

ASS. REC. BY:

REF: CS/ASM21011793/Aty3

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Veh No: SLN8164S Yr Regn: 2017 May

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 3 c.c. 1496

at Workshop m/s \_\_\_\_\_

Colour: Silver A/C: Insured / Std / NI / NA

of \_\_\_\_\_

Sp.Reading: 69592 T/Radio: Insured / Std / NI / NA

Insured: \_\_\_\_\_

Eng/No: \_\_\_\_\_

Policy No. \_\_\_\_\_

C/No: JM6BN22A8H0146618

Claims No. \_\_\_\_\_

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

(Policy Condition)

/	
N/S	O/S

Remark: The veh had commenced its repair at the time of inspection.

Tyre Size: F: 235/45R17

R: 235/45R17

Bal. or Market Value: \_\_\_\_\_

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

IDAC Accident Rport: \_\_\_\_\_ Consistent?: Yes or No

TOYO / YOKO or Habilead

GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No

Front Rear

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

R/Bal. 06 mm R/Bal. 06 mm

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

L/Bal. 06 mm L/Bal. 06 mm

CA / REV / REP. / 24 HRS

D.O.A. \_\_\_\_\_ D.O.I. 22/11/21

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

\*Survey held at Automobile Hub

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
	<u>TP AXA</u>
<b>LUMP SUM \$12700, 8DAYS</b>	
	<u>MV: 52K</u>
	<u>PV: 38.8K</u> <b>RED: 9870.4;43%</b>
	<u>Nett: 132K</u>

Date/Time, File Pass to?  : Preli. Report  : Final Report

1) \_\_\_\_\_

Date/Time, File Return to? \_\_\_\_\_

2) \_\_\_\_\_

Report Format: \_\_\_\_\_

Days Of Repair: **8**

Resurvey No. of Trip: \_\_\_\_\_

Arld Fee:  : Site Insp (\$)  : Interview (\$)  : Tech. Inve (\$)  : Weekend (\*)

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

3 + RS \_\_\_\_\_ SI

Photos \_\_\_\_\_

Others \_\_\_\_\_

## 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	18/11/2021 12:44 (SGT)
Date of Accident	17/11/2021 12:40 (SGT)
Exact Location of Accident	Lentor Ave, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLN8164S

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YAP BAOHENG JUSTIN
NRIC No	SXXXX687Z
Email Address	AUTOHUB325@GMAIL.COM
Mobile Phone No	(Phone) +65-81284286
Alternative Phone No	(Home) +65-81284286

#### VEHICLE PARTICULARS

Manufacturer	Mazda
Model	3
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	0

#### INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	PNPV2020-00005464-01
Cover Note Number	-

#### DRIVER

Name of Driver	YAP BAOHENG JUSTIN
NRIC No	SXXXX687Z

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 ..... YAP BAOHENG JUSTIN  
Gender ..... -  
Phone No ..... -  
Address ..... -  
Address Complement ..... -  
Post Code ..... -  
Approximate Age Years Old ..... -  
Injuries Sustained ..... -  
Injured person in which vehicle? ..... SLN8164S  
Were seat belts worn? ..... Yes  
Was this injured conveyed to hospital by ambulance? ..... No



Date Of Birth ..... 14/06/1992  
 Occupation ..... Indoor  
 Date Of Driving Pass ..... 07/07/2014  
 Driving experience ..... 7 YEARS AND 4 MONTHS  
 Gender ..... Male  
 Mobile Number ..... (Phone) +65-81284286  
 Alt. Phone Number ..... (Home) +65-81284286  
 Email Address ..... AUTOHUB325@GMAIL.COM  
 Address ..... APT BLK 306 CANBERRA ROAD #11-77  
 Address complement ..... -  
 Postcode ..... 750306  
 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? ..... 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? ..... Yes  
 Reasons for not uploading a video of the accident ..... WITH OWNER  
 Was there any audio recorded? ..... No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number ..... SH9337C  
 Vehicle Manufacturer ..... -  
 Vehicle Model ..... -  
 Vehicle Variant ..... -  
 Vehicle Colour ..... -  
 Vehicle Category ..... Taxi  
 Name of Driver ..... -  
 Contact Number ..... (Phone) +65-97118432  
 Address ..... -

SKETCH PLAN

IMPORTANT NOTICE

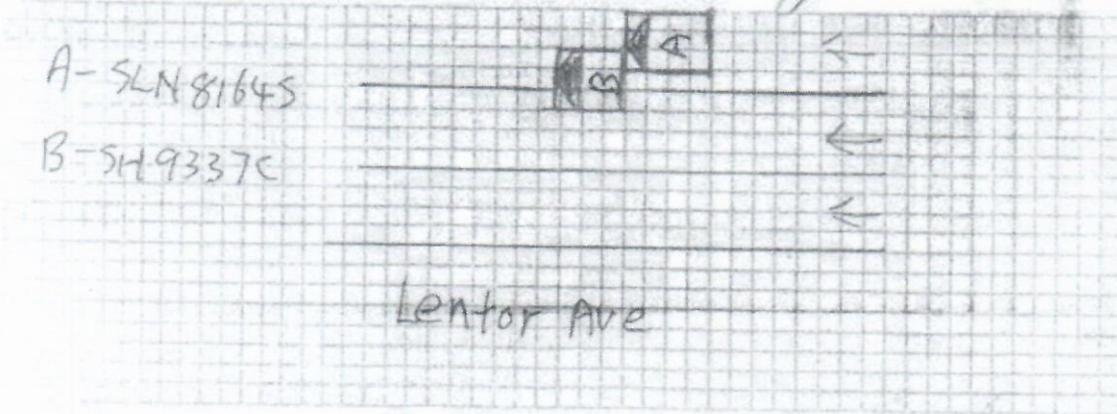
- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material 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 insured 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 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, the undersigned, 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 insurers(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/are 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

As I was traveling on Lehigh Ave going straight, the truck cut into my lane from the left.

Declaration

I declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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

Witnessed by Recording Center Personnel

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### Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	687Z
Vehicle Details	
Vehicle No.:	SLN8164S
Vehicle to be Exported:	No
Intended Deregistration Date:	22 Nov 2021
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Primary Colour:	Silver
Manufacturing Year:	2017
Engine No.:	P520434574
Chassis No.:	JM6BN22A8H0146618
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$19,359.00
Original Registration Date:	18 May 2017
First Registration Date:	18 May 2017
Transfer Count:	1
Actual ARF Paid:	\$14,359.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 May 2027
PARF Rebate Amount:	\$10,769.00
Intended COE Rebate Details	
COE Expiry Date:	17 May 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$51,106.00
COE Rebate Amount:	\$28,029.00
<b>Total Rebate Amount:</b>	<b>\$38,798.00</b>

The information contained herein is correct as at 22 Nov 2021

OK



**Mazda 3 1.5A Sunroof**

**\$55,800**

\$9,370 /yr

07-Apr-2017

1,496 cc

32,807 km

Sedan

**Available**

Rare Beauty Not To Be Missed, Best Condition Mazda 3 1.5A (Facelifted) With New Car Feel/Smell/Drive Intact, View With Satisfaction Guaranteed! Serviced At Reputable Workshop With Receipts. Unbelievable Low Mileage Done 32807km! Expat Owner. Road Tax Till Apr..

PREMIUM AD

Lake View Credit Pte Ltd

Posted: 18-Nov-2021 Tags: 2017 Mazda 3, Mazda 3, Mazda, 3



**Mazda 3 1.5A Sunroof**

**\$51,800**

\$8,710 /yr

19-Apr-2017

1,496 cc

57,000 km

Sedan

**Available**

100% Non Phv! Well Maintained, Good FC. Full Loan/High Loan Available. Trade In Welcome. Viewing By Appointment Only.

Posted: 25-Sep-2021 Tags: 2017 Mazda 3, Mazda 3, Mazda, 3



**Mazda 3 1.5A**

**\$57,800**

\$9,810 /yr

21-Apr-2017

1,496 cc

77,500 km

Sedan

**Available**

Well Maintained By Previous Owner, Good Condition, New Paintwork, Flexible Loan And Insurance Arrangement! Trade In Welcomed. Call Our Friendly Sales Today For More Info Or Viewing Before Is Gone! Hurry!

Posted: 15-Oct-2021 Tags: 2017 Mazda 3, Mazda 3, Mazda, 3



**Mazda 3 1.5A Sunroof**

**\$54,800**

\$9,020 /yr

05-Jun-2017

1,496 cc

Sedan

**Available**

No Repair Needed. Very Well Maintained Unit. Low Depreciation Unit. 1 Owner Only. View To Believe The Condition. High Loan And Trade In Available. Don't Hesitate, Contact Us For Viewing.

Posted: 02-Nov-2021 Tags: 2017 Mazda 3, Mazda 3, Mazda, 3



**Mazda 3 1.5A Sunroof**

**\$53,800**

\$8,770 /yr

14-Jun-2017

1,496 cc

72,000 km

Sedan

**Available**

100% Accident Free! 100% Non PHV Unit! Low Mileage! 1 Year Warranty, Meticulously Well Maintained In Excellent Pristine Like New Condition Assured! Very Fuel Efficient Yet Powerful! We Provide Comprehensive Loan To Suit Your Needs, Monthly \$600 Only! Loan Avail...

PREMIUM AD

Posted: 05-Nov-2021 Tags: 2017 Mazda 3, Mazda 3, Mazda, 3

Save this search criteria, to get email alerts whenever a match is found.

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