# SPECIALISTS MOTOR PTE LTD

Block 3018A, Ubi Road 1, #01-24-26, Singapore 408711 Tel: 67472112 (5 lines) Fax: 67438032 Email: cardoc@singnet.com.sg

Bus. Reg No: 199502604 E GST No: 19-9502604-E

# SM/SDF59C/1904058

29th April 2019

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The Manager Motor Claim Department India International Insurance Pte Ltd 64 Cecil Street #04/05 IOB Building Singapore 049711

Date of Accident : 29<sup>th</sup> April 2019

Location : Blk 50 Ubi Ave 3 Carpark

Third Party Claim Vehicle No GBB 9500 E

Repair Cost For Vehicle No : SDF 59 C Audi A5

Estimate Supply of Parts & Labours

N.T.	D. C. L.	04-	Duine	A
<u>No.</u>	<u>Particulars</u>	<u>Qty</u>	<b>Price</b>	Amounts
1	Front fender LH	1	819.90	\$ 819.90
2	Front fender cowling LH	1	256.55	\$ 256.55
3	Front fender cowling clips LH	1set	55.00	\$ 55.00
4	Front fender reflector LH	1	111.25	\$ 111.25
5	Front fender side garnish LH	1	23.85	\$ 23.85
6	Front fender top garnish LH	1	34.65	\$ 34.65
7	Front fender bracket LH	2	56.25	\$ 112.50
8	Headlamp assy LH	1	7,186.65	\$ 7,186.65
9	Front bumper fascia	1	1,610.95	\$ 1,610.95
10	Front bumper clips	1set	221.50	\$ 221.50
11	Front bumper side retainer LH	1	25.55	\$ 25.55
12	Front bumper air duct LH	1	58.65	\$ 58.65
13	Front support panel	1	800.75	\$ 800.75
14	Running board side skirt LH	1	589.10	\$ 589.10
15	Running board side skirt bracket LH	1	16.85	\$ 16.85
16	Front door pillar LH (outer)	1	1,572.00	\$ 1,572.00
17	Radiator top garnish	1	91.35	\$ 91.35
18	Radiator top garnish clips	1set	25.00	\$ 25.00
19	Front grille assy	1	2,170.45	\$ 2,170.45
20	Front grille emblem	1	93.65	\$ 93.65
21	Radiator top bracket	1	138.45	\$ 138.45
				\$16,014.60

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## SM/SDF59C/1904058

29th April 2019

No.	Particulars	<u>Qty</u>	Price		Amounts			
	Balance b/f				6,014.60			
22	Front wheel house top garnish LH	1	53.55	\$	53.55			
23	Front wheel house top garnish clips LH	1	35.00	\$	35.00			
24	Front wheel rim LH (s/net)	1	1,911.45	\$	1,911.45			
			-	\$1	8,014.60			
Labou	ur Charges :-			<u> 4</u>	Amounts			
	at, renew, knocking & welding front door pillar LH, front rt panel, remove & install all damage parts, straighten &		ront	\$	2,100.00			
Remo	ve & install radiator assy, engine cooling system & cond	uct pressure te	st	\$	120.00			
Remo	ve & install air con system, vacuum & top up gas			\$	120.00			
Tuff-k	tote on damage parts			\$	120.00			
Comp	uterise wheel alignment			\$	180.00			
Spray	painting on damage parts			\$	1,880.00			
Check	all lighting after repairs			\$	60.00			
Labou	r Charge		-	\$	4,580.00			
Total Amount								

GST will be reflected in the final bills.

Notes: -Please inform us within 14 days, from the date of this letter, in the event that the owner/driver is in breach of its policy with your company, failing which we shall hold your company liable for all costs of repairs, loss of use and storage.

# SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

Mobile Number
Fax Number
Contact Number

**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 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.

(LOCAL) +65-94812161

NOEMAIL

Address

50 UBI AVENUE 3 #01-01/02 FRONTIER

Postcode

408866

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

....

Insurance Company of Driver's Own Vehicle

7.

**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?

Number of vehicles (including own vehicle) involved in the accident

NO 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)

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**

THERE WAS A HUMP INFRONT OF ME. SO I WAS MOVING SLOWLY TO EXIT THE PAKRING GANTRY. VEHICLE B (GBB9500E) FROM BEHIND OVERTAKE MY VEHICLE AND HIS REAR RH COLLIDED INTO THE FRONT LH OF MY CAR.

# Attachment(s)

Are accident photos available for attachment?
Was there any video captured by Car Camera?

YES NO

Was there any audio recorded?

NO

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

**GBB9500E** 

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **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.
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- 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.

Policyholder's Signature

rive Pte. Ltd.

Date & Time:

Driver's Signature

(If driver is not the policyholder)

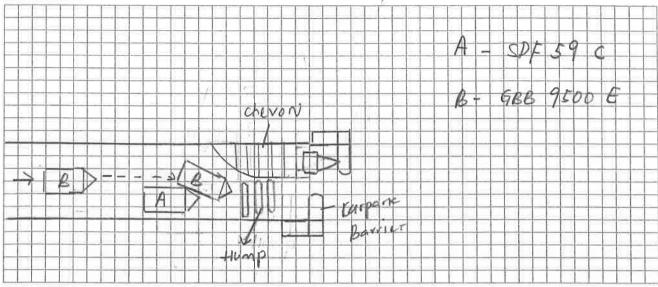
Date & Time: 29 04

3:08 pm

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

# **SKETCH PLAN**



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# **DECLARATION**

I/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:  $\mathcal{A}/\mathcal{O}_{k}/\mathcal{O}_{k}$ 

3:06 pm

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.: