

ASS. REC. BY:

REF:

CS/ASM21010101/Atc

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.

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: 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:

SM6444K Regn: 1998, Nov

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Mercedes Benz E200 c.c 1998

Colour:

Silver

A/C: Insured / Std / NI / NA

Sp. Reading

377289

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WDB2100352A 784493

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F: 235/40R18

R: 235/40R18

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

TOYO / YOKO or

Front

Rear

R/Bal.

06 mm

R/Bal. 06 mm

L/Bal.

06 mm

L/Bal. 06 mm

D.O.A.

D.O.I. 29/09/21

Survey held at

Y/SK

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

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

Date / Time

Action / Instruction

TP AXA

COE Expiry: 31/10/2023

MV: 16K (Depreciation @ 8K x 2 yr = 16K)
PV: 6.8K
Nett: 9.2K

LUMP SUM \$8500, 10DAYS
RED: 11034; 56%

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 10

Resurvey No. of Trip:

Survey Fee:

Transportation:

3 + RS, SI

Photos

Others

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech. Invs (\$)

☐

: Wheel end (\$)

Report Format:

Lump Sum / L.B.I. (\$)

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	28/09/2021 17:57 (SGT)
Date of Accident	28/09/2021 12:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CHOA CHU KANG NORTH 7
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG4444K
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	VERNIE WONG WAN SZE
NRIC No	SXXXX019E
Email Address:	CYK78JNM8817@GMAIL.COM
Mobile Phone No	(Phone) +65-91469149
Alternative Phone No	(Home) +65-91469149

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E200
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
Transmission	Auto
CC	1991

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	5119576103
Cover Note Number	-

DRIVER

Name of Driver	CHONG YONG KANG
NRIC No	SXXXX911B

Date Of Birth	25/03/1978
Occupation	Indoor
Date Of Driving Pass	18/10/1997
Driving experience	23 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91469149
Alt. Phone Number	-
Email Address	CYK78JNM8817@GMAIL.COM
Address	BLK 430 CCK AVE 4 #03-601
Address complement	-
Postcode	680430
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	SISTER-IN-LAW
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle 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 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	SHD3104Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person CHONG YONG KANG
 Gender Male
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? SMG4444K
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

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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:

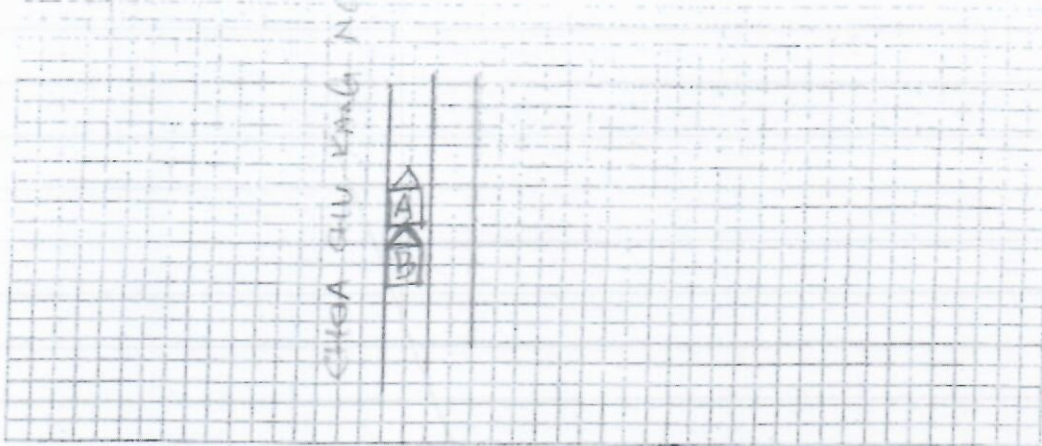
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SY09219S0009

[A] SMG4444K
[B] SHD3104Z

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING ALONG CHOA CHU KANG NORTH 7, SUDDENLY BEHIND VEHICLE NO. SHD3104Z HIT TO MY BACK.

