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WORKSHOP
160 Sin Ming Drive
#07-02 Sin Ming AutoCity
Singapore 575722

S&H Motor Pte Ltd
Co. Reg. No.: 198701322K
GST Reg. No.: M2-0076269-0

*Not withered
t/By @
Pickup After Pass
4-5 days*

M/s India International Insurance Pte Ltd
64 Cecil Street
#04/05 IOB Building
Singapore 049711

File No : SH/2024/0198
Date : 29/11/2024

Estimated cost of repair for vehicle no: **GX5858A** **BYD ET3**
Accident involving vehicle no: **GX5858A** & **GBK9476U** On **15/11/2024**

Description	Quantity	Cost Price
Rear bumper	1	\$ 1,170.00 ✓
Rear bumper outer side retainer @\$45.50	2	\$ 91.00 X
Rear bumper inner side retainer @\$51.00	2	\$ 102.00 X
Rear bumper 3rd brake lamp	1	\$ 380.00 ✓
Rear bumper reverse sensor @\$195.00	2	\$ 390.00 ✓
Tail gate	1	\$ 4,200.00 ✓
Tailgate lock	1	\$ 199.00 X
Tail gate weather strip	1	\$ 244.00 X
Tail gate outer chrome garnish	1	\$ 420.00 ✓
Tail gate "BYD Logo" emblem	1	\$ 110.50 X
Tail gate "T3" emblem	1	\$ 40.00 ✓
Tail gate inner trim board	1	\$ 425.80 X
Rear end panel	1	\$ 550.00 ✓
Car plate lamp @\$72.00	2	\$ 144.00 X
		\$ 8,466.30
		\$ 846.63
		\$ 9,312.93

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Margin 10%

Acknowledged by Repairer
Signature:
Date:

Special Nett

- Rear inner trim board clip
- Rear camera
- Rear end panel sealant

Labour

- To dismantle, replace, cut, weld, knock out dents to straighten accident damaged parts.
- Transfer of existing tailgate mechanism to new tailgate
- Remove & refix tailgate windscreen glass
- Remove & refix/replace rear bumper reverse sensor & conduct distance safety setting
- Remove & refix/replace rear reverse camera & conduct distance safety setting
- Wiring /bulb checking/focusing
- To putty & spray paint accident damaged parts and adjacent panels

\$	30.00 ✓
\$	400.00 X
\$	40.00 ✓
\$	600.00 ✓
\$	90.00 601
\$	120.00 1201
\$	90.00 801
\$	70.00 401
\$	40.00 201
\$	700.00 4001
\$	11,492.93

753
IA

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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 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 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 First Submission 18/11/2024 14:52 (SGT)
Reported by Actual Driver
Date of Accident 15/11/2024 17:05 (SGT)
Exact Location of Accident Seletar Expw., Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GX5858A

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SIANG HOCK CAR RENTAL PTE. LTD.
Company Reg No 201538271R
Email Address car.rental@sianghock.com.sg
Mobile Phone No (Phone) +65-98792002
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Byd
Model ET3
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Auto
CC 0
Vehicle Fuel -
First Registration Date -
Chassis no -
Effective Date/Time of Ownership -

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd
Policy Number / Cover Note Number D-24102362MFCV/326

DRIVER

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 Authorized 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 insurance 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 submission 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 insurance/law firms) which may be based outside of Singapore, for use in more of the above Purposes.



[Handwritten Signature]

[Handwritten Signature]
18/11/2024

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

