



QUOTATION

KAH MOTOR CO. SDN. BHD.
 (A Member of the Oriental Holdings Berhad)
 Service and Body Repair
 Tel: +65 6841 3838 Website: www.honda.com.sg
 For 24-hours Roadside Assistance, Call 98203838

GST Reg No.: M200050223
 Company Ref. No.: S60FC1380G

Customer	: AXA INSURANCE S'PORE PTE LTD 8 SHENTON WAY #27-01 AXA TOWER SINGAPORE 068811	Document No.	: SQT18000895	Page	1
Registration No	: SLF9544P	Date	: 2. Mar 2018	Customer No.	: WZA006
Chassis No	: MRHFC5650GT000227	Svc Advisor	: PATRICK MOK LIP KAY	Engine No	: R16B21600328
Model	: CIVIC 1.6 VTI YM2016	Date Time	: 2. Mar 2018 8:41:18 AM	Surveyor Name	:
Owner's Name	: GAN CHOON AIK	Survey Date	:	Authorisation Date	:
Ins Policy No.	:				
Date of Accident	: 26/2/2018				

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
	TP DIRECT SETTLEMENT (J/NO:) OWNER: GAN CHOON AIK OWNER INSURER: LIBERTY INSURANCE ACC DATE: 26/02/2018 SURVEYED BY: DATE: REF NO: TP INSURER: AXA INSURANCE TP VEH: SLR1144A						
BOSUN	SUNDRIES	1	50.00		50.00	3.50	53.50
BOJSE	SEALANT FOR BOOT COVER	1	80.00		80.00	5.60	85.60
BKRP02S	STRAIGHTEN ALIGN RR PANEL & RENEW DAMAGE PARTS.	1	1800.00	20	1440.00	100.80	1540.80
BML02I	INSPECT RR LIGHTING MECHANISMS. PERFORM WATER	1	80.00	20	64.00	4.48	68.48
BKBU01K	REMOVE/REFIT BOOT COVER CAMERA TO ASSIST REPAIR (N)	1	180.00	20	144.00	10.08	154.08
BA02R	REMOVE/REFIT RR BUMPER SENSORS TO ASSIST REPAIR (N)	1	100.00	20	80.00	5.60	85.60
BMI02D	REMOVE/REFIT BOOT TRIMS TO ASSIST REPAIR (N)	1	225.00	20	180.00	12.60	192.60
BP03R	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS. (3P)	1	1100.00	20	880.00	61.60	941.60
				Sum Labor	2918.00	204.26	3,122.26
RS-4CS	4PCS CORNER SENSOR W DISPLAY	1	272.00		272.00	19.04	291.04
74890-TEA-T11ZB	GARNISH ASSYRR.LICENSE	1	97.70	35	63.50	4.45	67.95
68500-TEA-N00ZZ	LID COMP TRUNK	1	472.10	35	306.86	21.48	328.34
74851-TEA-003	LOCK ASSYTRUNK	1	72.20	35	46.93	3.29	50.22
74865-TEA-T01	WEATHERSTRIPTRUNK LID	1	70.00	35	45.50	3.19	48.69
75722-TBA-A00	EMBLEM SETRR.	1	11.50	35	7.47	0.52	7.99
75725-TEA-T01	EMBLEMRR.	1	10.60	35	6.89	0.48	7.37
04715-TEC-Q00ZZ	FACE ASSYRR.BUMPER	1	9999.99	35	6499.99	455.00	6954.99



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8 SHENTON WAY
#27-01 AXA TOWER
SINGAPORE 068811

Registration No : SLF9544P
Chassis No : MRHFC5650GT000227
Model : CIVIC 1.6 VTI YM2016
Owner's Name : GAN CHOON AIK
Ins Policy No. :
Date of Accident : 26/2/2018

Document No. : SQT18000895 **Page** 2
Date : 2. Mar 2018
Customer No. : WZA006
Svc Advisor : PATRICK MOK LIP KAY
Engine No : R16B21600328
Date | Time : 2. Mar 2018 8:41:18 AM
Surveyor Name :
Survey Date :
Authorisation Date :

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
71502-TEX-Y00	GARNISHRR.BUMPER LOWER	1	35.30	35	22.94	1.61	24.55
71503-TEA-T00	GARNISHR.RR.BUMPER SIDE	1	7.60	35	4.94	0.35	5.29
71505-TBA-A00	BRACKETR.RR.BUMPER SIDE	1	2.20	35	1.43	0.10	1.53
71508-TEA-T00	GARNISHL.RR.BUMPER SIDE	1	7.60	35	4.94	0.35	5.29
71530-TEA-T00ZZ	BEAM COMPRR.BUMPER	1	160.00	35	104.00	7.28	111.28
71555-TBA-A00	BRACKETL.RR.BUMPER SIDE	1	2.20	35	1.43	0.10	1.53
71593-TEA-T01	SPACERR.RR.BUMPER SIDE	1	11.50	35	7.47	0.52	7.99
71598-TEA-T01	SPACERL.RR.BUMPER SIDE	1	11.50	35	7.47	0.52	7.99
91505-TM8-003	CLIPBUMPER	7	2.00	35	9.10	0.64	9.74
Sum Item					7412.86	518.92	7,931.78

Survey By _____

Date & Time _____

Excess _____

Status _____

Signature _____

Total Amount	10,330.86	723.18	11,054.04
Total (Inclusive of GST)			11,054.04

Printed on 2/3/2018 9:58:15 AM

This is a computer generated invoice. No signature is required.

