

REPAIRING OF
MOTOR VEHICLES,
PANEL BEATING,
WELDING, SPRAYING,
INSURANCE AGENT,
CLAIMS
DEALING IN 2ND
HAND VEHICLE.

速 良 摩 哆 SOC LEON MOTOR WORKS

AUTOBAY @ KAKI BUKIT
1 Kaki Bukit Ave 6, Blk D, #01-91, Singapore 417883
Tel: 6747 7858, 6747 2343 Fax: 6742 0012
E-mail: slmoi@singnet.com.sg
Reg No. 206639/00K

修理汽車貨車兼
打嗎甲燒杆噴漆
代理保險：車禍
賠償及買賣汽車

MS LYNETTE CHONG HUI FONG

DATE: 31/05/2018

DOA : 24/05/2018

ESTIMATE REPAIR FOR VEHICLE NO. SKZ 2030 H (HYUNDAI ACCENT)

	Description	List Price
1 pc	Rear bumper	\$ 460.00
1 pc	Rear bumper reinforcement	\$ 388.50
1 pc	Bumper bracket	\$ 98.80
2 pcs	Bumper side retainer @\$38.00	\$ 76.00
		\$ 1,023.30
	Less : 20%	\$ (204.66)
		\$ 818.64
	<u>Special Nett Items</u>	
1 set	Reverse sensor	\$ 280.00
	To remove & fix reverse sensor	\$ 80.00
	To spray anti-rust	\$ 80.00
	Labour charges for knocking & replacing parts.	\$ 500.00
	Spraypainting	\$ 550.00
	TOTAL :	\$ 2,308.64

MSME19068249 / SME Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 25/05/2018 16:01
SUBMITTED BY: Farida Wen

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 25/05/2018 16:01
Date Of Accident 24/05/2018 19:20
Exact Location Of Accident HOUGANG AVE 2
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKZ2030H
Insured/Policyholder
Name Of Registered Owner CHONG HUI FONG LYNETTE
NRIC No S7136799A
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-96417978
Alternative Phone No OFFICE-96417978

Vehicle Particulars

Manufacturer HYUNDAI
Model ACCENT

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 AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number P1731860
Cover Note Number

Driver

Name of Driver CHONG HUI FONG LYNETTE
NRIC No S7136799A
Date Of Birth 18/10/1971
Occupation INDOOR
Date Of Driving Pass 25/06/1990
Driving Experience 27 YEARS AND 10 MONTHS
Gender FEMALE
Mobile Number (LOCAL) +65-96417978
Fax Number
Contact Number OFFICE-96417978
Email Address NOEMAIL

Address	BLK 668 HOUGANG AVE 8 #03-707
Postcode	530668
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?	
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: : UNKNOWN
	GENDER: : MALE

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

I WAS TRAVELLING ALONG ANG MO KIO AVE 3. I STOPPED AT THE GIVE WAY FOR ON COMING VEHICLE BEFORE I COULD MOVE OUT. I HEARD A BANG AND THE VEHICLE BEHIND ME HIT THE REAR OF MY CAR.

Attachment(s)

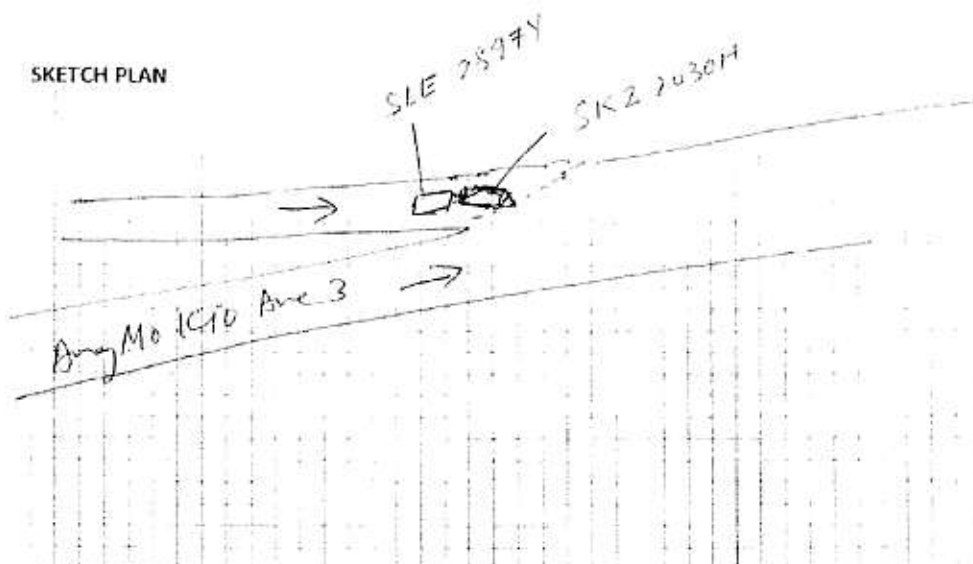
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLE2897Y
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	ONG ZHEN RU
NRIC/Passport Number	
Contact Number	88237655
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Ang Mo Kio Ave 3. I stopped at the 'give way' for an oncoming vehicle before I could move out. I heard a bang and the vehicle behind me hit the rear of my car.

DECLARATION

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

Policyholder's Signature,

Date & Time: 20/5/2018

Driver's Signature _____

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GIARMIC SketchPlanForm_V3

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