

SERVICE	ESTIMATE	
70590 - C00001 SL: SERVICE SALES - F	⊃ C	
Mr Liew Chin Wan (Liu Zhenwan)	GST Reg.No:M28920628X	(
38 Lorong M Telok Kurau	Inv.No. : B&P 0 Page 1	
#03-01	Inv.date.: 05/12/2017	
	WIP No : 32904	
Singapore 425317	Veh.In/Out: 05/12/2017 05/12/2017	,
	*Tel.No. : Mobile: 97483523	
	Reg.No. : SKF6853D	
Closed by: Mandy Neo	Reg.date .: 26/06/2012	
Svc Consultant :	Mileage: 0	
Remarks: Mr Liew Chin Wan (Li	Chassis No: YV1FW485BC1066966	
Op.No Description	Mech Qty Price Disc% Pkg Amount	G
2-04 COL (1977 PM PM 1998 1998 1999 1999 1999 1999 1999 199	And device device sent about some series are some some some some some some some som	****
800 TO REPLACE LH FRONT DOOR,	0 2400.00 0 2,400.00	1.5
LH REAR DOOR ,LH REAR FENDER	2 2400100 0 2,400100	
802 TO PUTTY & SPRAY FRONT	0 2100.00 0 2,100.00	8
DOOR LH , DOOR LR , LHR	2,100100	
FENDER		
280 TO CHECK WIRING ALL ELECRICAL	0 450.00 0 450.00	S

		Gross Total.	4,950.00
Labour Total Parts Total Package Total	4,950.00 0.00 0.00	Net GST @ 7.0% Total Paid	4,950.00 346.50 5,296.50 0.00
GST: S=StdRated: O=OutOfScope:	7=7eroRated	Please Pay	5,296.50

MODULES

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 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.
- 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

4.0.004.		
	ACCIDENT STATEMENT	
Date Of Report	02/12/2017 14:02	
Date Of Accident	01/12/2017 16:15	
Exact Location Of Accident	CTE(CITY) AFTER ANG MO KIO AVE 1 ENTRANCE. LANE 4.	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKF6853D	
Insured/Policyholder		
Name Of Registered Owner	LIEW CHIN WAN	

Email Address JOSHUA.LIEW99@GMAIL.COM

Mobile Phone No (LOCAL) +65-97483523
Alternative Phone No OFFICE-NOPHONE

Vehicle Particulars

NRIC No

Manufacturer VOLVO
Model V60-1.6 (A)

Exact Purpose for which vehicle was being used at

time of accident

LEISURE

S7901302A

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 NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5055773008-05

Cover Note Number

Driver

Name of Driver LIEW CHIN WAN NRIC No S7901302A

Date Of Birth 13/01/1979
Occupation INDOOR
Date Of Driving Pass 15/05/2002

Driving Experience 15 YEARS AND 6 MONTHS

Gender MALE

Mobile Number +65-97483523

Fax Number

Contact Number OFFICE-NOPHONE

EMail Address JOSHUA.LIEW99@GMAIL.COM

Address

38 LORONG M TELOK KURAU

#03-01

Postcode

425317

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

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

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?

I have been approached by unknown person(s)

YEŞ

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

3

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

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

EMAIL TO MOTORVIDEO@INCOME.COM.SG

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHB7628M

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

TEO TEOK HAN

NRIC/Passport Number

Contact Number

96965519

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

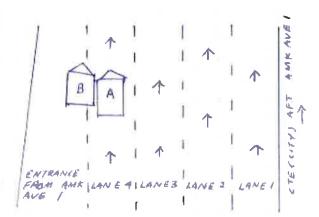
Name

Phone Number

Email Address

Sketch Plan #2

SKETCH PLAN



A: SAF6853D - CIOI B: SHB 7628 M - NON OI

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

 on 01/12/2017 around 1616hts, 1 was
travelling along of towards city on the way
home
Just as I pass amk 4ve I entrance, V2, which
was trying to merge into cre from Amk ave !
entrance, side surped into my veh(v1)
scratching both doers on the left of my veh aND
part of rear left side

DECLARATION

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

Policyholder's Signature

Date & Time: 01/12/2017

2130hrs

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: EUGENE LIM SOON MUAT

NRIC/FIN No.: S.S. E. 332 54F

Sketch Plan

SKETCH PLAN

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- 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)

Funderstand, 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 :
 - 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: 01/12/2017

2/306/18

Driver's Signature

(if driver is not the policyholder)

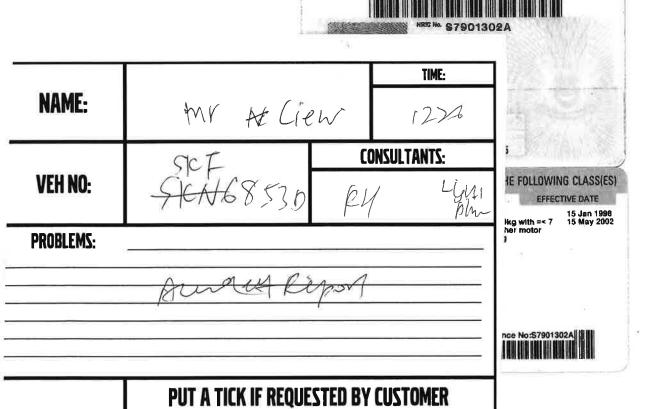
Date & Time:

Reporting Centre Personnel's Signature

Name: EUGENE LIM SOON HIMT

NRIC/FIN NO.: 33-583254F







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)

Cover: drivo PREMIUM Certificate Number: 5055773008-05

: SKF6853D 1. Index mark and Registration Number of Vehicle

: YV1FW485BC1066966 Chassis Number : LIEW CHIN WAN 2. Name of Policyholder

: 26 Jun 2017 3. Effective Date of Insurance : 25 Jun 2018

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission. 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. Limitations as to Use#

4. Expiry Date of Insurance

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

: N/A **EXCESS (SECTION 1)** : N/A **EXCESS (SECTION 2)** : S\$100 WINDSCREEN EXCESS : N/A ADDITIONAL EXCESS

: PLEASE REFER OVERLEAF **UNNAMED DRIVER EXCESS**

: YES REPAIR AT OWNER'S PREFERRED WORKSHOP **INSURE WITH COE** : YES NCD PROTECTION : YES : YES TRANSPORT ALLOWANCE : YES **EXCESS WAIVER**

: LIEW CHIN WAN PRIMARY DRIVER : NICOLE NG GEK CHOO NAMED DRIVER (1)

: N/A NAMED DRIVER (2) HIRE PURCHASE COMPANY : N/A

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

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)

: INCOME - MT DEPT (00000600471)

Date of Issue

: 13 Jun 2017 16:24 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive