

**ETHOZ AUTOMOTIVE
SOLUTIONS LTD
22 TAMPINES STREET 92
SINGAPORE
528876**

Claim Reference:
Assessment Number: BK000027
Version: ETHOZASL/1
Date Calculated: 01/08/2018 08:26

Full Report - V1
Registration: GBF5534M
Printed: 01/08/2018 15:27

Summary Information

Claim

Location:	Singapore (SG)	Currency:	SGD
Printed by:	Ng Boon Kai	Date of Incident:	24/07/2018
Authorisation Status:	Interim	Able to Authorise Repairs:	TBA
Work Provider:	AXA Insurance S'pore Pte Ltd	Repairs Authorised:	TBA
Claim Reference:		Estimated Repair Time:	
Policy Number:		Quote Due Date:	
Other Reference:		Actual Repair Days:	
Third Party:		Parts Ordered Date:	
Insured Amount:		Hire Car Start:	
Under Warranty:		Hire Car End:	
Warranty Expired:		Vehicle Collected:	

Vehicle Details

Vehicle

Manufacturer:	NISSAN
Model:	NV200
Sub Model:	BASE MODEL
Model Sheet Number:	Z89 01
Registration:	GBF5534M
Registration Month:	
Registration Year:	
VIN Number:	VSKYBAM20Z0139064
Odometer:	Not Known
Colour:	
Engine Number:	K9KC400D056301
Fuel Level:	%

Model Specs

AIR CONDITIONING	REAR SCREEN
FOG LAMPS	REAR WIPER
STANDARD EQUIPMENT	TYRES 175/70 HR 14
WHEELS 5.5J X 14	FULL WHEEL COVERS
PRODUCTION JAPAN	EMISSION STD EURO 5
TRANSPORTER	L/SLDG DOOR W/O GLAS
R/SLDG DOOR W/O GLAS	TWO COAT METALLIC
PREPARE OFF VEHICLE	

Vehicle Condition

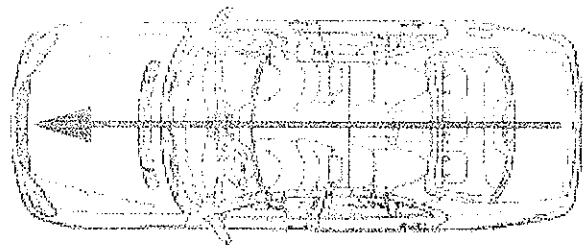
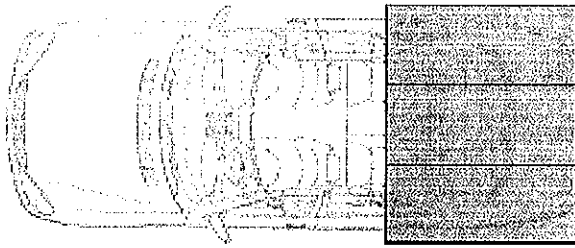
Vehicle Status

Pre-Accident Condition:	Severity of Impact:	
Steering:	Vehicle Status on Inspection:	
Brakes Pedal Travel:	Date of Inspection:	01/08/2018
Place of Inspection:		
Pre-Accident Damage:		
Tyres Condition:		
Tread Depth LHF:	Tread Depth RHF:	
Tread Depth LHR:	Tread Depth RHR:	
Damage Areas:	Direction of Impact:	

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Addresses

Cost Summary

Total Labour	\$499.50
Total Paint/Material	\$34.74
Total Parts	\$619.85
Total of Additional Costs	\$275.00
Excess:	TBA
Grand Total Exc GST:	\$1,429.09
7 % GST:	\$100.04
Grand Total Inc GST:	\$1,529.13

