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SQMPTE LTD

Date:

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To do spray painting on accidemnt area

29 Jul 2024

NOT Noth distributation - THIRD PARTY CLAIM

LONPAC INSURANCE BHD

Merry Stre Pares

CLAIM:

THIRD PARTY CLAIM

VEH. No:

12,149.80

11,089.82

600.00

2201

\$

SMF 4921 E 2-3 days INSURE: MOTOR CLAIM DEPARTMENT ATTN: **INCOME INSURANCE** QTY **ITEM AMOUNT** CONDITION Third party vehicle: **GBF 2274 H** nd In 580.00 1 **BONNET** 1 FRONT BUMPER TOP GARNISH nd 820.50 \$ 1 FRONT CENTER GRILLE \$ CM 1,057.80 1 FRONT GRILLE SIDE CHROMES \$ 5,987.00 1 **HEADLAMPS** A 280.00 1 HEADLAMP LOWER BRACKTES \$ \$ Ma 120.00 1 FRONT CENTER LOGO \$ 980.50 1 FRONT BUMPER \$ 558.00 FRONT BUMPER CENTER INNER SUPPORT 1 A 620.00 2 FRONT BUMPER REINFORCEMENT 398.00 1 FRONT BUMPER SPONGE 288.00 1 FRONT BUMPER CENTER BRACKET Pm 240.00 2 FRONT BUMPER SIDE BRACKETS £ 220.00 1 FRONT BUMPER RETAINERS

1,214.98 **LESS 10%** 10,934.82 \$ **TOTAL LIST PARTS:** SPECIAL NETT Nd 60.00 4512 \$ FRONT NO.PLATE WITH FRAME Ma 50.00 \$ FRONT BUMPER RIVETS Mr. 45.00 FRONT BUMPER CLIPS 155.00 TOTAL S/N

TOTAL PARTS:

LKK Auto Consultants hence notify 22,024.64 the Repairer of the following: \$ AMOUNT BRING FORWARD: to resurvey before/after spray painting To display damaged part(s) during esurvey 800.00 Parts prices are subject to confirmation Labour charges Third party survey is on a "Without Prejudice" basis · No illegal modification(s) is allowed 120.00 To do anti rust · Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company Forcus headlamp, check front wiring system Acknowledged by Repairer 120.00 \$ Signature:

Date:

TOTAL PARTS PRICE:

\$ 1,640.00 **TOTAL LABOUR:**

\$

Ś **GRAND TOTAL PARTS & LABOUR:** 23,664.64



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

 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

3. Information provided must be as truthrul and accurate as possible. For 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

Reported by

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

18/07/2024 14:33 (SGT)

Both Policyholder and Actual Driver

18/07/2024 09:48 (SGT)

Singapore

WOODLANDS AVE 1

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMF4921E

INSURED/POLICYHOLDER

is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No Alternative Phone No

No

JEYABAL GOBINATH

S7883809D

ANDY.LEE@PAS.SG

(Phone) +65-90067294

VEHICLE PARTICULARS

Manufacturer

Model

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?

Vehicle Category

Transmission CC

Mazda

3

Private use

No - Reporting only

Private car

Auto

1500

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Income Insurance Limited

5119726541-03

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

JEYABAL GOBINATH S7883809D

31/07/1978

Indoor



Accident report SF0F247I0003

Page 1 of 12

- Information provided must be see fighful and accounts on not only with the responsibilities or communitying of an formation provided and accounts on the second order of the formation provided and the second order of the formation of the formation of the second order of the formation of the form
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- By the lackgondent of this report to the insurers, you hereby concent to the archiverg of the report of the centre and to copies of the
- 8. Consecut mater the Personal Data Protection Act (FDPA)

Lunderstand, inclinawindge, agrees and consent that,

- (a) My insurer, my workshed and the General Insurance Association of Singapore ('GIA') mayima permitted to collect, use, ricclose and/or process my pursonal data/personal information set out in this (form) and any other personal information provided by my or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(a) who have incured vehicle(s) involved in this accident (all insureds) who have insured vehicle(s) involved in this accident shall be cellectively referred to as the "insurers"), the Insurers' lawyers family, the Monetary Authority of Singupore and any relevant government equacytouthorsy (such as the police), for the purpose(s) of:
- (i) processing, hand, no and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to
- (ii) investigating the accelent and/or my claims,
- (a) carrying out antifer desing with my instructions or responding to any caquisias by me,
- (w) administering my stains (including the mailing of correspondence, statements, invokes, 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 pockegos); andler
- (v) complying with applicable low in administering, crocossing, bacelling and/or decling with my claims,
- (collectively the "Purposes")
- (b) all insurer(s) who have insered vehicle(s) involved in this accident and the insurers' lawyershaw fines, maybre permitted to collect. use, desclore and/or process my Personal Information for one or more of the above Purposen; and
- (a) my Personal Information mayican be disclosed by any of the leavers and/or GIA to their third-party service providers or agents producting Paris Parayers (aw thins), which may be sited outside of Singapore, for one or more of the above Purposes.

Stoldar's Signature / Date & Time

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

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

Extrance

A-SMF 4921E B-GBF 2274H (Reversing)