

Kang Car Repairers Pte Ltd

1 Kaki Bukit Ave 6, #02-06 Autobay@ Kaki Bukit Singapore 417883
TEL: 6747 7636 FAX: 6748 5071 Email: kangcar@singnet.com.sg
GST:201300201N

M/S : INDIA INTERNATIONAL INSURANCE PTE LTD
64 CECIL STREET
#04/#05 IOB BUILDING
SINGAPORE 049711

TEL: 63476100 FAX: 62244174
ATTN: Motor Claim Department

Claim Type: Third Party
Accident Date: 04/02/2019
TP Veh Reg No: SHC8855L

Estimate No: EST1900041

Date: 09 Feb 2019

Veh Reg No: **SJR1403B**
Make/Model: HONDA FREED 1.5G A
Chasis No: GB31009825
Reg. Date: 10/06/2009
Your Ref No: SHC8855L

Estimate Repair Cost to Vehicle No :SJR1403B

Quantity	Description	List Price	Amount
		<u>S\$</u>	<u>S\$</u>
List Price			
1	1 PC REAR BUMPER	576.70	
2	1 PC REAR BUMPER SIDE RETAINER RH	41.50	
3	1 PC REAR SHOCK ABSORBER RH	198.60	
4	1 PC REAR WHEEL HUB RH	334.70	
5	1 PC REAR AXLE	997.80	
		2,149.30	
	Less 20%	429.86	1,719.44
Special Net			
6	1 PC REAR BUMPER SPOILER	650.00	
7	1 PC REAR TYRE RH	350.00	
8	1 PC REAR TYRE RIM RH	800.00	
		1,800.00	1,800.00
Labour			
9	1 TO REMOVE AND REPLACE THE DAMAGED PARTS, KNOCK OUT ACCIDENT DENTED PORTIONS, AND FOR CUTTING/WELDING WORKS.	600.00	
10	1 TO REMOVE AND REFIT UNDERCARRIAGE	550.00	
11	1 TO SPRAY PAINTING	750.00	
12	1 TO CHECK WIRING	50.00	
13	1 TO CHECK WHEEL ALIGNMENT	120.00	
		2,070.00	2,070.00

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Reg. Date: 10/06/2009

Your Ref No: SHC8855L

Estimate Repair Cost to Vehicle No :SJR1403B

Quantity	Description	List Price	Amount
		S\$	S\$
	Total		S\$ 5,589.44
	Add GST @ 7%		391.26
	Total Amount Payable		S\$ 5,980.70

TOTAL: SINGAPORE DOLLAR FIVE THOUSAND NINE HUNDRED EIGHTY AND CENTS
SEVENTY ONLY

This is only an estimate based on our preliminary inspection and does not cover additional parts, labour
time which may be required after work has begun.

AT

For Kang Car Repairers Pte Ltd



AUTHORISED SIGNATURE

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	07/02/2019 14:43
Date Of Accident	04/02/2019 13:30
Exact Location Of Accident	BEDOK RESERVOIR ROAD (B/105 & 106) CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR1403B
Insured/Policyholder	
Name Of Registered Owner	NG SUNG THONG
NRIC No	S7236367A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92266155
Alternative Phone No	OFFICE-92266155

Vehicle Particulars

Manufacturer	HONDA
Model	FREED 1.5G 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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5106542479 CLASSIC
Cover Note Number	

Driver

Name of Driver	NG SUNG THONG
NRIC No	S7236367A
Date Of Birth	02/10/1972
Occupation	INDOOR
Date Of Driving Pass	14/03/1997
Driving Experience	21 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92266155
Fax Number	
Contact Number	OFFICE-92266155
Email Address	NOEMAIL

Address BLK 748A #02-05 BEDOK RESERVOIR CRESCENT BELVIA
 Postcode 471748
 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? 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) 2
 Passenger 1 NAME: MIKE
 GENDER: MALE

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 ATTACHED

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camern? YES
 Remarks/ Reasons: WITH OWNER
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC8855L
 Vehicle Make/Model/Colour HYUNDAI I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
 Details Of Properties
 Vehicle Category TAXI
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

Sketch Plan Pg. 1

SKETCH PLAN


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7. By the lodging 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.

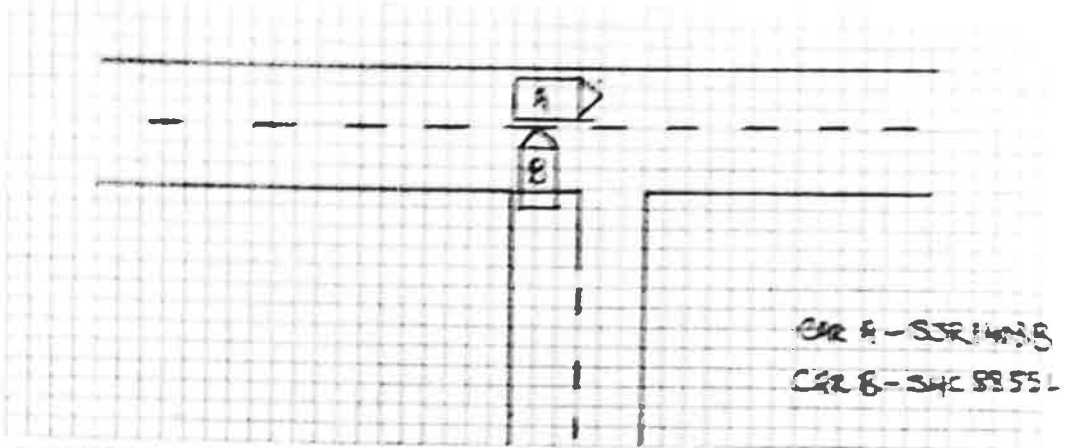

Policyholder's Signature
Date & Time:

- 7 FEB 2019

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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@singnet.com.sg
Name:
NRIC/TIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 04/02/19 at 1300pm, I was travelling along Bedok
Pemburu Road block 125 carpark, opposite Eastern Bank 125
Suddenly a taxi 34C 88551 drove out from a carpark I
junction, he did not stop at the stop line and crash back
towards my car. The taxi had collided into my car right
rear portion causing damage.

DECLARATION

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

- 7 FEB 2019

Police Officer's Signature
Date & Time:

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

IDAC KAKE BUKET (PAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel 67416697 Fax 67492305
Email: vackb@singnet.com.sg

Insuring Company Representative's Signature
Name:
MISC. No.: