

# SME Motor Pte Ltd

1 Kaki Bukit Ave 6, #02-15 Autobay@KakiBukit Singapore 417883  
TEL: 67476106 (6 lines) FAX: 67442368 Email: service@smemotor.com.sg  
GST:201119451E RCB NO:201119451E

**M/S :** INDIA INTERNATIONAL INSURANCE PTE LTD

64 Cecil Street #04/05,  
IOB Building  
Singapore 049711

TEL: 63476100

FAX: 62244174

ATTN: Motor Claim Department

Your Ref No: 18/III/TP-048 (03)

Claim Type: Third Party

Accident Date: 01/03/2018

TP Veh Reg No: SHA3905U

**Estimate No:** EST0003989

**Date:** 02 Mar 2018

**Policy No:** 5091274471

**Veh Reg No:** SJL6378P

**Make/Model:** KIA SPORTAGE

**Chasis No:** KNAJE552397610965

**Engine No:** G4GC8H787576

**Reg. Date:** 05/12/2008

## Estimate Repair Cost to Vehicle No :SJL6378P

Description	Quantity	List Price	Amount
		<u>S\$</u>	<u>S\$</u>
<b>List Price</b>			
1 REAR GATE 'SPORTAGE' PLATE	1 PC	45.50	
2 REAR GATE 'CVVT' PLATE	1 PC	52.50	
3 REAR GATE '2.0' PLATE	1 PC	42.25	
4 REAR BUMPER	1 PC	385.85	
5 REAR BUMPER INNER SPONGE	1 PC	115.00	
6 REAR BUMPER REINFORCEMENT	1 PC	255.30	
7 REAR BUMPER TOP PAD	1 PC	68.50	
8 REAR END PANEL	1 PC	326.50	
9 REAR FENDER LH	1 PC	845.20	
10 REAR FENDER INNER COWLING LH	1 PC	58.20	
11 INNER COWLING CLIP	10 PC	55.00	
12 TAIL LAMP LH	1 PC	338.00	
13 REAR EXHAUST BOX LH	1 PC	785.20	
14 REAR EXHAUST CHROME FINISHER LH	1 PC	150.00	
15 REAR EXHAUST RUBBER HOLDER	2 PC	77.00	
16 REAR SHOCK ABSORBER LH	1 PC	258.30	
17 REAR KNUCKLE ARM LH	1 PC	458.20	
18 REAR KNUCKLE BEARING LH	1 PC	285.00	
19 REAR LOWER ARM LH	1 PC	320.00	
20 REAR UPPER ARM LH	1 PC	295.00	
21 REAR TRAILING ARM LH	1 PC	195.20	
22 REAR ANTI ROLL BAR LINK LH	1 PC	85.85	
23 REAR SPORT RIM LH (ORI)	1 PC	785.00	
24 REAR FENDER GLASS MOULDING LH	1 PC	850.00	
		7,132.55	
	Less 10%	713.26	6,419.31
<b>Special Net</b>			
25 REVERSE SENSOR	1 PC	250.00	
26 REAR FENDER GLASS GUM	1 PC	45.00	
27 REAR TYRE LH	1 PC	325.00	
		620.00	620.00
<b>Labour</b>			
28 WIRE CHECKING	1 UNIT	30.00	
29 REMOVE & REFIX REAR FENDER GLASS	1 UNIT	65.00	
30 REMOVE & REFIX CUSHION AND SEATS	1 UNIT	180.00	
31 REMOVE & REFIX EXHAUST BOX	1 UNIT	150.00	

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**Chasis No:** KNAJE552397610965

**Engine No:** G4GC8H787576

**Reg. Date:** 05/12/2008

## Estimate Repair Cost to Vehicle No :SJJL6378P

Description	Quantity	List Price	Amount
		<u>S\$</u>	<u>S\$</u>
32 REMOVE & REFIX REAR UNDERCARRIAGE	1 UNIT	250.00	
33 4 WHEEL ALIGNMENT	1 UNIT	100.00	
34 LABOUR CHARGE	1 UNIT	1,500.00	
35 SPRAY PAINTING	1 UNIT	1,200.00	
		3,475.00	3,475.00
		Total	S\$ 10,514.31
		Add GST @ 7%	736.00
		Total Amount Payable	<u>S\$ 11,250.31</u>

TOTAL: SINGAPORE DOLLAR ELEVEN THOUSAND TWO HUNDRED FIFTY AND CENTS THIRTY ONE ONLY

**For SME Motor Pte Ltd**

AUTHORISED SIGNATURE

## 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	01/03/2018 17:59
Date Of Accident	01/03/2018 08:00
Exact Location Of Accident	PIE TWDS TUAS (AYE) BEFORE JALAN BAHAR EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL6378P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RIDZWAN BIN RAZALI WILLES
NRIC No	S7802501H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87501913
Alternative Phone No	OFFICE-87501913

### Vehicle Particulars

Manufacturer	KIA
Model	SPORTAGE-2.0 (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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5091274471
Cover Note Number	

### Driver

Name of Driver	RIDZWAN BIN RAZALI WILLES
NRIC No	S7802501H
Date Of Birth	13/01/1978
Occupation	INDOOR
Date Of Driving Pass	31/10/2008
Driving Experience	9 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87501913
Fax Number	
Contact Number	OFFICE-87501913
Email Address	NOEMAIL

Address	BLK 497J TAMPINES ST 45 #07-76
Postcode	527497
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	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

FRONT VEHICLE STOP, I ALSO STOP IN TIME. VEHICLE B CANNOT STOP IN TIME AND HIT MY VEHICLE REAR LEFT PORTION. VIDEO FOOTAGE PROVIDED.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE SIZE TOO BIG
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA3905U
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	


## SKETCH PLAN

### 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 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:

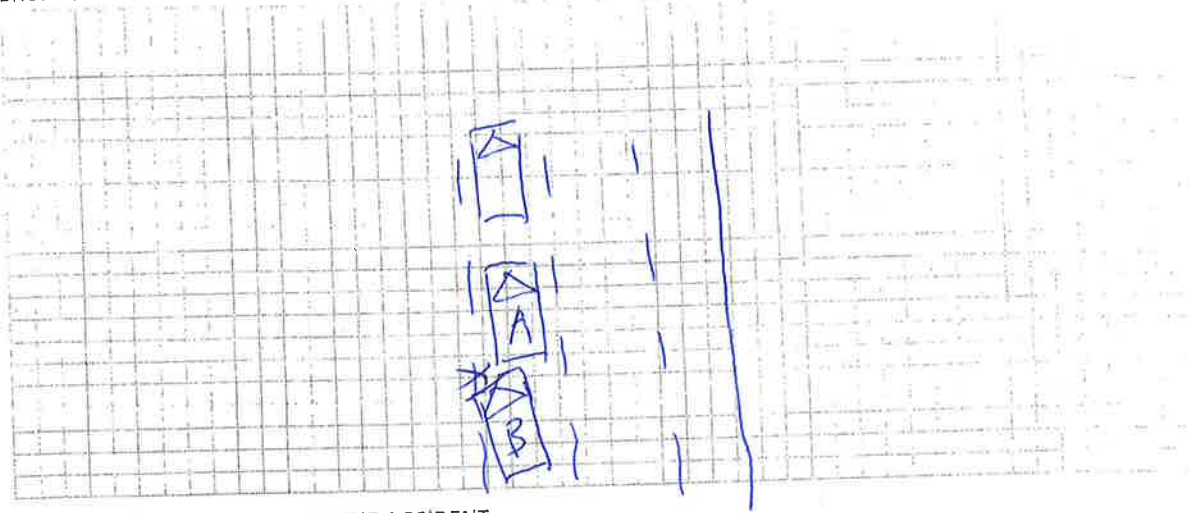
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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) 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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

front veh stop, I also stop intance, veh B  
cannot stop intance & hit my veh from  
left position. Video footage provided. *ph*