Repair Information

LABOUR

Time Basis 10 WU = 1 HR. Price/CL 1 = \$45.00/HR
Price/Dent = \$45.00/HR

Repair /

Guide Number Repair Details

	WU	Cost Price (\$)
NO NUMBER JOB ALLOWANCE	5.0	22.50
NO NUMBER R + R L/R UPPER LOCK CATCH	2.0	9.00
UM24A1 R + R TAILGATE SEAL	2.0	9.00
6770A4 R + R LEFT TAIL LAMP	1.0	4.50
UM28A1 R + R TAILGATE TRIM	2.0	9.00
UM30A1) R + R TAILGATE MOULDINGS	4.0	18.00
UT28A1 R + R MODEL BADGE	2.0	9.00
UT28A1 R + R MANUFACTURER BADGE	2.0	9.00
NO NUMBER R + R REAR NUMBER PLATE	1.0	4.50
UM18A1) R + R L/UPPER WING DOOR LOCK	1.0	4.50
UM18A1) R + R L/LOWER WING DOOR LOCK	1.0	4.50
UM18A1) R + R WING DOOR LOCK	1.0	4.50
6611A4 R + R REAR BUMPER CPL	5.0	22.50
5010A4 RENEW REAR BUMPER (REMOVED)	1.0	4.50
NO NUMBER R + R REAR BUMPER ABSORBER	1.0	4.50
NO NUMBER R + R L/R INNER BUMPER CARRIER	2.0	9.00
NO NUMBER R + R R/R INNER BUMPER CARRIER	2.0	9.00
NO NUMBER R + R L/R LOWER LOCK CATCH	2.0	9.00
1406 REMOVE GLASS SPLINTER	20.0*	90.00
2696 REMOVE AND REFIT PARKING HELP SYSTEM	10.0*	45.00
2711 REPAIR REAR CLOSING PANEL	10.0*	45.00

LABOUR COST

Total Work Units	77.0	
Corrosion Protection External Labour	0.0HRS	0.00
Corrosion Protection Internal Labour	0.0HRS	0.00
Sub Total	7.7HRS	\$346.50
Paint Labour	3.4HRS	\$153.00
Total Labour	11.1HRS	\$499.50

Audatex System Using Manufacturer Times

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PAINT WORK		Time Basis 10 WU = 1 HR. Price = \$45.00/HR	
Guide Number	Description	WU	Cost Price (\$)
	- TWO COAT METALLIC - PREPARE OFF VEHICLE		
2711	REAR CLOSING PANEL REPAIR PAINTING <50%	9.0	
	LABOUR COST - PAINT		
	TIME(PAINT)	9.0	
	Preparation Work Multi Layer Paint	0.0	
	Total Work Units (10WU/HR)	34.0	
	Total Paintwork Labour	3.4HRS	\$153.00
	MATERIAL COST - PAINT		Cost Price
	Repair Painting		\$6.14
	Total Excluding Pearlescent Uplift		\$34.74
	Pearlescent Uplift @ 0.0%		\$0.00
	Total Paint Material Cost		\$34.74

PARTS

Guide No. Qty		Description	Part Number	Supplier	Price Valid: 01/06/2015	
					Bet.	Price (\$)
3017	1	BADGE MODEL	90895 JX00A		0%	50.00*
2631	1	L/R BUMPER SUPPORT	85229 BJ00A		0%	22.00*
3015	1	MANUFACTURER BADGE	90890 JX00A		0%	50.00*
2632	1	R/R BUMPER SUPPORT	85228 BJ00A		0%	22.00*
2581	1	REAR BUMPER	H5022 3LGEH		0%	320.00*
2644	1	REAR BUMPER DAMPER	85090 JX00A		0%	55.00*
2650	7	RR BUMPER CLAMP KIT	01553 05933		0%	20.00*
f: OEM Parts			Sub Total			\$539.00
g: Original			Mark Up From Cost	(15 %)		\$80.85
h: Secondhand			Total Parts			\$619.85
p: Parallel						
x: Exchange						

NB - COLOUR CODED ITEMS/TRIM - PART NUMBERS MAY DIFFER

Extras

Description	Betterment	Price
REVERSE SENSOR SPECIALIST	0%	\$200.00
WINDSCREEN SPECIALIST		\$60.00
SEALANT		
LTA STICKER (70KM) SPECIALIST	0%	\$15.00
Total Extras		\$275.00

Final Calculation

Total Parts	\$619.85
Labour	
Total Panel/Mechanical	\$346.50
Total Paintwork	\$153.00
Total Labour	\$499.50
Additional Costs	
Corr Prot Materials External	\$0.00
Corr Prot Materials Internal	\$0.00
Cost of Specialist	\$275.00
Total of Additional Costs	\$275.00

Audatex System Using Manufacturer Times

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Total Paint/Material Costs

\$34.74

Grand Total Excludes GST

\$1,429.09

GST @ 7 %

\$100.04

Grand Total Includes GST

\$1,529.13

Assessment Notes

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	24/07/2018 16:13
Date Of Accident	24/07/2018 08:55
Exact Location Of Accident	ALONG NEWTON CIRCUS ROUNDABOUT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF5534M
Insured/Policyholder	
Name Of Registered Owner	ETHOZ GROUP LTD
Co Reg No	198104531H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66547777

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200-1.5 (A)

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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	D17MTHCVE000151
Cover Note Number	01/01/2018-31/12/2018

Driver

Name of Driver	MUHAMMAD REJAB BIN KHAMIS
NRIC No	S8114987I
Date Of Birth	27/05/1981
Occupation	OUTDOOR
Date Of Driving Pass	18/05/2005
Driving Experience	13 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96550675
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 16 JLN TENTERAM 04-102
Postcode	321016
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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)	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

REFER TO SKETCH PLAN

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	SLM1907S
Vehicle Make/Model/Colour	BMW
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHRISTINE TAN
NRIC/Passport Number	
Contact Number	90049218
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

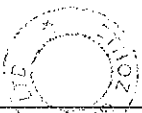
SKETCH PLAN

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.**
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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:

we

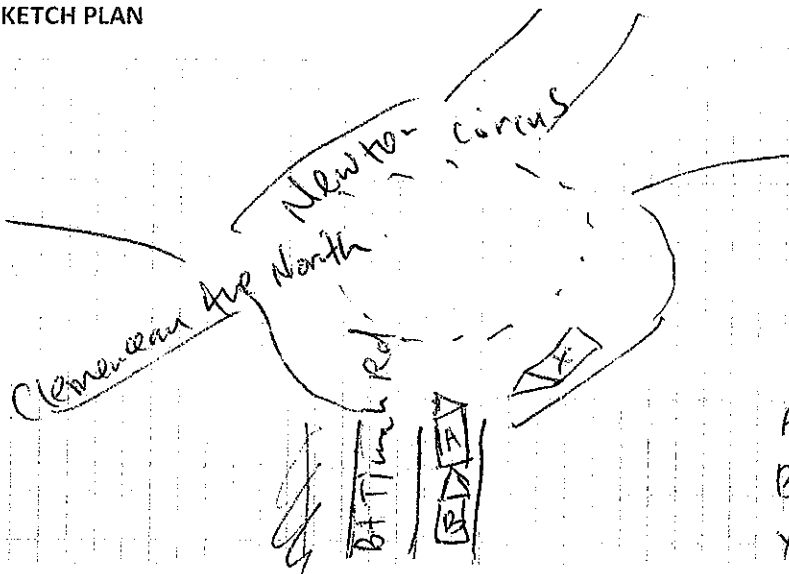
Driver's Signature
(If driver is not the policyholder)
Date & Time:

24/7/18

[Signature]

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

SKETCH PLAN



A - GBF5534M
B - SLM1907S
X - Incoming Vehicle

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24/7/18 at about 8:55am, I was driving company rented van, GBF5534M for work purposes, along Bukit Timah Road towards Newton Circus. While entering Newton Circus, I had indicated forward to turn into Newton Circus as there is an incoming vehicle on my right, I had stopped to give way to the said car. Right after I had stopped, a car, (SLM1907S) had failed to stop on time and had collided into the rear portion of the van that I was driving. I then proceed to turned into Clemenceau Ave North and stopped to asses the extend of damage. Shortly after, car, (SLM1907S) stopped infront of my van with female driver, Christine Tan alighting from the driver side. We had exchanged contact details. No one was injured. Damage to the van rear left bottom door dented & rear bumper scratched.

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

<input type="checkbox"/>	Reporting Only
<input type="checkbox"/>	Claim OD
<input checked="" type="checkbox"/>	Claim TP
<input type="checkbox"/>	Claim OD / TP at other workshop

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: *Suhelmi*
NRIC/FIN No.:

24/7/18