## **VIN'S MOTOR PTE LTD**

160 Sin Ming Drive, Sin Ming AutoCity, #03-03, Singapore 575722. Tel: 6453 2121 (4 Lines) Fax: 6459 9795

Our Ref : TP/062018/3594 Tax Invoice :

Accident date: 2/6/2018

Your Ref : SLV515Z Date : 4/6/2018

MOTOR CLAIM DEPARTMENT AXA INSURANCE (S) PTE LTD 8 Shenton Way #27-01 AXA Tower Singapore 068811

## ESTIMATE COST OF REPAIRS TO HONDA SHUTTLE SLV2518C

1	pc	Rear windscreen moulding	\$ 120.10
1	pc	Rear boot cover	\$ 1,193.00
2	pcs	Rear boot cover hinge @ \$40.80/pc	\$ 81.60
2	pcs	Rear boot cover shocker bracket @ \$165/pc	\$ 330.00
1	pc	Rear boot cover lock	\$ 157.10
1	pc	Rear boot cover lock motor	\$ 490.00
2	pcs	Rear boot cover reflector @ \$395/pc	\$ 790.00
2	pcs	Rear boot cover number plate lamp @ \$38.50/pc	\$ 77.00
1	pc	Rear boot cover moulding	\$ 383.40
1	pc	Rear boot cover "Shuttle" name plate	\$ 55.00
1	pc	Rear boot cover emblem	\$ 38.00
1	pc	Rear boot cover inner trim	\$ 320.90
1	pc	Rear boot cover rubber	\$ 168.50
1	pc	Rear lamp @ \$520.60/pc	\$ 1,041.20
1	pc	Rear end panel	\$ 560.80
1	pc	Rear end panel inner trim	\$ 251.40
1	pc	Rear tool box	\$ 587.30
1	pc	Rear spare tyre panel	\$ 1,980.00
1	pc	Rear spare tyre panel top cover	\$ 585.50
1	pc	Rear bumper	\$ 1,150.60
1	pc	Rear bumper sponge	\$ 170.60
2	pcs	Rear bumper side retainer @ \$26.50/pc	\$ 53.00
2	pcs	Rear bumper reflector @ \$45.20/pc	\$ 90.40
2	pcs	Rear fender inner trim @ \$489.60/pc	\$ 979.20
1	pc	Rear exhaust silence	\$ 745.70
			\$ 12,400.30
		Less: 20%	\$ (2,480.06)
			\$ 9,920.24

# **VIN'S MOTOR PTE LTD**

160 Sin Ming Drive, Sin Ming AutoCity, #03-03, Singapore 575722. Tel: 6453 2121 (4 Lines) Fax: 6459 9795

Our Ref	: TP/062018/3594	Page 2	
	Balance b/d		\$ 9,920.24
1 pc	Rear windscreen gum		\$ 60.00 N
1 set	Rear bumper sensor		\$ 280.00 N
	To remove and refix rear glass		\$ 150.00
	To repair rear damage		\$ 1,400.00
	To spray painting		\$ 1,200.00
			\$ 13,010.24

**VIN'S MOTOR PTE LTD** 



#### 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.

aforesaid	
	ACCIDENT STATEMENT
Date Of Report	02/06/2018 10:43
Date Of Accident	02/06/2018 09:00
Exact Location Of Accident	TOA PAYOH LORONG 6 SLIP ROAD TO PIE
Country/State of Loss	SINGAPORE
The Research of the Party of th	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLV2518C
Insured/Policyholder	
Name Of Registered Owner	LOW YONG YEE, EUGENE
NRIC No	S8848803B
Email Address	EUGENELOWYY@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97329772
Alternative Phone No	OTHERS-97329772
Vehicle Particulars	
Manufacturer	HONDA
Model	SHUTTLE
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00441073
Cover Note Number	
Driver	
Name of Driver	LOW YONG YEE, EUGENE
NPIC No.	C9949902D

 NRIC No
 \$8848803B

 Date Of Birth
 06/12/1988

 Occupation
 INDOOR

 Date Of Driving Pass
 02/05/2009

Driving Experience 9 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-97329772

Fax Number

Contact Number OTHERS-97329772

EMail Address EUGENELOWYY@HOTMAIL.COM

**BLK 258 KIM KEAT AVENUE** Address

#09-34

Postcode 310258

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

NO

NO

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions **RAINING** Road Surface WET

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?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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?

If Yes, against whom?

