

TRANS EUROKARS PTE LTD **NO:5 UBI CLOSE, SINGAPORE 408605**



\$

1,650.00

ESTIMATE COST OF REPAIRS

AXA INSURANCE PTE LTD NAME: STUTTGART AUTO PTE LTD WIP: 14770

8 SHENTON WAY ADDRESS: NO:12 SUNGEI KADUT AVE **EXCESS:**

#24-01 AXA TOWER SINGAPORE 729648 DATE: 23-Mar-18

SINGAPORE 068811

ATTN.: TEL: MOTOR CLAIMS 63633003

TO REPLACE FRONT BUMPER AND RADIATOR GRILLE ASSY. TO REPAIR ALL

VEH NO: SLC8512D DATE IN: **CONTACT PERSON:** JOBI THOMAS 6395 7875

MODEL:

FAX: CHASSIS NO: JM6BM42A8G0335207 MILEAGE: TYPE OF CLAIM: THIRD PARTY CLAIM MAZDA 3 DATE REG.: 27-May-16 POLICY NO. : **NATURE OF WORKS** s/NO **Parts Description** QTY **REVISED PRICES** FRONT BUMPER 1 MBHN1-50-031BBB \$ 925.10 1 2 FRONT BUMPER RETAINER RH 1 MBHN1-50-0T1F \$ 18.70 3 FRONT BUMPER RETAINER LH 1 MBHN1-50-0U1E \$ 18.70 FRONT BUMPER BRACKET RH \$ 4 1 MBHN1-50-152 15.10 FRONT BUMPER BRACKET LH \$ 5 1 MBHN1-50-162 15.10 6 FRONT BUMPER GROMMET, SCREW 2 MGHP9-50-0Z5 \$ 5.40

	AREAS AFFECTED BY THE ACCIDENT.				-	
2	TO RESPRAY FRONT BUMPER AND RADIATOR GRILLE TOP.				\$	1,500.00
3	TO CARRY-OUT BODY CAVITY PRESERVATION.				\$	250.00
4	TO SUPPLY 1 PC NUMBER PLATE.				\$	70.00
5	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.				\$	250.00
6	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.				\$	350.00
7	SUNDRIES.		NETT		\$	100.00
		TOTAL LABOUR	\$	14).	\$	4,170.00
		TOTAL PARTS	\$		\$	2,003.76
		TOTAL	\$		\$	6,173.76
		LESS EXCESS	\$	520	\$	
		TOTAL AFTER EXCESS	\$			
		GST 7%	\$	-	\$	3 3
		GRAND TOTAL	\$	a i	\$	- W

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

- 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 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.	A COLDENIT CTATEMENT
	ACCIDENT STATEMENT
Date Of Report	22/03/2018 15:54
Date Of Accident	19/03/2018 19:15
Exact Location Of Accident	HOLLAND VILLAGE CAR PARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLC8512D
Insured/Policyholder	
Name Of Registered Owner	STUTTGART AUTO PTE LTD
Co Reg No	198403740N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63633003
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA 3
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
f 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	YES
Policy Number	999994956/100783516-00000
Cover Note Number	
Driver	
Name of Driver	TAN YI SZE

Name of Driver TAN YI SZE NRIC No S8770259F Date Of Birth 23/03/1987 Occupation **INDOOR** Date Of Driving Pass 13/06/2007

Driving Experience 10 YEARS AND 9 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-91882215

Fax Number Contact Number

EMail Address YISZE.TAN@PORSCHE.COM.SG Address

27 JALAN SEMPADAN #02-05 VILLA MARINA

Postcode

457401

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

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 ON COLLISION

Weather Conditions

FAIR

Road Surface

NORMAL

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?

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)

2

Passenger 1

NAME:

: CHUA YI LING

GENDER:

: FEMALE

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 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 Witness 1

Name

CHUA YI LING

Phone Number

91593230

Email Address

YILING.CHUA@PORSCHE.COM,SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJY8392R

Vehicle Make/Model/Colour

HYUNDAI

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

SKETCH PLAN

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- 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)

