

**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

QUOTATION

GST Reg No.: M200050223

Company Ref. No.: S60FC1380G

Customer	: LAU KUM SENG 115 BUKIT MERAH CENTRAL #17-3767 SINGAPORE 150115	Document No.	: SQT18004385	Page	1
Registration No	: SFY7731A	Date	: 13. Oct 2018		
Chassis No	: JHMRC1890HC200813	Customer No.	: ****8936H		
Model	: ODYSSEY 2.4 EXV-S 17YM	Svc Advisor	: NG SIN HAI		
Owner's Name	: LAU KUM SENG	Engine No	: K24W72040272		
Ins Policy No.	:	Date Time	: 13. Oct 2018 1:23:26 PM		
Date of Accident	: 12/10/2018	Surveyor Name	:		
		Survey Date	:		
		Authorisation Date	:		

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
	TP DIRECT SETTLEMENT (J/NO:) OWNER:LAU KUM SENG OWNER INSURER:AVIVA ACC DATE:12/10/2018 SURVEYED BY: DATE: REF NO: TP INSURER: TP VEH:SHA2611Z						
04711-T6A-900ZZ	FACE,FR.BUMPER	1	686.20	25	514.65	36.03	550.68
71117-T6A-921ZA	SPOILER ASSYL.FR.SIDE	1	92.50	25	69.37	4.86	74.23
71198-T6A-003	SPACERL.FR.BUMPER SIDE	1	11.60	25	8.70	0.61	9.31
91505-TM8-003	CLIPBUMPER	14	2.00	25	21.00	1.47	22.47
60260-T6A-300ZZ	FENDER COMPL.FR.	1	537.80	25	403.35	28.23	431.58
73370-T6A-315	GLASS ASSYL.FR.CORNER	1	361.40	25	271.05	18.97	290.02
BO-WS-SEALANT	WINDSCREEN SEALANT (N)	1	60.00		60.00	4.20	64.20
76251-T6A-J01ZA	CAPL.SKULL	1	64.70	25	48.52	3.40	51.92
76252-T6A-J01ZA	COVER RH-LBASE	1	27.90	25	20.92	1.46	22.38
76258-T6A-Q03	SET,RH.L.MIRROR ASSY	1	1275.90	25	956.92	66.98	1023.90
67050-T6A-000ZZ	PANEL COMPL.FR.DOOR	1	877.70	25	658.27	46.08	704.35
67550-T6A-J00ZZ	PANEL COMPL.SLIDE DOOR	1	980.90	25	735.67	51.50	787.17
04646-T6A-J21ZZ	PANEL SET,L.RR.OUTER	1	974.50	25	730.87	51.16	782.03
04715-T6A-900ZZ	FACERR.BUMPER	1	557.20	25	417.90	29.25	447.15
71598-T6A-003	SPACERL.RR.BUMPER SIDE	1	18.70	25	14.02	0.98	15.00
91505-TM8-003	CLIPBUMPER	7	2.00	25	10.50	0.74	11.24
42700-T6A-T81	WHEEL,DISK ALUMINIUM 17X7J	2	845.30	25	1267.95	88.76	1356.71
44300-T6A-J51	BEARING ASSYFR.HUB	1	135.50	25	101.62	7.11	108.73
44600-T0B-A00	HUB ASSYFR.	1	183.50	25	137.62	9.63	147.25
42200-T6A-J51	BEARING ASSYRR.HUB UNIT	1	314.00	25	235.50	16.49	251.99
Sum Item					<u>6684.40</u>	<u>467.91</u>	<u>7,152.31</u>

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	SINGAPORE 150115	Svc Advisor	: NG SIN HAI		
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Owner's Name	: LAU KUM SENG	Survey Date	:		
Ins Policy No.	:	Authorisation Date	:		
Date of Accident	: 12/10/2018				