**Circumstances of Accident** 

REFER ATTACHED

Attachment(s)

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

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SLV515Z

Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR Name of Driver TAN MIN HER NRIC/Passport Number S8107614F Contact Number 93673312

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan Pg. 1

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

- I. 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
- Any false reporting may be referred to the Police for investigation.
- 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)

Lunderstand, acknowledge, agree and consent that:

- 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)
  - (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
- (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.
- 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: 2/6/18 10-25am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

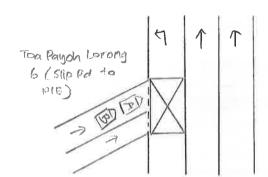
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

## Sketch Plan #2 Pg. 1

#### SKETCH PLAN



A: SLV2518C

B: SLVSISZ

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- 011	02/06/2018, at about 09:00 am, I was driving along n
Payon (	orong 6 (Slip rd to PIE). My vehicle was at the
give - wa	y lane, was walting for the vehicle to pass before I
proceed.	Out of the sudden, I felt an impact and realised
that th	ne venicle SLV5152 had hit my vehicle's rear portion
That's a	q() .

DECLARATION

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

Policyholder's Signature

Date & Time: 2/6/18 10.25am

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:



Contact us at

Hotline: (65) 6532 2888 E-mail: CustomerServica@DirectAsta\_com

## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 139) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1950 (Singapore) Road Transport Act, 1987 (Malaysia)

Motor Vahicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the data is shown here need to be amended or updated.

Certificate No. MT/00441073

Type of Coverage / Driver Plan Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. SIV25187 Chassis No.

GK81200459

2) Name of Policy Holder Low, Yong Yee Eugene

3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act 25/12/2017 12:17

4) Date/Time of Expiry of Insurance 1) 25/12/2013 23:59

5) Persons or Classes of Persons Entitled to Drive

(a) The Insured

Any named person under the policy who is driving on the Insured's order or with his permission.

(a) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Insured's order or with his permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use'

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.

Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured Market Value Own Damage Excess S\$ 800.00 (before any applicable GST) Windscreen Excess

S\$ 100.00 (before any applicable GST) Choice of workshop My Workshop/ My Authorised Distributor Workshop

Finance company / Hire Purchase

Main driver Low, Yong Yee Eugene

Named driver None

Important Note: This policy does not cover drivers below the age of 30 and drivers who hold a valid driving licence of less than 2 years with the exception of the named drivers above.

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 the Road Transport Act, 1987 (Malaysia).

Issued on:

02/01/2018

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer

#### Register New Vehicle

#### er New Vehicle (Acknowledgement) cle Particulars

ehicle No .:

SLV2518C

Vehicle Type:

P11 - Passenger Station

Wagon/Jeep Land Rover

Vehicle Attachment 1:

No Attachment

Vehicle Attachment 2:

Vehicle Make:

HONDA

Petrol

1496 cc

1130 kg

26 Dec 2017

Black

2017

\$7,472.00

Singapore NRIC.

538488038

258

310258

\$38,200.00

LOW YONG YEE, EUGENF

2018010101003154C / 25 Dec 2027

A - Car up to 1600cc & 97kW (130bhp)

20171226173713027146

Yes

Chassis No:

GK81200449

Motor No..

Propellant:

Engine Capacity:

Maximum Power Output: 97.0 kW (130 bhp)

Unladen Weight:

Primary Colour:

First Registration Date:

Manufacturing Year:

PARF Eligibility:

No. of Transfers:

Actual ARF Paid:

Owner Particulars

Owner Name:

Owner ID Type:

Owner ID: Registered Address Type: HDB/HUDC

Registered Block/House

No.:

Registered Street Name: KIM KEAT AVENUE

Registered Unit No.: # 09 - 34 Registered Building Name: -

Registered Postal Code:

COE No. / Expiry Date:

COE Bid Category:

QP Paid:

**Transaction Details** 

Business Transaction Ref.

No.:

Business Transaction Date: 26 Dec 2017

Business Transaction Time: 17:37:13

Message

The above vehicle has been successfully registered.

Please note that \$469.00 will be deducted from your GIRO account.

Vehicle Scheme

Mormal

Vehicle Attachment 3:

Vehicle Model

SHUTTLE 1.5G CVT ABS D/AIRBAG

2WD5DR

Engine No..

L15B5460563

Trailer Chassis No..

Passenger Capacity;

Power Rating:

Maximum Laden Weight: 1405 kg

Secondary Colour:

Original Registration Date: 26 Dec 2017

Open Market Value:

\$17,472.00

Minimum PARF Benefit: \$3,736.00

Additional Registration

Fee Rate:

First \$17,472.00 (100%)