ESTEEM PERFORMANCE PTE LTD
Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/ 259, 569536.
Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteemperf.com.sg

Repair Estimates SLN 5649 E

Parts	(a) Cost / List Price Items	$	7,341.82
	Plus/Less 25%	$	1,835.46
	Total of Cost / List	$	5,506.37
	(b) Nett Price Items		
	Less		
	Total of Nett Item		
	(c) **Special Nett Items**	$	45.00
Total Parts Cost		$	5,551.37
Labour		$	2,500.00
Total		$	8,051.37

The above total will be subjected to 7% G.S.T.

Name of Surveyor : _____

Company : _____

Survey conducted on : _____ at _____

Remarks By Surveyor

(a) The repair of this vehicle is authorized / is not authorized until further notice.

(b) Recommended Days of Repair : _____ day(s)

(c) Resurvey : Required / Not Required

(d) Excess :$_____

(e) Signature of surveyor : _____ Date: _____

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Spare Parts

Vehicle No.	:	**SLN 5649 E**	Submit By	:	**Carmen Lim**
Make & Model	:	TOYOTA PRIUS	Year Manufacture	:	2017
Chassis No	:	JTDKB3FU903557891	Engine No.	:	

Cost / List

S/No.	Part Description	Qty	Unit Price	Price	Disposition by Surveyor
1	Front number plate	1	$45.00	S.N	
2	Front number plate garnish	1	$45.00		
3	Front support panel centre	1	$338.50		
4	Front support panel RH	1	$213.50		
5	Headlamp panel RH	1	$89.20		
6	Headlamp RH	1	$2,531.60		
7	Front bumper	1	$450.80		
8	Front bumper clip	10	$40.00		
9	Front bumper reinforcement - upper	1	$711.50		
10	Front bumper side retainer RH	1	$107.20		
11	Front bumper side retainer LH	1	$107.20		
12	Front bumper upper grille	1	$321.90		
13	Front bumper lower grille	1	$148.60		
14	Front bumper emblem	1	$87.10		
15	Front bumper tow cover RH	1	$25.70		
16	Front bumper sponge - upper	1	$89.81		
17	Fog lamp RH	1	$910.70		
18	RH front fender	1	$868.70		
19	RH front fender undershield	1	$185.64		
20	RH front fender undershield clip	10	$25.00		
21	RHF fender wording "HYBRID"	1	$44.17		
22					
23					

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

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Labour

Vehicle No. : SLN 5649 E
Submit By : Carmen Lim
Make & Model : TOYOTA PRIUS
Year of Manufacture : 2017

S/No	Labour Description	Esimated Price	Adjusted Price
1	TO RENEW DAMAGED PARTS & KNOCK OUT ACCIDENT		
	REPAIR AREA. (FRONT BUMPER,SUPPORT PANEL,RHF		
	FENDER)	$1,200.00	
2	TO PUTTY, RESPRAY PAINT FOR AFFECTED ACCIDENT		
	REPAIR AREA. (FRONT BUMPER,SUPPORT PANEL,RHF		
	FENDER)	$1,000.00	
3	To check wiring & focus headlamp	$50.00	
4	To tuff coat	$100.00	
5	To remove & refit radiator, condenser to assist work load,		
	to top up A/C gas.	$150.00	

Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.

MIE118043187 / Indeco Engineers Pte Ltd - Defu
ENTRY DATE & TIME: 02/04/2018 09:41
SUBMITTED BY: Lim Qai Mun

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.

ACCIDENT STATEMENT

Date Of Report	02/04/2018 09:41
Date Of Accident	29/03/2018 23:15
Exact Location Of Accident	CROSS JUNCTION OF PUNGGOL ROAD & SENGKANG EAST WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN5649E

Insured/Policyholder

Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90777736

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS HYBRID-1.8 CVT (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 HIRE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	

Driver

Name of Driver	POH TI CHAO , JEFFREY
NRIC No	S7711019D
Date Of Birth	29/04/1977
Occupation	OUTDOOR
Date Of Driving Pass	14/05/2005
Driving Experience	12 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97614277
Fax Number	
Contact Number	
EMail Address	JEFFREYPOH@ME.COM

Address	37 PUNGGOL FIELD #01-38
Postcode	828809
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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
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 AS ATTACHED.

Attachment(s)

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

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

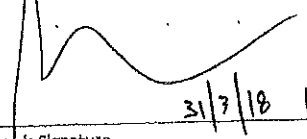
   (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

   (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:

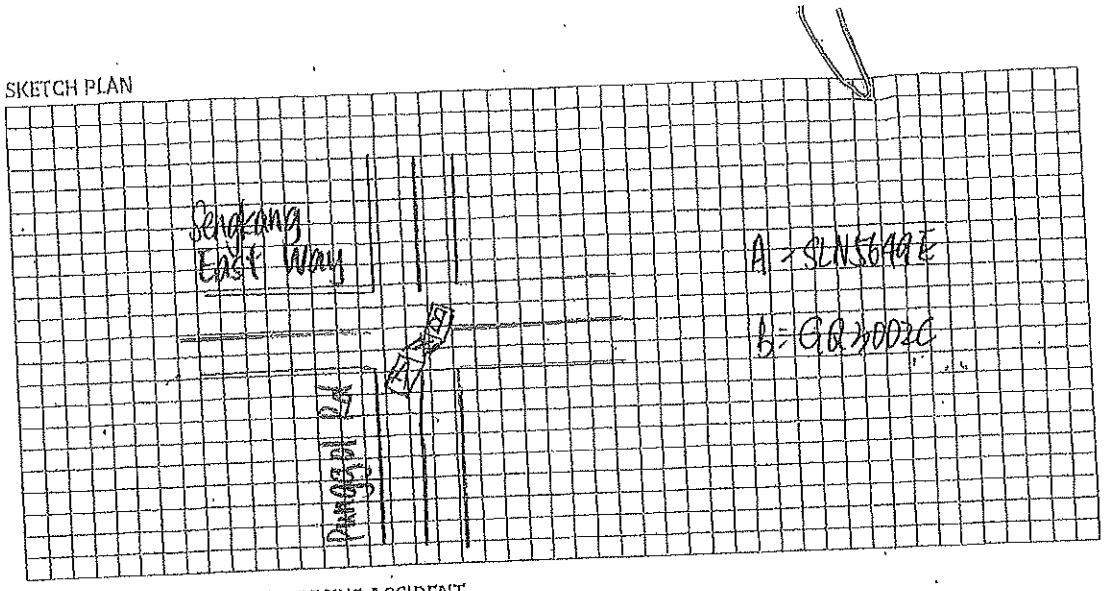
      (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

      (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

I was driving along cross junction of Punggol Road & Sengkang East Way on 29/3/2018 @ 23:15. Suddenly, vehicle B comes to my side when the traffic light is still red.

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: 31/3/18 1024HRS	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

GIARMC SketchPlanForm_V3

2