

PROGRESSIVE AUTOMOTIVE PTE LTD

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716
TEL: 6741 5336 FAX: 6741 7208 Email: progauto@progauto.com.sg
GST:201006949C RCB NO:201006949C

M/S : NG CHIN CHIN
73 LORONG K TELOK KURAU #01-04
SINGAPORE 425692

ATTN: AXA INSURANCE

Your Ref No: TP 0418-5017
Claim Type: Third Party
Accident Date: 02/04/2018
TP Veh Reg No: SJM 9582 R

Estimate No: **EST1503499**
Date: 06 Apr 2018
Policy No: 5096643690
Veh Reg No: **SDW200X**
Make/Model: B.M.W. X1 SDRIVE18I
AT D/AB 2WD 5DR
GAS/D SR
Chassis No: WBAVL32040VN76539
Engine No: B307I761N46B20BD
Reg. Date: 27/08/2010

Estimate Repair Cost to Vehicle No :SDW200X

Description	U/Price	Quantity	Price S\$	Amount S\$
List Price				
1 FRONT BUMPER, TOP	695.90	1 PC	695.90	
2 FRONT BUMPER LOWER, BLACK	177.95	1 PC	177.95	
3 FRONT BUMPER CLIPS	5.00	10 PC	50.00	
4 FRONT BUMPER SIDE HOLDER - LH	38.50	1 PC	38.50	
5 FRONT BUMPER SIDE HOLDER - RH	38.50	1 PC	38.50	
6 FRONT BUMPER FOG LAMP - LH	260.75	1 PC	260.75	
7 FRONT FENDER OUTER WHEEL ARCH GARNISH - LH	146.10	1 PC	146.10	
8 HEAD LAMP - LH	1,879.55	1 PC	1,879.55	
9 BALLAST	867.85	1 PC	867.85	
10 HID BULB	372.20	1 PC	372.20	
			4,527.30	
		Less 5%	226.37	4,300.94
Labour				
11 TO KNOCK OUT DENTS, REMOVE, REPLACE ACCIDENT PARTS	400.00	1 JOB	400.00	
12 TO RESPRAY PAINT ON ACCIDENT PORTIONS	600.00	1 JOB	600.00	
13 TO CHECK WIRING	20.00	1 JOB	20.00	
14 TO RESET CHECK LIGHT	100.00	1 JOB	100.00	
			1,120.00	1,120.00
			Total	S\$ 5,420.94
			Add GST @ 7%	379.47
			Total Amount Payable	S\$ 5,800.41

TOTAL: SINGAPORE DOLLAR FIVE THOUSAND EIGHT HUNDRED AND CENTS FORTY ONE ONLY

For **PROGRESSIVE AUTOMOTIVE 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	06/04/2018 15:21
Date Of Accident	02/04/2018 08:00
Exact Location Of Accident	73 LOR K TELOK KURAU CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDW200X
Insured/Policyholder	
Name Of Registered Owner	NG CHIN CHIN
NRIC No	S1739981J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93800001
Alternative Phone No	OFFICE-93800001
Vehicle Particulars	
Manufacturer	BMW
Model	X1 SDRIVE18I AT D/AB 2WD 5DR GAS/D SR
Exact Purpose for which vehicle was being used at time of accident	PARKED VEHICLE
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	5096643690
Cover Note Number	-
Driver	
Name of Driver	NG CHIN CHIN
NRIC No	S1739981J
Date Of Birth	24/10/1966
Occupation	INDOOR
Date Of Driving Pass	16/11/1988
Driving Experience	29 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93800001
Fax Number	
Contact Number	OFFICE-93800001
Email Address	NOEMAIL

Address	73 LOR K TELOK KURAU #01-04
Postcode	425692
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	
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)	0

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

MY VEH WAS PARKED AT 73 LORONG K TELOK KURAU CARPARK, EVERYTHING WAS INTACT. I RECEIVED A CALL FROM MY NEIGHBOR SAYING THAT HIS VEH HAD HIT ONTO MY VEH WHILE REVERSING.

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	SJM9582R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEONG WEI CHYANG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	


Accident Sketch Plan

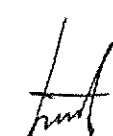
SKETCH PLAN

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.:

Accident Sketch Plan

SKETCH PLAN

A 2013-2014

R - 53M 9582R

73 1er K. 7.10.14. Karsli Geyikli

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to statement

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.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1739981J

Name
NG CHIN CHIN

黄青青

Race
CHINESE

Date of Birth
24-10-1966

Sex
F

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1739981J


Name
NG CHIN CHIN

Birth Date: 24 Oct 1966


Issue Date: 11 Sep 2003



2368655



NRIC No. S1739981J



Blood Group: B+ Date of issue: 10-09-1994

73 LORONG K TELOK KURAU #01-04
SINGAPORE 425692

NRIC No: S1739981J Date: 17/01/2008 (R)

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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	16 Nov 1988

NP 428A

Licence No: S1739981J

