



KAH MOTOR CO. SDN. BHD.
 (A Member of the Oriental Holdings Berhad)
 Service and Body Repair
 Tel: +65 6841 3838 Website: www.honda.com.sg
 For 24-hours Roadside Assistance, Call 98203838

*Kindly Help to arrange
 Surveyor to survey this
 Vehicle thanks*

QUOTATION

GST Reg No.: M200050223
 Company Ref. No.: S60FC1380G

Customer	: FWD INSURANCE (S) PTE LTD 6 TEMASEK AVENUE #18-01 #18-01 SINGAPORE 038986	Document No.	: SQT18003292	Page	1
Registration No	: SLW3342E	Date	: 7. Aug 2018	Customer No.	: WZF001
Chassis No	: MRHFC5650HT000878	Svc Advisor	: LIM CHOU SIONG	Engine No	: R16B22001335
Model	: CIVIC 1.6 VTI YM2017	Date Time	: 7. Aug 2018 10:42:08 AM	Surveyor Name	:
Owner's Name	: TEO CHUN CHENG	Survey Date	:	Authorisation Date	:
Ins Policy No.	:				
Date of Accident	: 4/8/2018				

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
	TP DIRECT SETTLEMENT (J/NO:) OWNER: TEO CHUN CHENG OWNER INSURER: AVIVA LTD ACC DATE: 4/8/2018 SURVEYED BY: DATE: REF NO: TP INSURER: FWD INSURANCE (S) PTE LTD TP VEH: SJQ4608M						
67010-TEA-T00ZZ	PANEL COMPR.FR.DOOR	1	761.40	25	571.05	39.97	611.02
72425-TBA-A01	MOLDING ASSYR.FR.DOOR SASH	1	25.80	25	19.35	1.35	20.70
72828-TEA-T01	SEALRR.DOOR LOWER	1	6.10	25	4.57	0.32	4.89
					Sum Item	594.97	41.64
							636.61
BOMISC1	REPLACE FR R DOOR, REPAIR RR R DOOR & OTHER DAMAGE	1	1200.00		1200.00	84.00	1284.00
BP02R	SPRAY PAINTING ON FR R DOOR & RR R DOOR	1	1000.00		1000.00	70.00	1070.00
					Sum Labor	2200.00	154.00
							2,354.00

Survey By	_____	<i>C S Lim</i> <i>81006303 (HP)</i>	Total Amount	2,794.97	195.64	2,990.61
Date & Time	_____		Total (Inclusive of GST)			2,990.61
Excess	_____					
Status	_____					
Signature	_____					

Printed on 7/8/2018 7:04:28 PM

This is a computer generated invoice. No signature is required.
 Part prices are subjected to change without notice.
 The above estimated cost of repair do not include any unforeseen damages.
 GST Amount is calculated from individual line(s)

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	05/08/2018 12:25
Date Of Accident	04/08/2018 17:20
Exact Location Of Accident	ADMIRALTY PARK CP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW3342E
Insured/Policyholder	
Name Of Registered Owner	TEO CHUN CHENG
NRIC No	S7821549F
Email Address	CTEO@ME.COM
Mobile Phone No	(LOCAL) +65-87786502
Alternative Phone No	OFFICE-87786502

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC 1.6
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10811659
Cover Note Number	

Driver

Name of Driver	TEO CHUN CHENG
NRIC No	S7821549F
Date Of Birth	03/08/1978
Occupation	INDOOR
Date Of Driving Pass	02/01/1998
Driving Experience	20 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87786502
Fax Number	
Contact Number	OFFICE-87786502
EMail Address	CTEO@ME.COM

Address	46 MARINE CRESCENT #17-50
Postcode	440046
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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

I parked my vehicle in an allocated lot and upon going back towards my vehicle, I saw my right side of my doors damaged and scratched. Suddenly there was a man approached me and admitted that he had reversed and hit onto my vehicle. We exchange particulars Not injury involved.

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	SJQ4608M
Vehicle Make/Model/Colour	KIA / PICANTO 1.1(M) / BLACK
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MOHAMMED EDHAMIRZA BIN HAMWAL
NRIC/Passport Number	S7526540I
Contact Number	91833460
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

