



Tel: 6264 1191 Fax: 6261 1324 E-mail: banchoon@singnet.com.sg Business Reg./GSTReg. No. 351915/00A

GST Regn No. 35191500A

24/12/15

Minstry of Defence 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 409833

Attn: Motor Claims Dept.

Dear Sirs

QUOTATION FOR REPAIRS OF VEHICLE NO. GBC 4376 A

MODEL: NISSAN NV200

DATE OF ACCIDENT: 18/12/2015

YOUR INSURED VEHICLE NO. MID46313

1 pc	LH rear door			\$	1,404.90	Bue-
1 pc	LH rear door innertrim				193.30	
1 pc	Rear bumper				506.90	DE-
1 pc	Rear bumper sponge				88.90	7
2 pcs	Rear bumper side retainers @ \$35.20 each	nu	2/		70.40	ME (LH Sicle)
				\$	2,264.40	
	Less: 30% discount				679.32	
	34			\$	1,585.08	
2 pcs	LH rear door hinges @ \$99.60 N each	\$	199.20	NX		
1 pc	LH rear door upper lock		90.50	N Jan-		
1 pc	LH rear door lower lock			N Jam		
1 pc	LH rear door lock catch		31.80	N BE-		
1 pc	NISSAN logo		52.50	N rec		
1 pc	NV200 LOGO		52.50	NIE		
1 pc	LH rear door inner rubber		82.60	Nnec		
1 pc	LH rear door center rubber		53.70			
1 pc	LH rear bumper reflector		47.90	NMIS -		
1 pc	Rear end panel - outer		142.80	NBT		
1 pc	Rear end panel - inner		485.40	NB+		
1 pc	Rear end panel top garnish		70.20	N 7		
1 pc	LH taillamp		257.30	NSCR-		
		\$	1,682.50			
	Less: 10% discount		168.25		1,514.25	N
1 pc				<b>1</b> 4		
1 pc	Rear number plate				35.00	SNE
1 pc	Rear windscreen inner seal				30.00	SNARC
1 roll	Rear windscreen gum				50.00	SNACE -
1 pc	Front number plate				35.00	SN XAA
1 pc	70 KMH sticker					SNAC
1 pc	Reverse sensor				280.00	SN 2201W
FELLER MONEY	Balance c/f			\$	3,549.33	

Balance b/f

\$ 3.549.33

## LABOUR CHARGES:

To dismantle and reassemble of rear windscreen.

To knocking and straightening of all necessary damaged parts. To changing of the above parts.

To putty and spray painting on accident damaged parts

120.00 180

900.00700 900.00 700

5,469.33

Yours faithfully,

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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:

RASUL 140 90010068 6 days 29/12/15 @ 1140 email: rasul@1kkauto.18m Remo after repri

## SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

EMail Address

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. 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 ability
- 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.
- This report will be forwarded by the insurers of 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.
- 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 Report	18/12/2015 16:17
Date Of Accident	18/12/2015 10:25
Exact Location Of Accident	ALONG LOYANG AVE AFTER PASIR RIS DR 1
Country/State of Loss	Singapore
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBC4376A
Insured/Policyholder	THE STATE OF THE PARTY OF THE P
Name Of Registered Owner	KEE MARINE PTE LTD
Co Reg No	200801328Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-84451517
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200-1.5 D ABS AIRBAG 2WD 6DR (M)
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
If No, Please state action to be taken	Third Party
Vehicle Category	Commercial Vehicle
Insurance Company	
Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5057919306-02
Cover Note Number	16/01/2015-15/01/2016
Driver	
Name of Driver	TEO BOON JIA
NRIC No	S2559690J
Date Of Birth	05/09/1959
Occupation	Outdoor
Date Of Driving Pass	22/11/1978
Driving Experience	37 Years And 0 Months
Gender	Male
Mobile Number Fax Number	84451517
Contact Number	

NOEMAIL

Address

Postcode

Was driver an employee of the Insured's Company Yes

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

Collision- Head to Rear (TP Hit Insured)

Weather Conditions

Raining

Road Surface

Wet

Other Information

Was any foreign vehicle involved in this accident?

No

Was any body injured in the Accident?

No

Was any other material or property damaged?

Yes

Was there any video captured by Car Camera?

No

Number of Passengers (Including Driver)

2

Details of Police Action

Was the accident reported to the police?

Yes

If Yes, Please state which Police Station

Police Station Name

Ayer Rajah Neighbourhood Police Post

Police Station Address

ROAD: Blk 43 Teban Gardens Road , POSTCODE: 600043 , COUNTRY:

Singapore

Police Station Contact

TEL NO: 1800-5659999 - FAX NO: 66655790

Was notice of intended Prosecution given?

No

If Yes, against whom?

Circumstances of Accident

AS PER SKETCH PLAN

Are accident photos available for attachment?

Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

MID46313

Vehicle Make/Model/Colour

NRIC/Passport Number

Details Of Properties

Name of Driver

TANG GUO HAO

\$95201221

Contact Number

96837831

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

9in	18/17/16 at around 10/32 am 1/2 us
ATTEN.	allon along Lexand Avenue When
W.	TUNCTION OF PASIT PASIT PAS DY 1, ON LONG
	front vehicle stopped and I followed an
CAMICA	slop soudenly vehicle B my my
4644	. Nobody was injurised.
10404141	
-	
	The state of the s
DESCRIPTION OF THE PERSON	

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

Policyholder's Signature / Date & Time

Criver's Signature (F driver is not the policyholder) / Date 8 Time

Withessed by Reporting Centre Personnel