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:

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

2019/11/20 14:00:00

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC
Owner ID: 019E

Vehicle Details

Vehicle No.: SMG4444K
Vehicle to be Exported: No
Intended Deregistration Date: 29 Sep 2021
Vehicle Make: MERCEDES BENZ
Vehicle Model: E200 AUTO
Primary Colour: Silver
Manufacturing Year: 1998
Engine No.: 11194222062938
Chassis No.: WDB2100352A784493
Maximum Power Output: -
Open Market Value: \$53,422.00
Original Registration Date: 18 Nov 1998
First Registration Date: 18 Nov 1998
Transfer Count: 2
Actual ARF Paid: \$74,791.00

Intended PARF Rebate Details

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

Intended COE Rebate Details

COE Expiry Date: 31 Oct 2023
COE Category: B - Car (1601cc & above)
COE Period(Years): 5
PQP Paid: \$16,140.00
COE Rebate Amount: \$6,742.00
Total Rebate Amount: \$6,742.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 29 Sep 2021

OK



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Mercedes-Benz E-Class E200K (COE till 10/2026)



Add to Shortlist

Mercedes-Benz E-Class E200K (COE till 05/2026)



Add to Shortlist

Mercedes-Benz E-Class E200K (COE till 02/2027)



Add to Shortlist

CAR DETAILS

Price	\$38,800	\$37,800	\$38,800	\$44,500
Instalment	N.A.	N.A.	N.A.	N.A.
Registration Date	06-Jun-1996	16-Oct-2006	23-Nov-2006	15-Feb-2007
Manufactured	1996	2006	2006	2006
Mileage	-	206,000 km	-	148,000 km
Transmission	Auto	Auto	Auto	Auto
Engine Cap	1,998 cc	1,796 cc	1,796 cc	1,796 cc
Road Tax	\$1,815 /yr	\$1,461 /yr	\$1,461 /yr	\$1,461 /yr
Power	-	135.0 kW (181 bhp)	135.0 kW (181 bhp)	135.0 kW (181 bhp)
Curb Weight	0 kg	1,540 kg	1,540 kg	1,540 kg
Features	Classic And Reliable 2.0L 16V 4 Cylinder Engine, Auto Transmission, Cruise Control.	Smooth And Responsive 1.8L Compressor Engine,SRS Airbags,ABS,Multi-Function Steering,Cruise Control,Rear Aircon,Electric Seats.Digital Climatic Aircon	Smooth And Responsive 1.8L Compressor Engine,SRS Airbags,ABS,Multi-Function Steering,Cruise Control,Rear Aircon,Electric Seats.Digital Climatic Aircon	Smooth And Responsive 1.8L Compressor Engine,SRS Airbags,ABS,Multi-Function Steering,Cruise Control,Rear Aircon,Electric Seats.Digital Climatic Aircon
Accessories	Sport Rims, Leather Seats.	Factory Fitted Audio System, Fog Lamps, Alloy Wheels, 18" Sports Rims, Side Mirror Indicators, Reverse Sensors, Multi Function Steering, Rear AC.	Luxury Leather Seats,Original Expensive 17" Sport Rims,High Grade Solar Films,Spacious Boot Space,Factory Fitted Audio System,Original Remote Keys.	Dual Electric Leather Rims, Android Player, Auto Fold Side Mirrors
Description	We Provide Door Steps Viewing, One Owner Only, New Paintwork, Well Maintained, See To Believe, Trade In/Loan Available, Call For Viewing And Test Drive Today.	Well-Maintained By Previous Owner. No Touch Up Required. Drive Till The End With No Worries. Viewing By Appointment Only.	Buy With Confidence,Warranty Provided,Low Mileage Done,Low Fuel Consumption,Mercedes Benz E200K Version,Low Yearly Depreciation,Well Kept By Previous Owner,No Repair Needed,Bank And In House Loan Available,\$0 Downpayment,Low Interest Rate,High Trade In Available Full Loan Available,Feel Free To Contact Us To Know More About The Vehicle And Loan Package.,Call Or Whatapp Now.Don't Miss.	Well Maintained Interior, Easy Financing.
COE	\$50,932	\$56,751	\$46,048	\$52,077
OMV	\$48,009	\$52,578	\$52,577	\$52,578
ARF	\$72,014	\$57,836	\$57,835	\$57,836
Depreciation	\$8,610 /yr	\$7,490 /yr	\$8,310 /yr	\$8,270 /yr

No. of Owners	1	4	3	4
Type of Vehicle	Luxury	Luxury	Luxury	Luxury
Category	COE Car	COE Car	COE Car	COE Car
Availability	Available	Available	Available	Available
Remarks	COE expiry date 2026-03-31	COE expiry date 2026-10-15	COE expiry date 2026-05-31	COE expiry date 2027-02-14
SELLER INFORMATION				
Seller	Avil Motors Pte Ltd	Alpine Financial Pte Ltd	JFR Auto Trading	New Way Leasing Pte
Address	60 Jalan Lam Huat #03-46	7 Ubi Close	25 Kaki Bukit Road 4 #03-33	1 Bukit Batok Crescent
Office Number	64756698	65113020	-	-
Contact Person	Eric Ang / C K	Edmund Wang	Owen	Roy / Chwee Huat / Tc
Contact Number	93848636 / 93869133	96939987	82680658	91823823 / 82622662

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