

ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.

Tel: 6453 8686 (3 Lines) Fax: 6459 6550

Company Reg. No.: 201113667N

GST Reg. No.: 201113667N

Vehicle Insured : SKA8887U (AXA)

Accident Date : 19-01-2018

Date : 24-01-2018

Our Ref : SJQ3837A / CHAN

CHIN HUI CAR RENTAL
C/O ALAN'S UNITED AUTO PTE LTD
BLK 7 SIN MING IND.EST. SECTOR C
01-76
SINGAPORE 575642

ESTIMATE COST OF REPAIR FOR TOYOTA ALTIS 1.6 (A) *SJQ3837A*

1 PC	REAR BUMPER FASCIA	\$459.80
2 PCS	REAR BUMPER BRACKET @ \$82.80	\$165.60
1 PC	REAR BUMPER REINFORCEMENT	\$117.50
2 PCS	REAR BUMPER SIDE RETAINER @ \$51.20	\$102.40
1 PC	REAR END PANEL	\$552.30
1 PC	END PANEL TOP GARNISH	\$185.30
		<u>\$1,582.90</u>
	LESS 25%	\$395.73
		<u>\$1,187.17</u>
		\$1,187.17
1 SET	REAR BUMPER REVERSE SENSOR	\$300.00 SN
	TO APPLY UNDERSEALING	\$60.00
	TO PUTTY AND SPRAY REPLACED PARTS	\$500.00
	TO PANEL BEATING,CUT OUT DAMAGED PARTS,ADJUST ,ALIGN & REFIX ABOVE PARTS	\$600.00
		<u>\$2,647.17</u>

Singapore Dollars Two Thousand Six Hundred Forty Seven And Cents Seventeen Only

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 withholding 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 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 Report	23/01/2018 17:46
Date Of Accident	19/01/2018 11:45
Exact Location Of Accident	JUNCTION OF MOUNTBATTEN RD AND GUILLEMARD RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ3837A
Insured/Policyholder	
Name Of Registered Owner	CHIN HUI CAR RENTAL
Co Reg No	53090791K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64534680

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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	THIRD PARTY
Fleet Policy	NO
Policy Number	5075888779-02
Cover Note Number	

Driver

Name of Driver	LIM HAI CHIEW
NRIC No	S2165417E
Date Of Birth	11/07/1946
Occupation	INDOOR
Date Of Driving Pass	22/08/1972
Driving Experience	45 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96676791
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	16D EAST COAST AVE
Postcode	459198
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RENTAL
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
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKA8887U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PNG CHIN PEH JASMINE
NRIC/Passport Number	S8118971D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	


SKETCH PLAN

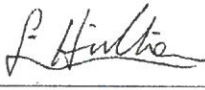
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6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application 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) 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.
- (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.:

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

WAS ABOUT TO MOVE OFF FROM TRAFFIC LIGHT, SUDDENLY
VEHICLE B HIT MY VEHICLE REAR.

J. Walther

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

RENTAL CHINA

South

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: