SPECIALISTS MOTOR PTE LTD

Block 3018A, Ubi Road 1, #01-24-26, Singapore 408711 Tel: 67472112 (5 lines) Fax: 67438032 Email: cardoc@singnet.com.sg

Bus. Reg No: 199502604 E GST No: 19-9502604-E

SM/SJM3409Z/1801005

23rd July 2018

The Manager Motor Claim Department Great American Insurance Company 3 Temasek Avenue #16-01 Centennial Tower Singapore 039190

Date of Accident

22nd July 2018

Location

Bishan Street 21

Name of Policyholder

Lim Yew Jian

Policy No Vehicle No MOMVP000003421-00-000

: SJM 3409 Z Mazda Roadster

Estimated Cost plus/ Supply of Parts & Labours

No.	Particulars	Qty	<u>Price</u>	A	Amounts
1	Front bumper fascia	1	600.00	\$	600.00
2	Front bumper clips	1set	30.00	\$	30.00
3	Front bumper side retainer L&RH	2	45.00	\$	90.00
4	Front bumper sponge	1	55.00	\$	55.00
5	Front bumper towing cover	1	30.00	\$	30.00
6	Front bumper fog lamp cover L&RH	2	30.00	\$	60.00
7	Front bumper centre grille with chrome	1	600.00	\$	600.00
8	Front bumper emblem (logo)	1	18.00	\$	18.00
9	Headlamp assy L&RH	2	420.00	\$	840.00
10	Front bumper reinforcement beam	1	290.00	\$	290.00
11	Front fender cowling LH (front)	1	80.00	\$	80.00
12	Front fender cowling LH (rear)	1	160.00	\$	160.00
13	Front fender cowling clips	1set	25.00	\$	25.00
14	Front support panel	1	350.00	\$	350.00
15	Fuse box assy	1	275.00	\$	275.00
				\$	3,503.00
		Cost Plus	10%	\$	350.30
				\$	3,853.30

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Balance b/f	\$ 3,853.30
Labour Charges:- Cut out, renew, knocking & welding front bonnet, front fender LH, chassis pillar LH, remove & install all damage parts, straighten front chassis & re-align body	Amounts \$ 1,380.00
Remove & install air con system, vacuum & top up gas	\$ 120.00
Spray painting on damage parts	\$ 1,480.00
Check all lighting after repairs	\$ 40.00
Labour Charge	\$ 3,020.00
Total Amount	\$ 6,873.30

GST will be reflected in the final bills.

Notes: -Please inform us within 14 days, from the date of this letter, in the event that the owner/driver is in breach of its policy with your company, failing which we shall hold your company liable for all costs of repairs, loss of use and storage.

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 <u>truthful and accurate</u> 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.

	ACCIDENT STATEMENT
Date Of Report	23/07/2018 15:43
Date Of Accident	22/07/2018 12:00
Exact Location Of Accident	BISHAN STREET 21
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJM3409Z
Insured/Policyholder	
Name Of Registered Owner	LIM YEW JIAN
NRIC No	S0017425D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90123036
Alternative Phone No	OTHERS-90123036
Vehicle Particulars	
Manufacturer	MAZDA
Model	ROADSTER
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MOMVP000003421-00-000
Cover Note Number	
Driver	
Name of Driver	LIM ZHI ZONG, NICHOLAS
NRIC No	S8850346E
Date Of Birth	03/12/1988
Occupation	OUTDOOR
Date Of Driving Pass	20/10/2007

Driving Experience 10 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90123037

Fax Number

Contact Number

EMail Address LIM.NICHOLAS@ICLOUD.COM

Address 24 BRIGHTON AVENUE

Postcode 559259

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions DRY Road Surface

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 YES

Was any other material or property damaged?

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

Number of Passengers (Including Driver)

NO

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

VEHICLE B (SLT7573U) SLOWED DOWN TO TURN LEFT INTO GATE THAT WAS NOT OPEN. I TRIED TO STOP AND MANAGED TO SWERVE A BIT TO THE RIGHT AND ACCIDENTALLY COLLIDED INTO THE VEHICLE B (SLT7573U) REAR RIGHT.

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 SLT7573U Vehicle Make/Model/Colour **BMW**

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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- 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.
- 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.

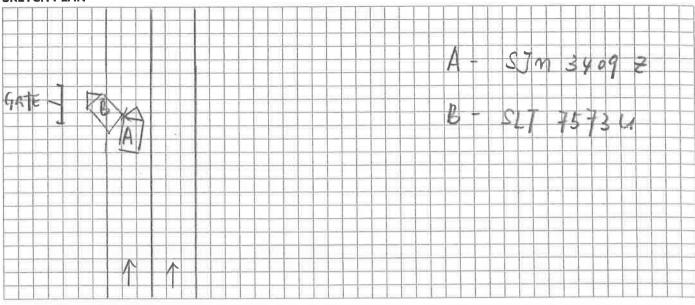
Policyholder's Signature Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 23/7/8 4PM

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

18hi Clu	B (SLT 75734) Slowed down to tum left into sate that
70711 00	Beder 15/547 Speak town to turn with the day
ひと	not open. I tried to stop and managed to shere a bit
to the	not open. I tried to stop and wanted to shere a bit right and accidentary colliced into the relych &
COLT	7573 U) rear right

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: 23/7/18 HPM



Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:



GREAT AMERICAN INSURANCE COMPANY

UEN: T15FC0029B GST REG. NO.: M90370081T 3 TEMASEK AVENUE, #16-01 CENTENNIAL TOWER SINGAPORE 039190

TEL: +65 6804 6000 FAX: +65 6235 2616

CERTIFICATE OF INSURANCE

- Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
 - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
 - Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

Policy Details

Certificate Number

MOMVP000003421-00-000

Cover

: Private Car (Comprehensive)

Policyholder Name

Lim Yew Jian

Chassis Number

NCEC202157

NCD Entitlement

50% No Claim Discount

Engine Number

: LF10310779

Hire Purchase

N/A

Registration Number

SJM3409Z

Period of Insurance

From 23/01/2018 (00:00) To 22/01/2019 (23:59) (Both Dates Inclusive)

Persons or Classes of Persons entitled to Drive

- The Policyholder a)
- b) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor or so has been Vehicle permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle

Limitations as to Use

Use only for social, domestic and pleasure purposes and for Policyholder's business

This Policy does not cover:

- Use for Hire and Reward a)
- Use for racing, pace making, reliability trial or speed testing b)
- Use for carriage of goods (other than samples) in connection with any trade of business c)
- Use for any purpose in connection with Motor Trade d)
- * Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987(Malaysia), are not to be included under these headings

Excess (Section 1)

SGD 1,500.00

SGD 100.00

Workshop

Authorised Workshop

Off Peak Car

Excess (Section 2) Windscreen Excess

N/A

NCD Protection

Nο No

ADDITIONAL EXCESS

Please refer overleaf

Driver Details

Main Driver

Lim Yew Jian

Named Driver 1

Lim Zhi Zong, Nicholas

Named Driver 2

Goh Maggie

Named Driver 3

Name of Intermediary

Lim Zhenmin, Germaine

Alpine Insurance Agency Pte Ltd

Date of Issue

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Signed for and on behalf of

Great American Insurance Company

Authorised Signatory

mlow