DECLARATION

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

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.:

CPD/AC/ST/CC/PlanForm-V3

*Sumo*

REPUBLIC OF SINGAPORE DRIVING LICENCE


Licence Number: S7802501H

Name: RIDZWAN BIN RAZALI WILLES

Birth Date: 13 Jan 1978

Issue Date: 31 Oct 2008

001670317K



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7802501H



Name: RIDZWAN BIN RAZALI WILLES

Race: GURKHA

Date of birth: 13-01-1978

Country of birth: SINGAPORE

Sex: M



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars= $\leq$ 3000kg with  $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles  $\leq$  2500kg

PASS DATE 31 Oct 2008

Licence No: S7802501H

NP 428A

4163605

NRIC No. S7802501H

Date of issue: 21-01-2008

APT BLK 497J TAMPINES STREET 45 #07-76 SINGAPORE 527497

NRIC No: S7802501H Date: 03/02/2018



## THE SCHEDULE

### Private Car Insurance Policy

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Policyholder named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract. We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium.

The provision of this insurance is subject to:

1. any Endorsement specified as operative in the Schedule
2. the Conditions and General Exclusions of this Policy, and
3. the payment of the premium specified in the Schedule.

This Policy, the Schedule and the Certificate of Insurance are to be read together as one document.

GST Reg No. M4-0003030-8

Policy Number	: 5091274471
The Policyholder	: RIDZWAN BIN RAZALI WILLES BLK 289 #02-440 TAMPINES STREET 22 SINGAPORE 520289

Period of Insurance	: 27 May 2017 To 04 Jun 2018
Sum Insured	: Market Value of Insured Vehicle at Time of Loss
Premium (inclusive GST)	: S\$729.10

#### Interest Insured

Cover Type	: drivo CLASSIC		
Primary Driver	: RIDZWAN BIN RAZALI WILLES		
Named Driver (1)	: N/A		
Named Driver (2)	: N/A		
Make/Model	: KIA/SPORTAGE	Capacity	: 2000cc
Registration Number	: SJL6378P	Registration Year	: 2008
Chassis Number	: KNAJE552397610965	Off-peak Car	: No
Repair at Owner's Preferred Workshop	: No	Insure with COE	: Yes
Excess (Section 1)	: S\$600	NCD Entitlement	: 50%
Excess (Section 2)	: N/A	NCD Protection	: No
Windscreen Excess	: S\$100		
Additional Excess	: N/A		
Unnamed Driver Excess	: Please refer to Terms and Conditions		
Hire Purchase Company	: LIEN CHONG ENTERPRISES PTE LTD		

#### Optional Cover

Transport Allowance	: No
Excess Waiver	: No

Memo A : N/A

Endorsement Operative : N/A

Agency	: IVAN INSURANCE AGENCY (00000614519)
Date of Issue	: 25 May 2017 13:06 hrs

#### DUTY OF DISCLOSURE

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors



Chief Executive





Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701  
GST Registration No. : M4-0006529-2

Print Date/Time : 02 Mar 2018 / 13:20:03

Receipt Date/Time : 02 Mar 2018 / 13:20:03

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-180302-001089

Previous Receipt No. :

**S/N Item Description/  
Business Transaction Reference  
No.**

Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SHA3905U

As at 01 Mar 2018/08:00:00

Insurance Co: INDIA INT'L INS PTE LTD

1 Insurance Enquiry - SHA3905U

Enquiry Fee

20180302131832830957

7.00	0.49	7.49
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**Sub-Total**

7.00	0.49	7.49
------	------	------

**Total Before Rounding**

7.00	0.49	7.49
------	------	------

**Rounding Difference**

0.04

**Total Amount Payable**

7.45

Paid By

xxxxxxxxxxxx0692

Credit Card:

Visa/MasterCard

7.45

Total

7.45

Cash Change

0.00

Tendered Amount

7.45

Excess Refundable Amount

0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Print Receipt

OK

Save as PDF