, Very Safe Buy With No Repairs Needed. New Battery, Servicing Just Done! In House 6 Months Comprehensive Warranty With 24/7 Breakdown Recovery Service. High Loan Available! We Wel...									
☆ Posted: 19-Dec-2020 Tags: 2015 Mazda CX-5, 2015 mazda CX5, Mazda CX-5, mazda CX5, Mazda, CX-5, CX5									

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 Save Search 

Make  |
 Model  |
 Price  |
 Depreciation  |
 Reg Date  |
 Eng Cap  |
 Mileage  |
 Veh Type  |
 Status 

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