

ESTIMATE

Company Reg No: 196400304H GST Reg No. MR-8500111-X

Invoice:			
HIVUIGE.	Ivanic	υг	1001600

Owner Name & Vehicle Info

Mr IYN Sarma

Blk 5 Normanton Park

#07-101

Singapore 119002

Reg No/Reg Date

SJA9340K

/ 27/12/2007

Date In/Mileage

/ 0

Chassis No

WDB21104128250914

Engine No

27195630978103

Contact No

Mobile: 96835750

Make/Model

MB/E 200 (New Generation)

Account No	Terms	Date/Time Printed	CSE	Operator		WIP No		
CSM00061	Cash	07/11/2018/ 16:10		465 / Tay Jian Ye		22917		
····		Description of Good	ls./ Services		Qty	Unit Price	Disc%	Amount
M SUNDRY								1371.30
A211 880	Q7. 40 BU	MPER REAR TRIM						
M SUNDRY								41.36
	19 21 RE	TAINER LH						41.36
M SUNDRY	E 20 21	DETÁTUED DU						41.30
M SUNDRY	2 70 ST	RETAINER RH						220.6
	-O1 O3 CA	RRIER REAR TRIM						
M SUNDRY	dr op cu	INCIENT NEAR THEFT						185.96
	02 21 CH	ROME TRIM CENTRE						
M SUNDRY		Contraction of Contraction	[7]	The state of the s	wer.			131.72
A211 885	27 21 CH	ROME TRIM LH	7035P	I ma	IE		1	
M SUNDRY		\$ 1	Same and the same		\$ {	2		131.3
and the second second	28 21 CH	ROME TRIM RH	2) (La & Marie Company	r		863.0
M SUNDRY								263.8
	0 18 14 0	ROSSMBER END PANEL						576.0
M SUNDRY		ACCREMICE (DETREAGEE	ICNT\					370.0
	1 UZ 14 CH	OSSMEMBER (REINFORCE	ICHT)					314.1
M SUNDRY	0.4 75 RE	AP FLOOR						2. i. *
M SUNDRY	FOM TO NO	an. I Loon						90.0
	22 71 PR	LTMER					1	
M SUNDRY								1462.2
A211 750) 00 75 TR	UNK LID						
M. SUNDRY								182.0
	50 03 98 S	SEALING						
M SUNDRY								46.6
	3 00 58 ME	RCEDES STAR						75.3
M SUNDRY		ומה באהו בו						73.3
	54 15 EZ	200 EMBLEM					1	68.0
M SUNDRY	ን ዓን ነር ሆ	MPRESSOR EMBLEM						00.0
M SUNDRY	22 13 K	WILLIEGOOK CHOCKE					l	572.0

Confirm & accepted by

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.
Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



ESTIMATE

Invoice Name & Address

Mr IYN Sarma

#07-101

Blk 5 Normanton Park

Company Reg No. 196400304H GST Reg No. MR-8500111-X

Owner Name & Vehicle Info

SJA9340K

/ 27/12/2007

	0/-101	110002	Date III/ivilleage	,		
2	ingapore	113002	Chassis No	WDB2110412B2		
			Engine No	271956309781		
C	ontact No	Mobile: 96835750	Make/Model	MB/E 200 (Ne	w Generation)	
ccount No	Terms	Date/Time Printed	CSE Operator		WIP No	
SM00061	Cash	07/11/2018/ 16:10	465 / Tay Jia	n Ye	22917	
		Description of Goods / S	Services	Qty	Unit Price Disc%	Amount
	25 64 TA	ILLAMP LH				30.8
SUNDRY A211 826	03 91 SE	ALING RING				30.00
PNT88000			51.000			1900.0
TO RENEW PNT88000		PER, BOOTLID, WELD AND C	UT END PANEL , FLOOR			190.0
TO TRANS	FER REAR	BOOTLID TRIM AND MECHANI	SM TO NEW PART			100.0
PNT88000		IT END PANEL TRIM , REAR	FENDER			190.0
PNT98000	ĺ					1000.0
		REAR BUMPER, BOOTLID, EN	DPANEL	040		40.0
54900099 CHECK WI		CHASSIS ELECTRICAL SYSTE	RITHINN!	afice)	
10028901			~ / 1 7 1 1 1 1 1 1 1 1 1		7	200.0
	OUT DIAG S-SCAN PRO	NOSTIC CHECK USING HI-SC	AN PRO TEST			
SUNDRY						80.0
TO APPLY SUNDRY	ANTI COR	OSSION SURVEYOR N	NAME:			120.0
	BODY SEA	LANT SURVEYOR	SIGNATURE :			
SUNDRY	Y C&C LOG	-				50.0
I SUNDRY	. I CAC LUG	DATE:				40.0
SUNDRIES	5	REMARKS .				
Confirm & a	ccepted by					
					Nada	0 615
				7% GST on	Nett 9615.12	9,615. 673.
				, , 45. 011		
	signatory an	d company stamp		To	otal Payable	10,288.

