

ASS. REC. BY:

REF:

## 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

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SNC3985G Yr Regn: 2017, MarchType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mercedes Benz 180 Cabriolet c.c.Colour: White A/C: Insured / Std / NI / NASp. Reading: 84810 T/Radio: Insured / Std / NI / NA

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

C/No: WDD20S4402F\*46S953Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 225/40R18R: 225/40R18

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

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. \_\_\_\_\_ D.O.I. 14/10/22Survey held at T.K.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 AXAMV: 140KPV: 63.9KNett: 76.1K

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

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

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

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

Add Fee: ☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Insp (\$

Photos

Other: \_\_\_\_\_

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

FORM 100 (1/1/10)



## 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 Actual 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	04/10/2022 08:13 (SGT)
Reported by	Both
Date of Accident	02/10/2022 19:15 (SGT)
Exact Location of Accident	Near 239 Selegie Rd, Singapore 188349
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNC3985G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KARTHIKESHAVAN S/O GOVINDAN
NRIC No	S7621261I
Email Address	NICE1KARTHIK@GMAIL.COM
Mobile Phone No	(Phone) +65-98336626
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	C180
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	1595

### INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	-

### DRIVER

Name of Driver	KARTHIKESHAVAN S/O GOVINDAN
NRIC No	S7621261I
Date Of Birth	21/07/1976
Occupation	Indoor



Date Of Driving Pass	25/10/2018
Driving experience	4 YEARS
Gender	Male
Mobile Number	(Phone) +65-98336626
Alt. Phone Number	-
Email Address	NICE1KARTHIK@GMAIL.COM
Address	8 KENG CHIN ROAD, #12-15
Address complement	-
Postcode	258710
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 - Cross Junction
Weather Conditions	Raining
Road Surface	Wet

#### 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 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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

#### 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

#### PLEASE REFER TO ACCIDENT REPORT

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC564D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-



11-10-22;12:24 ;Kuru & Co.

TK

;6532 2007

# 3/ 5

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

-  
-  
-  
-  
-  
-



## IMPORTANT NOTICE

## SKETCH PLAN

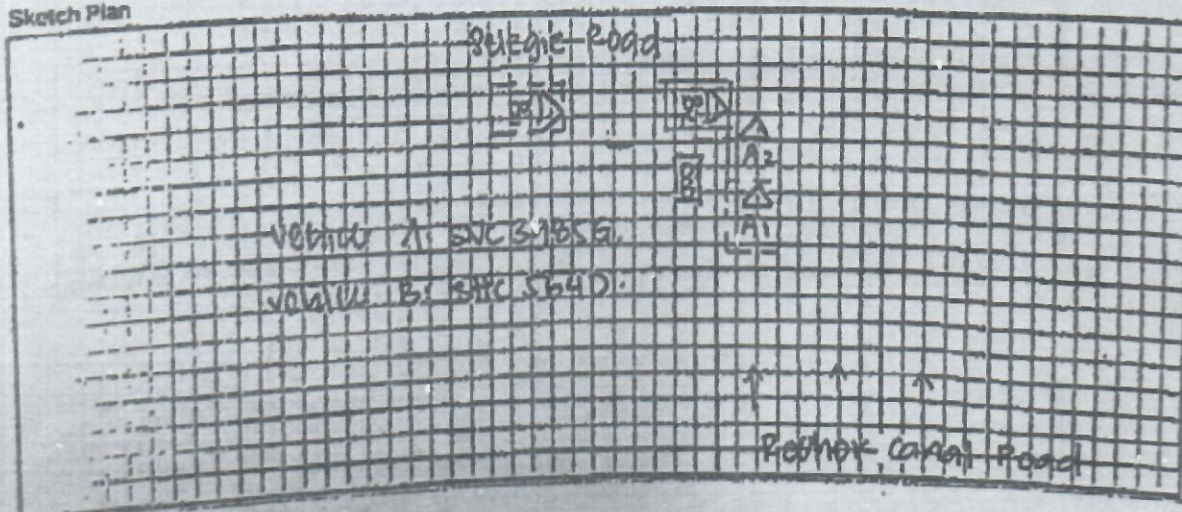
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to invalidate 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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 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), to: 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/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  
(Name as in NRIC/ID card)

Sketch Plan





Describe Circumstance of the Accident

On the stated date & time, I, vehicle 'A',  
SNC 39054, was travelling straight along the stated  
venue as it was green light in my favour.