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
BOSUN	SUNDRIES	1	100.00		100.00	7.00	107.00
BML01I	INSPECT FR LIGHTING MECHANISMS & FOCUS	1	180.00		180.00	12.60	192.60
BOMISC1	RESET ALL SMART ENTRY FOR DOORS	1	380.00		380.00	26.60	406.60
BOMISC1	RESET, CALIBRATE AND ALIGN ALL CAMERA	1	560.00		560.00	39.20	599.20
BMU11R	REMOVE & REPLACE FR L UNDERCARRIAGE PARTS.(N)1		1120.00		1120.00	78.40	1198.40
BMU21R	REMOVE & REPLACE RR L UNDERCARRIAGE PARTS.(N)1		1120.00		1120.00	78.40	1198.40
BP06R	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS. (6P)	1	4000.00		4000.00	280.00	4280.00
BKBU01R	REMOVE & RENEW FR BUMPER AND ALL DAMAGED PARTS	1	4000.00		4000.00	280.00	4280.00
BG41D	REMOVE & INSTALL FR. L QTR GLASS.(N)	1	280.00		280.00	19.60	299.60
BODAMKIT	WINDSCREEN DAM KIT.	1	80.00		80.00	5.60	85.60
Sum Labor					<u>11820.00</u>	<u>827.40</u>	<u>12,647.40</u>
BO-WHEEL ALIGN X4	WHEEL ALIGNMENT X4	1	180.00		180.00	12.60	192.60
Sum Ext. Service					<u>180.00</u>	<u>12.60</u>	<u>192.60</u>

Survey By

Date & Time

Excess

Status

Signature

Total Amount 18,684.40 1,307.91 19,992.31

Total (Inclusive of GST) 19,992.31

Printed on 13/10/2018 1:42:50 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)



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. 10746199

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

SFY7731A
JHMRC1890HC200813
K24W72040272

2) NAME OF INSURED

FAMILY NAME
GIVEN NAME

LAU
KUM SENG

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

25-Apr-2017 00:00hours

4) DATE OF EXPIRY OF INSURANCE

24-Apr-2019 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

OCBC BANK LIMITED

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-May-2017 at 14:32hours

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 DRIVING LICENCE


Licence Number: **S1458936H**

Name: **LAU KUM SENG**

Birth Date: **20 Dec 1961**

Issue Date: **07 Oct 2003**

000895407A



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1458936H**

Name: **LAU KUM SENG**

刘锦成

Race: **CHINESE**

Date of birth: **20-12-1961**

Country/Place of birth: **SINGAPORE**

Sex: **M**




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9914668J**

Name: **LAU JING HAO, DILAN**

Birth Date: **27 Apr 1999**

Issue Date: **03 Oct 2017**

002730064H



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9914668J**

Name: **LAU JING HAO, DILAN**

刘敬豪

Race: **CHINESE**

Date of birth: **27-04-1999**

Country/Place of birth: **SINGAPORE**

Sex: **M**




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

Class 3 **Motor cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms**

PASS DATE: **19 Aug 1985**

Licence No: **S1458936H**

NP 428A

5278209

NRIC No. **S1458936H**

Date of issue: **11-03-2014**

Address: **APT BLK 115 BUKIT MERAH CENTRAL #17-3767 SINGAPORE 150115**



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

Class 3 **Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$**

EFFECTIVE DATE: **03 Oct 2017**

Licence No: **S9914668J**

NP 428A

5256498

NRIC No. **S9914668J**

Date of issue: **10-01-2014**

Address: **APT BLK 115 BUKIT MERAH CENTRAL #17-3767 SINGAPORE 150115**



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 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.
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	13/10/2018 12:13
Date Of Accident	12/10/2018 21:35
Exact Location Of Accident	CTE TOWARDS AYE BEFORE HAVELOCK EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFY7731A
Insured/Policyholder	
Name Of Registered Owner	LAU KUM SENG
NRIC No	S1458936H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96440373
Alternative Phone No	OFFICE-96440373

Vehicle Particulars

Manufacturer	HONDA
Model	ODYSSEY-2.4 (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	PRIVATE CAR

Insurance Company

Name of Insurance Company	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	LAU JING HAO DILAN
NRIC No	S9914668J
Date Of Birth	27/04/1999
Occupation	INDOOR
Date Of Driving Pass	03/10/2017
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96440373
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	SIN
Postcode	
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

Type Of Accident	SIDE SWIPE
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

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA2611Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

Vehicle No _____

SKETCH PLAN

Annex D

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 frankful 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.
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 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.
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 making 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/postal 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Please continue to Annex E.

Vehicle No _____

Annex E

Describe Circumstances of the Accident

I was travelling along CTE towards AVE. While driving in my lane, vehicle B ~~can~~ change lane and hit onto my vehicle A. My left portion of the vehicle A are damaged due to the accident.

You had been advised by the 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.

Declaration

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

Witnessed by Reporting Centre Personnel