ASS, PEG. BY: CS	S/ASM22000940/Aqy3
	ASSIGNMENT
From: Date:	Veh No: SMW9476B, Yr Regn: 2020, Dec
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 6 c.c 1988
at Workshop m/s	Colour Bronze A/C: Insured/Std/NI/NA
of	Sp.Reading /9983 T/Radio: Insured / Std / NI / NA
insured:	Eng/No:
Policy No.	C/No: JM6641073L0404538,
Claims No. S2M03RYH	Gen. Cond. Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: morder Jammed / Leaked / Burnt or
(Client's Record)	Brake: (norder / Jammed / Leaked / Burnt or
Make of Veh:	Modí: Nil SIRim / STD A/Rim or
	Tyre Size: F: 225/55R17
(Policy Condition)	R: 225/53R17.
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:	<u>Front</u> <u>Rear</u>
DAC Accident Rport: Consistent? : Yes or No	R/Bal. ob mm R/Bal. ob mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. 06 mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. D.O.I. 26/01/22.
Lum Sum: % 3 Val.: Yes or No	Survey held at 2010 spray Tourthy.
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle Date: Person Contacted:	: IN/OUT Rees 0 S
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
	ndin Eslinge
	we are pending for estimate from repairer.
/03/22@4.20pm revised to Janice Koh	via Smart Claims.
mv : 1151C	
PV: 56K	
Nett: 59K	
LS \$2800, 3 days (Red \$258	35.50, 48%)
Date/Time, File Pass to? : Preli. Report	Days Of Repair:3
18/03 Typist : Final Report	Resurvey No. of Trip: 2 Survey Fee:

Feport Format: SMART CLAIMS - TP

Lump 2 mm / LEJ: 3 2800 Add Fee:

: Site Insp (\$

Western (2

Transportation: _3 + RS.__SI

Interview (\$ Fholos Tech. Invs (\$

Others



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.

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 witholding 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 25/01/2022 17:20 (SGT) Date of Accident 21/01/2022 13:51 (SGT) **Exact Location of Accident** AYE, Singapore Additional Location Information AYE TOWARDS MCE(5.6KM) BETWEEN ALEXANDRA AND **DELTA ROAD EXIT** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW9476B

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SZE TO DING CHANG(SITU DING CHANG)SCOTT NRIC No S8426061D **Email Address** scottszetodc@gmail.com Mobile Phone No (Phone) +65-96477316 Alternative Phone No +65-96477316

VEHICLE PARTICULARS

Manufacturer Mazda Model 6 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number GA600623 Cover Note Number

DRIVER

CC

Name of Driver SZE TO DING CHANG(SITU DING CHANG)SCOTT

2000

NRIC No S8426061D Date Of Birth 19/08/1984 Occupation Indoor Date Of Driving Pass 08/12/2004 Driving experience 17 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-96477316 Alt. Phone Number +65-96477316 **Email Address** scottszetodc@gmail.com Address 194B BUKIT BATOK WEST AVE 9 #18-227 Address complement Postcode 652194 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? Yes Was any injured conveyed to hospital by ambulance? Yes Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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? Yes Traffic Police Police Station Name (Phone) +65-65470000 Police Station Phone No. Alt. Police Station Phone No. (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO ATTACHED 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** FBM1397G Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant

Vehicle Colour

Vehicle Category Name of Driver NRIC No Contact Number	Motorcycle MOHAMMAD ZUHAILI BIN AMIN S9940279B
Address	(Phone) +65-93376094
Address complement	
Postcode Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MOHAMMAD ZUHAILI BIN AMIN
Gender	Male
Phone No	
Address	A CONTRACTOR OF PERSONS IN PROPERTY OF THE PARTY OF THE P
Address Complement	
Post Code	And the second of the second o
Approximate Age Years Old	· The latest and the state of t
Injuries Sustained	2 BROKEN FINGERS(4TH AND 5THFINGERS)ON LEFT HAND.
Injured person in which vehicle?	FBM1397G
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please raport correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Pollsykolder and for the Authorized Driver.
- Information provided must be as truthful and accurate as possible. Any without misrapresentation or withholding of material facts may allow insurance companies to regulate policy liability.
- 4. The issue and acceptence of this form by insurance companies is not an admission of policy imbility on the part of the insurance companies.
- 5. Any laise reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurance 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 leable made mailsble upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this repost at the centre and to copies of
 the report being made available aforesaid.
- 8. Concent under the Personal Data Protection Act (PDPA)

i understand, acknowledge, seree 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 procure my general data/personal information set out in this (form) and any other personal information provided by me or passessed by my insurer (collectively the "Personal Information") and disclose and teasifer 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 Monatary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - 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 angulater by me;
 - (b) administering my claims (including the mailing of correspondence, statements, involves, 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 anyelopes/mail packages); and/or
 - (v) complying with applicable faw in administrator, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (h) 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 egents(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 fraid detection, investigation and management in present and all future claims.
- (c) 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, faw 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 Dale & Time.