Reg No/Reg Date

Date In/Mileage

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 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 erchiving 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

	ACCIDENT O (A) EMENT
Date Of Report	07/11/2018 10:47
Date Of Accident	05/11/2018 19:25
Exact Location Of Accident	BUKIT TIMAH ROAD TOWARDS UPPER BUKIT TIMAH ROAD
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJA9340K
Insured/Policyholder	
Name Of Registered Owner	INGUVA YAGNA NARAYANA SARMA
NRIC No	S2636106J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96835750
Alternative Phone No	OTHERS-96835750
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E200 KOMPRESSOR
Exact Purpose for which vehicle was being used at time of accident	LEISURE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO .
Policy Number	5034906365-09
Cover Note Number	
Driver	
Name of Driver	INGUVA YAGNA NARAYANA SARMA
NRIC No	S2636106J
Date Of Birth	25/05/1961
Occupation	INDOOR
Date Of Driving Pass	.21/11/1988
Driving Experience	29 YEARS AND 11 MONTHS
Gender	MALE.
Mobile Number	(LOCAL) +65-96835750
Fax Number	
Contact Number	OTHERS-96835750

NOEMAIL.

370E ALEXANDRA ROAD Address

#02-07

Postcode 159958

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 COLLISION - HEAD TO REAR

Weather Conditions CLEAR 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?

NO

Was any other material or property damaged?

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

YES NO

2

Number of Passengers (Including Driver)

Passenger 1

NAME: GENDER: : PASSENGER

: FEMALE

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?

Was there any audio recorded?

NO

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GBB4077T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE Name of Driver MICKEL ARUL VYTUS

G7337665W NRIC/Passport Number 94350555 **Contact Number**

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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.
- 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.
- 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.
- By the lodgment of this report to the insuters, 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:

- (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:
 - 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 meg
 - (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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: Alan Tang (5098825)

Customer Care Executive Motor Service Centre

Sketch Plan Pg. 2

SKETCH PLAN		
		1-574 734pk
	ton (8)	- 53A 7347K - 688 4-77T
	(4)	- 9115 47 T T
		VIFTIMAL Red
	(A)	
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DESCRIBE CIRCUMSTANCES C	F THE ACCIDENT	
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R behind could be	and vehicle in front stopped and 1 stopped in time and list little	The mar northward man
vehile.	1 Timbber 10 tours - 1 - 1 - 1 - 11 - 11	
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		<u> </u>
DECLARATION		
1/We declare the foregoing particular Λ	lars are true in every respect.	1
C+H4~		At
Folicybolder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder) Date & Time:	Name: Alan Tang (\$098825) NRIC/FIN No.: Customer Care Executive Motor Service Centre

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Page 4 of 16





PASS DATE

Class 2B Motorcycles not exceeding 200 cc
Class 2A Motorcycles between 201 cc and 400 cc
Motorcycles exceeding 400 cc
Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

06 Jun 1987 06 Jun 1987 06 Jun 1987 21 Nov 1988

FOR C&C US

S2636106J

8120047

INDIAN

28-05-1994

370E ALEXANDRA ROAD #02-07 SINGAPORE 159958

NRIC No:

S2636106J

Date:

19/09/2018

NP 428A