Part prices are subjected to change without notice.

The above estimated cost of repair do not include any unforeseen damages.

GST Amount is calculated from individual line(s)

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	28/02/2018 16:06
Date Of Accident	26/02/2018 07:30
Exact Location Of Accident	BUKIT PANJANG TOWN ENTERING INTO BKE (PIE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF9544P
Insured/Policyholder	
Name Of Registered Owner	GAN CHOON AIK
NRIC No	S7431652B
Email Address	YAN_JUNYI@YAHOO.COM
Mobile Phone No	(LOCAL) +65-98488054
Alternative Phone No	OFFICE-98488054

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-1.6 VTI (FD4) (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	PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	CHUA BEE YAN
NRIC No	S7621693B
Date Of Birth	16/07/1976
Occupation	INDOOR
Date Of Driving Pass	08/12/1997
Driving Experience	20 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98430713
Fax Number	
Contact Number	
EMail Address	BEEYAN6969@YAHOO.COM.SG

Address	BLK 418 FAJAR ROAD #11-435
Postcode	670418
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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

REFER TO ATTACHMENT

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	SLR1144A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	98241942
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
Nature Of Damage	
No. Of Passenger (Including Driver)	

Vehicle No SLF 9544P

SKETCH PLAN

Annex D

IMPORTANT NOTICE

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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 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.
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:

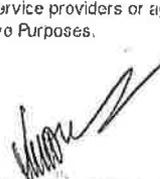
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (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

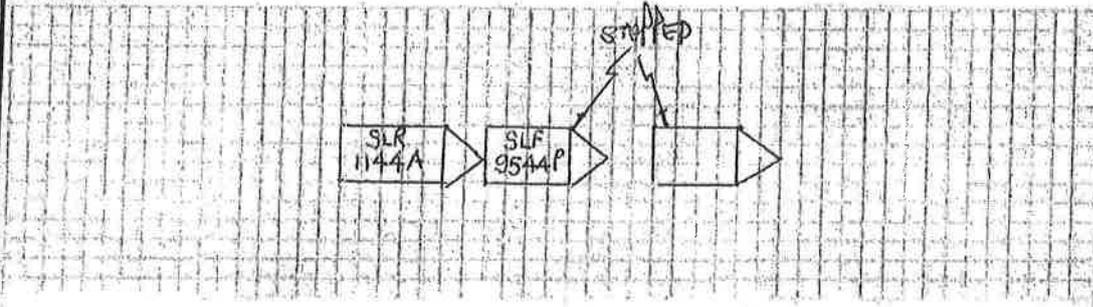
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 29/2/2018
 Policyholder's Signature / Date & Time 12.40pm

 29/2/2018
 Driver's Signature (If driver is not the policyholder) / Date & Time 12.40pm


 Witnessed by Reporting Centre Personnel

Sketch Plan



Please continue to Annex E

Sketch Plan Pg. 2

Vehicle No SLF 9544P

Annex E

Describe Circumstances of the Accident:

I was driving into the slip road from Bukit Panjang Town into BKE (PIE) on 26 Feb 2018 at around 7.30am. As the traffic was very heavy, my car could only travel slowly into the slip road. Suddenly I felt a knock onto the back of my car and that's when I realised that the car behind my car had knocked into my car bumper.

Both me and the other car driver drove to the road divider + road shoulder respectively in order not to block the traffic. We got off our cars to check on the damage. I noted scratches on my car boot and noted that the other car's ~~bumper~~ ^{front bumper} had some damage. As I did not notice other damage to my car at that point in time, I exchanged contact details with the other driver and we both took photos

You had been advised by the workshop that in the event that you wish to claim against your own policy (OD claim), there is a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.

of the cars. On 26 Feb 2018 evening, I examined the car again and realised that there was a dent made to my car bumper due to the accident.

Declaration

We declare the foregoing particulars are true in every respect.

[Signature] 29/2/18 *[Signature]* 29/2/18
 Policyholder's Signature / Date & Time 12.40pm
 Driver's Signature (if driver is not the policyholder) / Date & Time 12.40pm

[Signature]
 Witnessed by Reporting Centre Personnel