22 JAW 2002

0880-

Oriver's Signature (If driver is not the policyholder)

Date & Time:

22 JAN 2022

0840

Reporting Centre Passound's Signature

NRIC/FIN No.1

https://decisolation.prod.fire.glosa/7guidobat06241-8909-4517-9143-615c757dd0be

1/30/2020	Protected By Symetho
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	Did not seip in Also had to broke practice hard
	THE HELL AND THE TENT
	5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1
	allided into out of res
	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
	I was travelling along AXK towards MCC, keeping many car lengths
	between myself & car shood, SNC 7563P.
	Car ahead started to brake and so did 1.
	As I came closer, car should broked very hard and so did 1.
	moveragate behind me, FBM 13976 was not able to stop in time and collided into the right near of the car.
1	Rider broke two fingers.
	DECLARATION Are declare the foragoing particulars are true in every respect.
	C ROWN
O	olicyholder's Signaturo Griver's Signaturu Raporting Centes Pepsonnel's Signaturu ete & Time: (if fewer's not the policyholdur) Name:
	Z JYNN 2022 Date & Time: NREC/FIR No.;
2	2 JAN 2022 Date & Time: NRIC/FIN NO.: 0 \$40

https://documented.ira.glaza/?guidebat06241-8909-4817-01d3-6486757qsuon

2/2

> Back to OneMotoring

Enquire PARF/CO	Rebate for	Registered Vehicle
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Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	061D
Vehicle Details	
Vehicle No.:	SMW9476B
Vehicle to be Exported:	No
Intended Derr gistration Date:	27 Jan 2022
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA6 SEDAN 2.0 AT STANDARD 14
Primary Colour:	Grey
Manufacturing Year:	2019
Engine No.:	PE21344629
Chassis No.:	JM6GL1073L0404538
Maximum Power Output:	121.0 kW (162 bhp)
Open Market Value:	\$20,946.00
Original Registration Date:	18 Dec 2020
First Registration Date:	18 Dec 2020
Transfer Count:	1
Actual ARF Paid:	\$21,325.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Dec 2030
PARF Rebate Amount:	\$15,993.00
Intended COE Rebate Details	
COE Expiry Date:	17 Dec 2030
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$45,510.00
COE Rebate Amount:	\$40,003.00
Total Rebate Amount:	\$55,996.00
The information contained herein is correct as at 27 Jan 2022	

The information contained herein is correct as at 27 Jan 2022

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mazda 6

Advertiser Login

08-Oct-2020

1.998 cc

13.706 km

Sort by Date Posted

Advanced Search

Luxury Available

Available

Mazda 6 2.0A

\$114,800

\$11,970 /yr

Under Warranty. Very Low Mileage (13XXX Km Only). Well Taken Care By First And Only Meticulous Owner. Immaculate Condition.

DIRECT OWNER

Posted: 20-Jan-2022 Tags: 2020 Mazda 6, Mazda 6, Mazda, 6

Mazda 6 2.0A

\$117,700

\$11,870 /vr

Spacious Cabin And Boot Space. Deep Crystal Blue Mica Colour. Japanese Car With Continental Style Interior. Car Battery Has Been Repl

29-Jan-2021

1,998 cc

7,953 km

Luxury Available

Interest Rate From 1.88%! 100% Accident-Free! Fully Maintained By Agent With Warranty Till Jan 2024! Reluctant Sale! 1 Owner! Immediate Ownership Transfer! Easy And Flexible Loan Available! Welcome To View At Our Leng Kee Showroom. Call Or WhatsApp For

The Car Shop

Posted: 25-Jan-2022 Tags: 2021 Mazda 6, Mazda 6, Mazda, 6



Mazda 6 2.0A

\$117,800

\$11,650 /yr

27-Apr-2021

1.998 cc

9,000 km

Luxury

Available

Pristine Condition! Low Mileage Clock! 3 Years Warranty & Servicing By Agent! Candy Red! Fussy Owner Car In Tip Top Condition! Buy With Piece Of Mind! 100% Loan Available From 1.88% P.A! 1 To 1 Exchange Without Cash Top Up! Hurry And Call Our Friendly Sales Ad.

Platinum Motoring

Posted: 22-Jan-2022 Tags: 2021 Mazda 6, Mazda 6, Mazda, 6

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