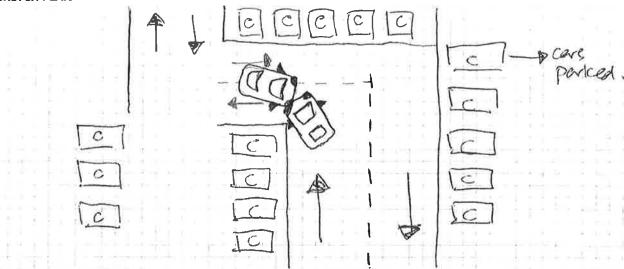
Date & Time: 2213. 11am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was exiting the car park at Holland Village and took a torn at
the end of the Stretch where I had parked the car. Just at the
bend and write remarring in my love, a cer from the opposite
direction drove into the lane those I was in. I immediately
Stopped on my broke and Stopped the car. However the other
car which was traveling fast banged into my car, painted for
a few seconds, then reversed. The driver of the other car then
drove round to my side, would down the or window to ask if
she had bringed into me. I actuarledged and we exchanged
details
2

DECLARATION

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

Policyholder's Signature Date & Time: Oriver's signature
(If driver is not the policyholder)
Date & Time: JJ 3 . NAM

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.Z.400

COMPREHENSIVE COMMERCIAL MOTOR

OWN DAMAGE EXCESS WINDSCREEN EXCESS \$\$800.00 (1)

CERTIFICATE NO. 999994956/100783516-00000

(for policies with effect from 1st November 2002)

S\$100.00

SUM INSURED S\$1.00 **INSURING WITH COE/PARF**

YES

1) VEHICLE REGISTRATION NO.

SLC8512D

2) NAME OF INSURED

Stuttgart Auto Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 1 Sep 2017

4) DATE OF EXPIRY OF INSURANCE

31 Aug 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any person who is driving on the Insured's order or with their 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) LIMITATION AS TO USE *

Use for the carriage of passengers or goods in connection with the Insured's business.

Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.

The Policy does not cover

1) Use for racing, pace-making, reliability trial or speed-testing.

2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

LOSS OF USE NOT INCLUDED

N/A * NAMED DRIVER

HIRE PURCHASE COMPANY HL Bank

* 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 Sep 2017

AIG ASIA PACIFIC INSURANCE PTE. LTD.

504028-010 ARF (ASIA PACIFIC) PTE LTD 7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX SINGAPORE 069111

Authorised Representative

ORIGINAL

SSPYTP

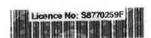


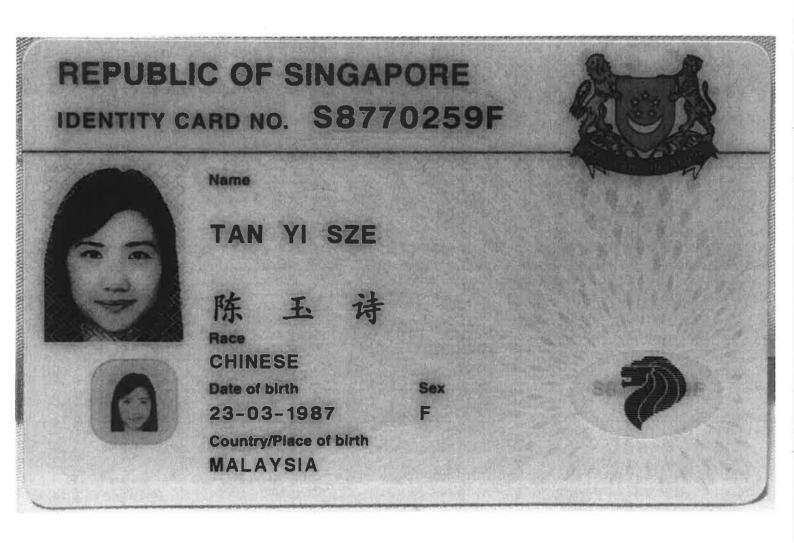
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 13 Jun 2067 of the driver; and other motor vehicles =< 2500kg

NP 428A









GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No:

GR-18-044078

Date of Request:

23/03/2018

Your Ref No:

Online Purchase

Trans Eurokars Pte Ltd 12 Sungei Kadut Ave Singapore 729648

Dear Sir/Madam,

Enquiry Date

23/03/2018

Enquiry By

Chan Yuan Huey

TP Vehicle No.

SJY8392R

Accident Date

19/03/2018

Enquiry Result

SLC 8512D Mazda

Eliquity Rooule	17			
TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.	
SJY8392R	AXA Insurance Pte Ltd	15/04/2017-14/04/2018	6338 7288	

Thank You.

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