2.	E.E.	PHC.	TWA.
12	7		171

## CS/6TI21003811/Aqf3

REF:

ASS	SIGNMENT
From: Date:	Veh No: SKQ2855S. Yr Regn: 2014, NOV
Estimated Cost:	Type M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Mazda 5 c.c 1958
at Workshop m/s	Colour Bronze A/C: Insured / Std / NI / NA
of	Sp.Reading 177 422 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No. DMCVSN00056202000	C/No: JM6CW1071F0128431
Claims No. SNM21D201462C02	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil /S/Rim / STD A/Rim or
HUNC OF VOIL	Tyre Size: F: 205/57R(6.
(Policy Condition)	R: 205/55R46.
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front / Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. Oh mm R/Bal. The mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. Ob mm L/Bal. mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. D.O.I. 2003/2/
Lum Sum: % 3 Val.: Yes or No	Survey held at Progressive (USi)
Editi Suiti.	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS  Vehicle: IN / OU	Proc als.
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time   Action / Instruction	,
TP China.	
15/04/21 Informed Kah Leong, we are pend	
10/05/21@5.54pm revised to Tan Kah Leon	ıg via Merimen.
MV:431C.	
Nett : 7.6 K	
	0//
LS \$3350, 3 days (Red \$4702, 58	%)
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 3
accepted to the second	Resurvey No. of Trip: Survey Fee:
1) 11/05 Typist : Final Report  Date/Time, File Return to?	Transportation:
Add	
2)	: Interview (\$ ) Photos
MED TO	: Tech. Invs (\$ ) Others
Report Format: MER-TP	- West and (\$
Language States I COCO	B B VIGER BUILD TO

SP0U213D0007 / PROGRESSIVE CAR CARE PTE LTD ENTRY DATE & TIME: 13/03/2021 14:02 (SGT) SUBMITTED BY: Ng Pei Wen VERSION: 1 (13/03/2021 14:02 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
   This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
- 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
- 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 13/03/2021 14:02 (SGT) Date of Accident 13/03/2021 11:54 (SGT) Exact Location of Accident Bukit Panjang Rd, Singapore Additional Location Information Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SKQ2855S

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner TAY HOCK CHYE NRIC No SXXXX231B TAYJERRY@YAHOO.COM **Email Address** (Phone) +65-92973444 Mobile Phone No Alternative Phone No +65-92973444

VEHICLE PARTICULARS

Manufacturer Mazda 5 Model Variant 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 - Claiming third party Private car Vehicle Category

INSURANCE COMPANY

Name of Insurance Company AIG Comprehensive Type of Coverage No Fleet Policy Policy Number 2100392961-06 Cover Note Number

DRIVER

TAY HOCK CHYE Name of Driver SXXXX231B NRIC No 25/04/1954 Date Of Birth Occupation Indoor

30/04/1984 Date Of Driving Pass 36 YEARS AND 11 MONTHS Driving experience Gender (Phone) +65-92973444 Mobile Number +65-92973444 Alt. Phone Number TAYJERRY@YAHOO.COM Email Address 158 MARIAM WAY #03-01 Address Address complement 507083 Postcode 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 - Head to Rear 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) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? PASSENGER 1 Name PAX 1 Male Gender 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 THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No No Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** GBB7744 G Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Commercial vehicle

Vehicle Category Name of Driver

Contact Number	-
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. Please 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 wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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.
- 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)

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' law yers/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;
- (ii) 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.

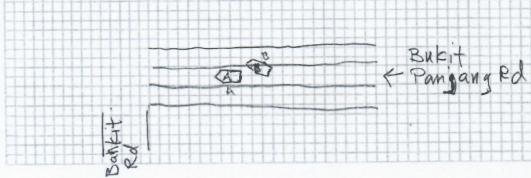
(collectively the "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

Witnessed by Reparting Centre
Personnel

Witnessed by Reparting Centre



Describe Circumstances of the Accident

At 1150 are along Bukit Panjang Rd toward
BKE. I was on 2nd lane of stanes.
V
A 3BS bus eat into lane 2 from bus stop
(Just before Bankit Rd). I slow down
for him. Suddenly I hart a bang
on my rear car. I was hit by
rear shattered.
rear shattered.
Driving bad to work shop I smed tire smed.
My rear to glass door is with sun
Solar film.
Declaration
We declare the foregoing particulars are true in every respect.  If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim
must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more letalls.
Tay
Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre Personnel On Col
13/3/21 M

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: <b>Vehicle Details</b>	231B
Vehicle No.:	SKQ2855S
Vehicle to be Exported:	Yes
Intended Deregistration Date:	13 Mar 2021
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA5 5-DOOR WAGON 2.0L SP.6EAT SUNROOF
Primary Colour:	Grey
Manufacturing Year:	2014
Engine No.:	PE30715731
Chassis No.:	JM6CW1071F0120431
Maximum Power Output:	111.0 kW (148 bhp)
Open Market Value:	\$18,609.00
Original Registration Date:	18 Nov 2014
First Registration Date:	18 Nov 2014
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$13,609.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Nov 2024
PARF Rebate Amount: Intended COE Rebate Details	\$8,845.00
COE Expiry Date:	17 Nov 2024
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$72,180.00
COE Rebate Amount:	\$26,546.00
Total Rebate Amount:	\$35,391.00

The information contained herein is correct as at 13 Mar 2021

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MPV

Available



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Elegant And Powerful Family Oriented MPV. Flexible Loan Available. Trade-in Welcome. Exporter Are Welcome. Contact Us To View Now.

Grande Auto Credit

Posted: 22-Mar-2021 Tags: 2014 Mazda 5, Mazda 5, Mazda, 5

Mazda 5 2.0A Sunroof \$45.800 \$10,550 /vr 29-Dec-2014 1.998 cc 78,000 km

1 Owner, Mint Condition. We Provide High And Flexible Loan At Low-Interest Rates! Accepts All Trade-In. Viewing By Appointment Only. Text Me Now For More Details.

Viking Motor Pte Ltd

Posted: 28-Mar-2021 Tags: 2014 Mazda 5, Mazda 5, Mazda, 5

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