

CENTURY MOTORS PRIVATE LIMITED
INCHCAPE CENTRE
SINGAPORE 128462

Insurer Reference: CM217
Repairer Reference: 071276
Date calculated: 01/07/2024 5:33 PM

Full Report
Registration: SMM5278K
Printed: 01/07/2024 5:34 PM

Summary Information

Claim

Location:	Singapore (SG)	Work Provider:	China Taiping Insurance (Singapore) Pte Ltd
Printed by:	Lee Swee Hian	Currency:	SGD
Claim Reference:	CM217	Date of Incident:	27/10/23
Estimated Repair Time:		Hire Car Start:	
Actual Repair Days:		Hire Car End:	

Vehicle Details

Vehicle

Manufacturer:	HONDA
Model:	STREAM
Sub Model:	LS
Model Sheet Number:	35 36 01
Registration:	SMM5278K
VIN number:	GP72010632
Odometer:	
Model Specs	
TWO COAT METALLIC	PREPARE OFF VEHICLE

Labour

		Time Base 10 WU/h	Price = 42.00 SGD/h	
Code	Description		WU	Price SGD
60211-S7A	R + R R/F WING INCLUDES: R + R FRONT BUMPER, HEADLAMP AND WHEELHOUSE COVER		10.0	42.00
	Labour Cost			
	Panel / Mechanical Labour	Hrs 1.00	WU 10.0	42.00
	Total of Labour			42.00

Paint

Paint Work		SYSTEM AZT	Time Basis 10 WU/h	
Code	Description - TWO COAT METALLIC		WU	Price SGD
	R/F WING NEW PART PAINTING		10.0	
	R/F UPP BUMPER TRIM NEW PART PAINT K1R		3.0	

Paint Material Per Part

Code	Description	Price SGD
0742	R/F WING NEW PART PAINTING	20.64

Paint Material Per Part

Code	Description	Price SGD
0352	R/F UPP BUMPER TRIM NEW PART PAINT K1R	0.98

Labour Cost - Paint

	Hrs	WU	Price SGD
Factor	42.00 SGD/h		
Time Paint		13.0	
Preparation Main Work Metal	2.50	25.0	105.00
Preparation Comp. Work Plastic	0.50	5.0	21.00
Total	10 WU/h	43.0	180.60

Material Cost - Paint

	Price SGD
New Part Painting	20.64
New Part Painting - Plastic K1R	0.98
Material-constant Metal Preparation	28.60
Material-constant Plastic	9.00
Decreased by 90%	-53.30
Total	5.92

Spare Parts

Code	Description	Part Number	Part Source	prices as at 2015-06-01/01 Price SGD
0283	FRONT BUMPER	71101S7AG00ZE	Original / DEF	700.00
0343	FRT BUMPER SUPPORT	71110S7AE00	Original X	100.00
0317	L/F OUT BUMPER BRKT	71198S7A000	Original x	20.00
0319	L/F UPP BUMPER BRKT	71190S7A000	Original x	40.00
0562	R/F HEADLAMP CPL	33101S7AE01	Original x	550.00
0318	R/F OUT BUMPER BRKT	71193S7A000	Original x	20.00
0320	R/F UPP BUMPER BRKT	71140S7A000	Original x	40.00
0352	R/F UPP BUMPER TRIM	71102S7A000	Original x	90.00
0742	R/F WING	60211S7A000ZZ	Original x f	200.00
f: OEM Parts	Savings			0.00
n: Non-OEM Parts	Subtotal			1,760.00
u: Used parts	Total			1,760.00

Steve (LKK) storechen@lkkauto.com

5/7/24, 3.30pm

L/S

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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

Acknowledged by Repairer

Signature:

Date:

ATE 01/07/2024

Audatex System Using Manufacturer Times

Final Calculation

	SGD	SGD
Parts		
Total Parts	1,760.00	1,760.00
Labour Time Base 10 WU/h		
Total 10.0 WU X 42.00 SGD/h	42.00	
Total of Labour		42.00
Paint Work Time Base 10 WU/h		
Labour Cost 43.0 WU X 42.00 SGD/h	180.60	
Material Cost	5.92	
Total Paint Including Material		186.52
Repair Cost Excludes GST		1,988.52
GST (+9.00%)		178.97
Repair Cost Included GST		2,167.49

Comments

* - USER SUPPLIED DATA
NN - NO MANUFACTURERS CODE EXISTS
) - WU PARTIAL INCL IN OTHER POSITIONS

Assessment Note

No assessment notes entered.

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 First Submission	31/10/2023 16:33 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/10/2023 07:30 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	ALONG TPE TOWARDS CHANGI (BEFORE THE EXIT 5 OF TAMPINES AVE 10)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM5278K
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YAW CHEE KONG CHRISTOPHER
NRIC No	SXXXX831I
Email Address	YAOZG@HOTMAIL.COM
Mobile Phone No	(Phone) +65-83836751
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Shuttle
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/00939972/02

DRIVER

Name of Driver	YAW CHEE KONG CHRISTOPHER
NRIC No	SXXXX831I
Date Of Birth	13/06/1973

Occupation	Indoor
Driving Pass Date	22/04/1996
Driving experience	27 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83836751
Alt. Phone Number	-
Email Address	YAOZG@HOTMAIL.COM
Address	APT BLK 339 HOUGANG AVENUE 7 #04-425
Address complement	-
Postcode	530339
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
Number of vehicles involved in the accident	4
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)	3
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	JWH372
Vehicle Category	Private car

PASSENGER 1

Name	NA
Gender	Male

PASSENGER 2

Name	NA
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
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

REFER TO POLICE 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 JWH372
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Motorcycle
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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBE5443Y
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Commercial vehicle
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) -

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SMT4175T
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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

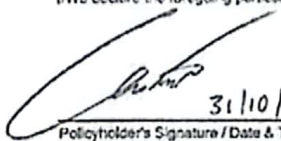
Name of injured person	-
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	JWH372
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

Describe Circumstance of the Accident

Refer to police report T/20031627/17012


Declaration

I/We declare the foregoing particulars are true in every respect.

 31/10/2023

Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

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 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 reassess 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 a 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.


31/10/2023
Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

		A: SMM 5-78K B: JUA 372 C: GBE 5443Y D: SMF 4173T
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