

Kang Car Repairers Pte Ltd

1 Kaki Bukit Ave 6, #02-06 Autobay@ Kaki Bukit Singapore 417883
TEL: 6747 7636 FAX: 6748 5071 Email: kangcar@singnet.com.sg
GST:201300201N

M/S : MSIG INSURANCE (SINGAPORE) PTE LTD
4 SHENTON WAY
#21-01 SGX CENTRE 2
SINGAPORE 068807

TEL: 68277888 FAX: 62257402
ATTN: Motor Claim Department

Claim Type: Third Party
Accident Date: 21/04/2018
TP Veh Reg No: SKE9760Z

Estimate No: EST1800117

Date: 25 Apr 2018

Veh Reg No: **SLB8135P**
Make/Model: HONDA VEZEL 1.5X
CVT

Chasis No: RU11112814

Reg. Date: 22/04/2016

Your Ref No: SKE9760Z

Estimate Repair Cost to Vehicle No :SLB8135P

Quantity	Description	List Price	Amount
		<u>S\$</u>	<u>S\$</u>
List Price			
1	1 PC BOOT LID	953.70	
2	1 PC BOOTLID "VEZEL" EMBLEM	56.90	
3	1 PC BOOT LID LOCK	188.90	
4	1 PC BOOT LID RUBBER	122.80	
5	1 PC BOOTLID INNER TRIM	205.60	
6	1 PC BOOT LID LAMP LH	280.20	
7	1 PC REAR PANEL	445.60	
8	1 PC REAR PANEL INNER TRIM	92.30	
9	1 PC REAR BUMPER	563.70	
10	1 PC REAR SIDE BUMPER	205.60	
11	1 PC REAR BUMPER LOWER INNER GARNISH	225.70	
12	2 PCS REAR BUMPER SIDE RETAINER	56.40	
13	1 PC REAR BUMPER REFLECTOR	186.90	
14	1 PC REAR WINDSCREEN RUBBER	140.00	
		3,724.30	
		Less 20%	
		744.86	2,979.44
Special Net			
15	1 PC BOOTLID INNER TRIM CLIPS	40.00	
16	1 SET REAR PANEL INNER TRIM CLIPS	40.00	
17	1 PC REAR WINDSCREEN INNER SEAL RUBBER	60.00	
18	1 PC REAR WINDSCREEN SEALANT	60.00	
19	1 PC REAR NUMBER PLATE	50.00	
20	1 PC WEEK END SEAL	15.00	
		265.00	265.00
Labour			
21	1 TO CHECK WIRING	50.00	
22	1 TO REMOVE AND REFIT REAR WINDSCREEN	120.00	
23	1 TO REMOVE AND REFIT INNER TRIM	100.00	

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		<u>S\$</u>	<u>S\$</u>
24	1 TO SPRAY UNDERSEAL	120.00	
25	1 (REAR) TO SPRAY PAINTING	1,000.00	
26	1 TO REMOVE AND REPLACE THE DAMAGED PARTS, KNOCK OUT ACCIDENT DENTED PORTIONS, AND FOR CUTTING/WELDING WORKS.	1,200.00	
		2.590.00	2.590.00
		Total	S\$ 5,834.44
		Add GST @ 7%	408.41
		Total Amount Payable	<u>S\$ 6,242.85</u>

TOTAL: SINGAPORE DOLLAR SIX THOUSAND TWO HUNDRED FORTY TWO AND CENTS
EIGHTY FIVE ONLY

This is only an estimate based on our preliminary inspection and does not cover additional parts, labour time
which may be required after work has begun.

For Kang Car Repairers 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	23/04/2018 13:44
Date Of Accident	21/04/2018 14:05
Exact Location Of Accident	FORT RD TWDS MCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB8135P
Insured/Policyholder	
Name Of Registered Owner	SHAMINI D/O E SIVANANTHASEGARAN
NRIC No	S2672063Z
Email Address	SHAMINIRAJA@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-90030707
Alternative Phone No	OFFICE-90030707

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 1.5X CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL USE
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	5079167879-02
Cover Note Number	DRIVO CLASSIC

Driver

Name of Driver	RAJA MOHAN S/O MURUGESA KANAGARATHAM
NRIC No	S1404851J
Date Of Birth	17/10/1960
Occupation	INDOOR
Date Of Driving Pass	02/03/2007
Driving Experience	11 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93362355
Fax Number	
Contact Number	
Email Address	SRIRAJAMOHAN@GMAIL.COM

Address	BLK 55 TELOK BLANGAH DR #10-44
Postcode	100055
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	2
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)	2
Passenger 1	NAME: RETNAM GENDER: MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TELOK BLANGAH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 51 TELOK BLANGAH DRIVE , POSTCODE: 100051 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2729999 - FAX NO: 63772526
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE ATTACHED POLICE REPORT NO : T/20180421/2129

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	SKE9760Z
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	OH TIONG SAH
NRIC/Passport Number	S7508445E
Contact Number	81986044
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: 23/4/18
10.52am


Driver's Signature
(If driver is not the policyholder)
Date & Time:
23 Apr 18
1050am.


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

Age \leftarrow Food Ed



A: SLB 8135P

B: SKF 9760Z

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

See attached Police Report No. : T/20180421/2129.

DECLARATION

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

Policyholder's Signature

Date & Time: 23/4/18

10.52 am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

23 Apr 18
10 50 am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan Pg. 3



**SINGAPORE
POLICE FORCE**



T/20180421/2129

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

1 of 3

Report No T/20180421/2129

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/04/2018 17:23	Vide Report No.:	Station Diary No.: 22
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Informant's Particulars

Name of Informant: RAJA MOHAN S/O MURUGESU KANAGARATNAM			Address: APT BLK 55 TELOK BLANGAH DRIVE #10-44 SINGAPORE 100055		
ID Type / ID No.: NRIC NO / S1404851J			Contact No.: Home/Office: Mobile: 93362355		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 57	Date of Birth: 17/10/1960	Type of Informant: Driver		
Race: Ceylonese			Language:		Institution / School Name:
Occupation: Programme Officer			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 21/04/2018 14:05	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 FORT ROAD				
Towards MCE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKE9760Z	Car	KIA	CERATO FORTE Koup 1.6 AT SX ABS D/AB SR	Red		0
SLB8135P	Car	HONDA	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR	Silver	Slightly Damaged	1

Sketch Plan Pg. 4



**SINGAPORE
POLICE FORCE**



T/20180421/2129

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

2 of 3

Report No T/20180421/2129

CONTINUATION OF REPORT

Brief Details.

On the above mentioned date, time and place, I was driving my car, bearing registration plate SLB8135P along Fort Road and turned into MCE. After turning, the cars in front of me slowed down because there was road work ahead. Then a car, bearing registration plate: SKE9760Z, came from the back and collided onto my car. The back bumper and the car boot of my car were dented. There was no injuries. The opposite party informed that he did not slow down enough which resulted in the collision. There was no visible damage on the car.

I wish to state that the report is also for insurance claim purpose.

Sketch Plan Pg. 5



**SINGAPORE
POLICE FORCE**



T/20180421/2129

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

3 of 3

Report No. T/20180421/2129

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
D /
Sgt 2 DANIEL HO WEI CONG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt TANG SIEW PING
Contact No.: 65476430

Signature Of Informant:

Date/Time:
21/04/2018 17:23

Classification Of Case:

Authentication Stamp

NP168



Signature

SN 045

Singapore Police Force