

EUROKARS HABITAT PTE LTD NO:12 SUNGEI KADUT, SINGAPORE 729648 ESTIMATE COST OF REPAIRS



\$

2,520.00

14984

WIP:

LONPAC INSURANCE BHD NAME : MS TAN SZE LING

100 BEACH ROAD ADDRESS: 19A NALLUR ROAD EXCESS:

#19-00, SHAW TOWER SINGAPORE 456636 **DATE**: 6-Dec-17

SINGAPORE 189702

ATTN.: MOTOR CLAIMS TEL: 98363977

TO REPLACE REAR BUMPER. TO REPAIR REAR END PANEL AND ALL

AREAS AFFECTED BY THE ACCIDENT.

FAX:

VEH NO: SLN3665X DATE IN: CONTACT PERSON: JOBI THOMAS 6360 2446

CHASSIS NO: WMWYS920703B64844 MILEAGE: TYPE OF CLAIM: THIRD PARTY CLAIM

MODEL: MINI COUNTRYMAN F60 DATE REG.: 24-Aug-17 POLICY NO. : **NATURE OF WORKS Parts Description** s/NO QTY **REVISED PRICES** REAR BUMPER 1 \$ 1 M51.12.7.389.377 2,038.74 \$ REAR BUMPER TOW COVER 1 M51.12.7.389.350 107.46 REAR BUMPER SPOILER \$ 3 1 M51.12.7.391.199 286.68 REAR BUMPER SPOILER GARNISH \$ 4 1 M51.12.7.411.083 222.72 REAR BUMPER MOUNT CENTRE \$ 1 M51.12.7.401.870 42.84 REAR BUMPER MOUNT HOLDER 1 \$ M51.12.7.482.914 22.32 REAR BUMPER GUIDE LH Ś 7 1 M51.12.7.389.357 236.94 \$ REAR BUMPER GUIDE RH 1 M51.12.7.389.358 236.94 REAR BUMPER BLIND RIVET 2 B51.24.8.226.003 \$ 9.36 10 REAR BUMPER FASTENER 4 B51.12.7.461.407 \$ 14.64 REAR BUMPER RIVET \$ 11 4 M07.14.9.807.127 4.32 REAR BUMPER COMBINATION CLIP 10 B07.14.7.305.178 \$ 12 16.80 \$ REAR BUMPER REINFORCEMENT 1 483.30 13 M51.12.7.389.375 \$ REAR BUMPER REINFORCEMENT GASKET 2 10.56 14 B51.12.7.300.789 15 HEAT INSULATOR REAR 1 M51.48.7.391.380 \$ 59.46 HEAT INSULATOR M51.48.7.392.646 \$ 127.20 16 1 \$ ULTRASONIC SENSOR GASKET 4 B66.20.9.283.203 23.76 17 \$ ULTRASONIC SENSOR 2 B66.20.9.274.428 18 582.36 \$ 19 REAR EXHAUST 1 M18.30.8.627.279 1,012.32 \$ REAR EXHAUST CHROME 2 20 M18.30.8.654.203 213.84 \$ 21 EXHAUST PIPE 1 B18.30.8.627.213 1,252.38 \$ 22 **EXHAUST GASKET** 1 B18.30.8.632.362 50.16 \$ **EXHAUST CLAMP** 1 B18.30.7.536.426 23 72.72 24 EXHAUST MOUNT 2 B18.30.7.616.850 \$ 40.92 EXHAUST BRACKET Ś 2 M18.30.8.673.214 133.92 **TOTAL PARTS** \$ 7,302.66 \$ **TOTAL PARTS COST** \$ 7,302.66 **Labour Description**

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2	TO RESPRAY REAR BUMPER AND REAR END PANEL.				\$	1,800.00
3	TO SUPPLY SPRAY TEROSTAT SEALANT ON THE CUTTING AREAS	5.			\$	350.00
4	TO CARRY-OUT BODY CAVITY PRESERVATION.				\$	250.00
5	TO REMOVE & REFIT CARPET & TRIMS ON THE REAR SECTION T	TO GIVE WAY TO THE			\$	500.00
—	REPAIR ON THE REAR SECTION.					
6	TO REMOVE & REPLACE THE REAR EXHAUST ASSY,		NETT		\$	2,100.00
7	TO CHECK STEERING GEOMETRY & CONDUCT FULL WHEEL ALIGNMENT,				\$	560.00
8	TO TRANSFER THE REVERSE SENSORS.				\$	500.00
9	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.				\$	250.00
10	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.				\$	350.00
11	TO TOW THE VEHICLE FROM THE ACCIDENT SITE TO THE WORKSHOP.		NETT		\$	200.00
12	SUNDRIES.		NETT		\$	100.00
		TOTAL LABOUR	\$	350	\$	9,480.00
		TOTAL PARTS	\$		\$	7,302.66
		TOTAL	\$	Æ	\$	16,782.66
		LESS EXCESS	\$	72(\$	9
		TOTAL AFTER EXCESS	\$	•		
		GST 7%	\$	120	\$	243

GRAND TOTAL

\$

\$

REMARKS:

THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT.

TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400.00 WILL BE APPLY AS ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

Fax Number
Contact Number

EMail Address

- 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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> 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.
- 6. 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.
- 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

aforesaid.						
	ACCIDENT STATEMENT					
Date Of Report	06/12/2017 13:09					
Date Of Accident	05/12/2017 16:30					
Exact Location Of Accident	PIE TOWARDS CHANGI					
Country/State of Loss	SINGAPORE					
DETAILS OF OWN VEHICLE						
Vehicle Registration Number	SLN3665X					
Insured/Policyholder						
Name Of Registered Owner	TAN SZE LING					
NRIC No	S7428564C					
Email Address	TANSZELING@YAHOO.COM					
Mobile Phone No	(LOCAL) +65-98363977					
Alternative Phone No	OTHERS-98363977					
Vehicle Particulars						
Manufacturer	MINI					
Model	MINI COOPER S COUNTRYMAN LED NAV					
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					
If No, Please state action to be taken	THIRD PARTY					
Vehicle Category	PRIVATE CAR					
Insurance Company						
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.					
Type Of Coverage	COMPREHENSIVE					
Fleet Policy	NO					
Policy Number	2100509245-00000					
Cover Note Number						
Driver						
Name of Driver	TAN SZE LING					
NRIC No	S7428564C					
Date Of Birth	26/08/1974					
Occupation	INDOOR					
Date Of Driving Pass	31/07/1995					
Driving Experience	22 YEARS AND 4 MONTHS					
Gender	FEMALE					

(LOCAL) +65-98363977

TANSZELING@YAHOO.COM

OTHERS-98363977

Address 19A NALLUR ROAD

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle Vegistration Number of Briver's Own

-

456636

Insurance Company of Driver's Own Vehicle

-

NO

General Information of the Accident

Type Of Accident CHAIN COLLISION

Weather Conditions CLEAR
Road Surface DRY

Other Information

Postcode

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

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN & STATEMENT

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKQ5152S
Vehicle Make/Model/Colour MINI

Details Of Properties

Name of Driver CHARMAINE LOW

NRIC/Passport Number S9607131J Contact Number 90170171

Address Postcode

Insurance Company Name AXA INSURANCE PTE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SHC6169Y

Vehicle Make/Model/Colour

KIA SILVER TAXI

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

LEE HENG ANG

S2548142I

90620317

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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 lodgment 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)
 - (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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

PIE Towards Changi

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving towards PIE Changi
Car C stopped, I stopped
Suddenly Car B' hit my car A from rear
and my car felt a strong impact forward.
pushing forward and slight contact with card

DECLARATION

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

Policyholder's Signature

ble 2017

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

MINI AUTO PROTECTOR

OWN DAMAGE EXCESS S\$1000.00 WINDSCREEN EXCESS S\$100.00

(1)

CERTIFICATE NO. 2100509245-00000

(Windscreen excess is waived if the repair is done at Eurokars Centre)

SUM INSURED Market Value INSURING WITH COE/PARF Yes

SLN3665X

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

Tan Sze Ling (Chen Silin)

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

27 Apr 2018

28 Apr 2017

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE * SUBJECT TO AGE CONDITION :All Age Condition

b) Any other person who is driving on the Insured's order or with his permission. This policy will indemnify the insured or any authorised driver only if he/she meets the age conditions. A Young and/or Inexperienced Driver Excess ("YIDR") of \$\$3,000.00, in additional to the Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE *

Use only for social, domestic and pleasure purposes and for the Insured's business.

The Policy does not cover use for hire or rewards, tuition, driving test, racing, pace-making, reliability trial speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

APPROVED REPORTING CENTRES / MINI AUTHORISED REPAIRERS

1. Eurokars Centre - 12 Sungei Kadut Avenue (Tel: 6363 3003)

APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS)

2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501)

4. Ethoz - 30 Bukit Batok Cres(Tel:66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only

6. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 7. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)

8. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)

10. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)

LOSS OF USE Loss of Use 15 Days (1500 - 1600cc) - Refer to policy wordings for details

NAMED DRIVER

HIRE PURCHASE COMPANY / EMPLOYER'S LOAN

DBS BANK LTD

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 11 May 2017

AIG Asia Pacific Insurance Pte. Ltd.

503599-140 ARF (AP) PTE LTD - MINI 7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX SINGAPORE 069111

AUTHORISED REPRESENTATIVE

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REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7428564C



Name

TAN SZE LING (CHEN SILIN)

陈思琳

CHINESE
Date of birth
26-08-1974
Country of birth
SINGAPORE



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