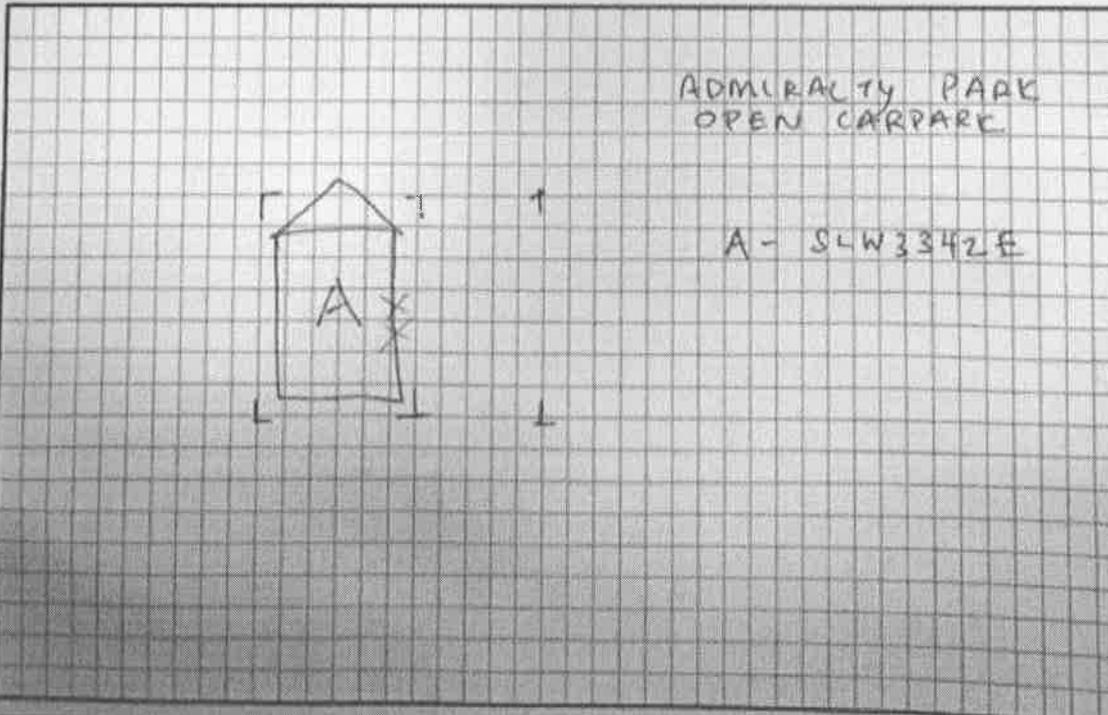
1. Please report correctly the details of the accident to speed up the claims process.
 2. This Form must be completed by the Policyholder and/or the Authorized Driver.
 3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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 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 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.
- 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 be 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 be 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 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.

Helf 5/02/2018

VERIFIED BY AJAX MARS
REPORTING OFFICER
Mohammad Azaly Bin Abdullah

Policyholder's Signature / Date & Time Driver's Signature (if driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel

Sketch Plan



ACCIDENT STATEMENT (2000 characters)

I parked my vehicle in an allocated lot and upon going back towards my vehicle, I saw my right side of my doors damaged and scratched. Suddenly there was a man approached me and admitted that he had reversed and hit onto my vehicle.

We exchange particulars

Not injury involved.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
MOHAMMAD AZALY BIN ABDULLAH

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

5 August 2018 at 11:28 AM

Date/Time:

5 August 2018 at 11:28 AM



Aviva Ltd, 4 Shenton Way, #01-01 SGX Centre 2, Singapore 068807 Tel: (65) 6827 9966 www.aviva.com.sg

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION
(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

CERTIFICATE NUMBER, 10811659

**1) VEHICLE REGISTRATION NO.
CHASSIS NO.
ENGINE NO.**

SLW3342E
MRHFC5650HT000878
R16B22001335

2) NAME OF INSURED

FAMILY NAME
GIVEN NAME

TEO
CHUN CHENG

**3) EFFECTIVE DATE OF COMMENCEMENT OF INSURANCE FOR THE
PURPOSE OF THE ACT**

07-Feb-2018 00:00hours

4) DATE OF EXPIRY OF INSURANCE

06-Feb-2020 23:59hours

5) PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE

Any driver

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

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been canceled at the time of accident or loss.

Please refer to the policy document for full terms and conditions.

6) LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

** 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.*

NAMED DRIVER

7) FINANCE COMPANY

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 Part IV of the Road Transport Act, 1987 (Malaysia), or any amendment, act or acts passed in substitution thereof.

Issued in Singapore: 09-Feb-2018 at 15:18hours

Aviva Ltd.

IMPORTANT NOTE:

- If you want to cancel your policy at any time, you will need to return the certificate to us.
- You MUST report all accidents to Us within 24 hours of the occurrence regardless of whether You intend to claim on Your own policy or not, or whether Your car is damaged or not. Should You fail to do so, Your No Claims Discount could be affected and Your claim may be prejudiced.

Nishit Majmudar
Chief Executive Officer

In case of accident or windscreen damage, please call 6333 2222 (24 hours) immediately.

ORIGINAL

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7821549F




Name
TEO CHUN CHENG
(ZHANG JUNQING)
張俊清

Race
CHINESE

Date of birth
03-08-1978

Sex
M

Country of birth
SINGAPORE

S7821549F

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7821549F



Name
TEO CHUN CHENG (ZHANG JUNQING)
張俊清

Birth Date: 03 Aug 1978

Issue Date: 16 Dec 2002

1000023156E

4441794



NRIC No. S7821549F



Date of issue
05-08-2009

APT BLK 46 MARINE CRESCENT #07-50
SINGAPORE 440046
NRIC No: S7821549F Date: 01/03/2018

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	02 Jan 1998

NP 428A

Licence No: S7821549F