Whilst approaching the middle of the junction,  
and applied brakes  
I heard screeching sound and felt an impact


on my vehicle's front portion. When I awoke,


I then understood from the taxi driver that  
skidded and  
he had accidentally collided onto my vehicle.

Declaration

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  
(Name as in NRIC card)



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

Owner ID Type: Singapore NRIC  
Owner ID: 261I

**Vehicle Details**

Vehicle No.: SNC3985G  
Vehicle to be Exported: No  
Intended Deregistration Date: 15 Oct 2022  
Vehicle Make: MERCEDES BENZ  
Vehicle Model: C180 CAB (R17 LED)  
Primary Colour: White  
Manufacturing Year: 2016  
Engine No.: 27491030755049  
Chassis No.: WDD2054402F465953  
Maximum Power Output: 115.0 kW (154 bhp)  
Open Market Value: \$47,031.00  
Original Registration Date: 09 Mar 2017  
First Registration Date: 09 Mar 2017  
Transfer Count: 1  
Actual ARF Paid: \$57,844.00

**Intended PARF Rebate Details**

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 08 Mar 2027  
PARF Rebate Amount: \$40,490.00

**Intended COE Rebate Details**

COE Expiry Date: 08 Mar 2027  
COE Category: B - Car above 1600cc or 97kW (130bhp)  
COE Period(Years): 10  
QP Paid: \$53,106.00  
COE Rebate Amount: \$23,332.00  
**Total Rebate Amount: \$63,822.00**

The information contained herein is correct as at 15 Oct 2022

OK

**IMPORTANT NOTICE****SKETCH PLAN**



## Post an Advertisement

Sell it yourself! Advertise it at just

**\$68 until it's SOLD!**

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Ways of Selling

Estimate 2.4A, 100% Loan by GV CARS FINANCING

Secured Loan by In house finance, Warranty packages and services available.  
GV Automobile Centre

Think One Automobile

NEW & USED  
COMMERCIAL VEHICLESSort by  20 results/page

3 vehicles



c180 cab

Any Category

Advanced Search



Search

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	c180 cab	Any	Any	2017	Any	Any	Any	Available

**Mercedes-Benz C-Class C180 Cabriolet****\$145,800**

\$26,630 /yr

06-Mar-2017

1,595 cc

31,500 km

Sports

Available

New arrival! Only 1 lady and careful owner. Super low mileage done. Fully maintained by Cycle &amp; Carriage from day 1. Excellent and tip top condition. Come with 3 digit number plate. Buying with peace of mind. Rarely available in the market. Don't miss this golden opportunity...

PREMIUM AD

Posted: 27-Aug-2022

**Mercedes-Benz C-Class C180 Cabriolet****\$144,800**

\$24,070 /yr

27-Jul-2017

1,595 cc

54,000 km

Sports

Available

In immaculate condition, fully serviced by cycle &amp; carriage. Cabriolet model, sports car. Fuel efficient and responsive engine. Definite eye turner on the road. Newly renewed six months road tax. Viewing via appointment basis only.

DIRECT OWNER

Posted: 27-Sep-2022

**Mercedes-Benz C-Class C180 Cabriolet AMG****\$158,800**

\$25,750 /yr

25-Sep-2017

1,595 cc

49,303 km

Sports

Available

AMG Model Cabriolet! Only 1 Lady And Careful Owner. Super Low Mileage! Fully Maintained By Cycle &amp; Carriage. Excellent And Tip Top Condition. Buying With Peace Of Mind. Rarely Available In The Market. Don't Miss This Golden Opportunity To Get This Dream Car For Yo...

PREMIUM AD

Posted: 08-Oct-2022

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

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

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