



UCB Engineering Pte Ltd

GST Registration Number: 19-9501338-G

Business Reg. No. 199501338G

Our ref : 181202.RGT.(PA7700Y)

24th December 2018

AXA Insurance Pte Ltd
8 Shenton Way
#24-01 AXA Tower
Singapore 068811

Without Prejudice
email: motor.survey@axa.com.sg

Attention : Motor Claim s Department

Dear Sirs,

ACCIDENT INVOLVING PA 7700 Y AND SLV 1032 T ON 22/12/2018 ALONG PART HOTEL DRIVE WAY

We refer to the above matter.

Our client's vehicle, PA 7700 R was damages by your insured (SLV 1032 T) in an accident on 22-12-2018

Our client proposed to file for third party claim for the losses incurred. Enclosed herewith please find a copy of the quotation from our workshop as well as our client's GIA report for your kind attention.

Please arrange for your surveyor to liaise with us for an inspection on our client's vehicle at your earliest convenient. Kindly contact Madam Ah Siang at 91773084 or Mr. Tan at 97381908.

Yours faithfully

Tan Tiong Chia

Encs PA 7700 R GIA report
Quotation

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 | 24/12/2018 14:33 |
| Date Of Accident | 22/12/2018 10:45 |
| Exact Location Of Accident | ALONG PARK HOTEL DRIVE WAY |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|------------------|
| Vehicle Registration Number | PA7700Y |
| Insured/Policyholder | |
| Name Of Registered Owner | READY GO TRADING |
| Co Reg No | 52974672K |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-81007700 |

Vehicle Particulars

| | |
|--|---------------------------------|
| Manufacturer | TOYOTA |
| Model | COASTER-4.0 D 23 SEATER ABS (M) |
| 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 | BUS |

Insurance Company

| | |
|---------------------------|---|
| Name of Insurance Company | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | NG CHEONG KEE |
| NRIC No | S1737991G |
| Date Of Birth | 19/09/1966 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 25/06/1984 |
| Driving Experience | 34 YEARS AND 5 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-81007700 |
| Fax Number | |
| Contact Number | |
| Email Address | NOEMAIL |

| | |
|---|--|
| Address | 25 ELIAS ROAD, #07-12 SINGAPORE 519931 |
| Postcode | |
| 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 | SIDE SWIPE |
| Weather Conditions | CLEAR |
| Road Surface | DRY |

Other Information

| | |
|---|-----|
| Was any foreign vehicle involved in this accident? | NO |
| Number of vehicles (including own vehicle) involved in the accident | 2 |
| Was any body injured in the Accident? | NO |
| Was any injured conveyed to hospital by ambulance? | |
| 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? | YES |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-------------------------------------|-------------------------|
| Vehicle Registration Number | SLV1032T |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | MR. MARVIN NG CHIA HENG |
| NRIC/Passport Number | S0032105B |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

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 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. 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.

READY GO TRADING
25 ELIAS ROAD #07-12
SINGAPORE 519031

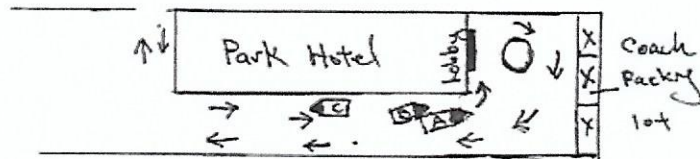
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2

SKETCH PLAN



A = PATTOOY
B = SLV 10327
C = unknown lorry

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22/12/18 at about 10.45 am, I was driving my bus Reg. PATTOOY to Park Hotel lobby to pick up passenger while driving at the drive way. As there was a unknown lorry parked at the left side of the road, I overtake the lorry and prepare to turn left as the road can only left turn. As I was about to turn left, I suddenly feel a knock on the left side body, I stop my bus to check and discover the vehicle Reg. No: SLV 10327 has caused the incident.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

READY GO TRADING
25 ELIAS ROAD #07-12
SINGAPORE 519931

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.:



UCB Engineering Pte Ltd

GST Registration Number: 19-9501338-G

Business Reg. No. 199501338G

Our ref: 181202.RGT(PA7700Y)

24th December 2018

Ready Go Trading
25 Elias Road
#07-12 Ris Grandeur
Singapore 519931

QUOTATION
without Prejudice

Dear Sir,

COST OF REPAIR FOR PA 7700 Y

| <u>QTY</u> | <u>DESCRIPTIONS</u> | <u>PRICE</u> S\$ |
|------------|---|---------------------|
| 1 pc | LHS panel | 13,500.00 |
| 4 pcs | Labour charges for dismantle & assemble side window Glass | 1,200.00 |
| | Labour charges for remove & replace the above damaged parts Dismantle & assemble the passenger seat & checking alignment | 4,200.00 |
| | To putty & spray painting onto complete RHS body panel | 1,400.00 |
| | Total | 20,300.00 |

(SGD: Twenty Thousand Three Hundred Only)

Price quoted above is subjected to 7% GST

Yours faithfully,
Tan Tiong Chia