



**ESTEEM
PERFORMANCE**

ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/ 259, 569536.
Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteemperf.com.sg

Repair Estimates

SLQ 5382 H

Parts	(a) Cost / List Price Items	\$	<u>3,085.85</u>
	Plus/Less <u>25%</u>	\$	<u>771.46</u>
	Total of Cost / List	\$	<u><u>2,314.39</u></u>
	(b) Nett Price Items		_____
	Less _____		_____
	Total of Nett Item		_____
	(c) Special Nett Items	\$	<u>200.00</u>
Total Parts Cost		\$	<u><u>2,514.39</u></u>
Labour		\$	<u><u>2,240.00</u></u>
Total		\$	<u><u>4,754.39</u></u>

The above total will be subjected to 7% G.S.T.

Name of Surveyor : _____

Company : _____

Survey conducted on : _____ at _____

Remarks By Surveyor

(a) The repair of this vehicle is authorized / is not authorized until further notice.

(b) Recommended Days of Repair : _____ day(s)

(c) Resurvey : Required / Not Required

(d) Excess : \$ _____

(e) Signature of surveyor : _____ Date: _____



ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/259, 569536.
Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteemperf.com.sg

Spare Parts

Vehicle No. : **SLQ 5382 H**
Make & Model : **TOYOTA PRIUS**
Chassis No. : **JTDKB3FU103562003**

Submit By : **SERENCE**
Year Manufacture : **2017**
Engine No. :

Cost / List

S/No.	Part Description	Qty	Unit Price	Price	Disposition by Surveyor
1	Reverse sensor	1	\$200.00	S.N	
2	Rear bumper	1	\$497.50		
3	Rear bumper clip	10	\$40.00		
4	Rear bumper side retainer LH	1	\$112.70		
5	Rear bumper side retainer RH	1	\$112.70		
6	Rear bumper reinforcement	1	\$398.90		
7	Rear bumper lower garnish centre	1	\$582.60		
8	Rear bumper lower garnish LH	1	\$149.70		
9	Rear bumper lower garnish RH	1	\$149.70		
10	Rear bumper tow cover	1	\$31.70		
11	Tail lamp LH - UPPER	1	\$498.75		
12	Tail lamp LH - LOWER	1	\$511.60		
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.



ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/ 259, 569536.
Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteemperf.com.sg

Labour

Vehicle No. : **SLQ 5382 H** Submit By : **SERENCE**
Make & Model : **TOYOTA PRIUS** Year of Manufacture : **2017**

S/No	Labour Description	Estimated Price	Adjusted Price
1	TO RENEW DAMAGED PARTS & KNOCK OUT ACCIDENT REPAIR AREA. (REAR BUMPER, END PANEL, SPARE TYRE COMPARTMENT)	\$800.00	
2	TO PUTTY, RESPRAY PAINT FOR AFFECTED ACCIDENT REPAIR AREA. (REAR BUMPER, END PANEL, SPARE TYRE COMPARTMENT)	\$800.00	
3	To tuff coat.	\$50.00	
4	TO Check wiring	\$50.00	
5	To transfer boot mechanism to new boot	\$120.00	
6	To conduct water leakage tests to ensure proper air and sealing	\$120.00	
7	To remove & refit reverse sensor	\$150.00	
8	To remove & refit spare tyre, spare tyre board, carpet trim to assist work load.	\$150.00	

Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.

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	14/05/2019 15:17
Date Of Accident	13/05/2019 17:50
Exact Location Of Accident	JUNCTION OF DRAYCOTT DRIVE AND STEVEN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ5382H
Insured/Policyholder	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66550005

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS HYBRID 1.8 CVT
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A29114756MKF
Cover Note Number	

Driver

Name of Driver	CHIA BOON CHYE
NRIC No	S1163702G
Date Of Birth	29/12/1956
Occupation	OUTDOOR
Date Of Driving Pass	21/02/1978
Driving Experience	41 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91006422
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	NIL
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	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: : P1 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

ON THE DAY AND TIME MENTIONED, I WAS DRIVING ALONG THE SAID MENTIONED LOCATION AND STOPPED AT THE TRAFFIC LIGHT AS IT WAS RED. WHEN MY VEHICLE WAS STATIONARY, IT WAS HIT FROM THE REAR BY VEHICLE B. NO ONE WAS INJURED. STATEMENT WAS READ TO ME AND I ACKNOWLEDGED IT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLS2083E
Vehicle Make/Model/Colour	AUDI / A4 1.4 TFSI S TRONIC / WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN DRIVER
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

1

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 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 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:

 - (i) 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.
 - (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.

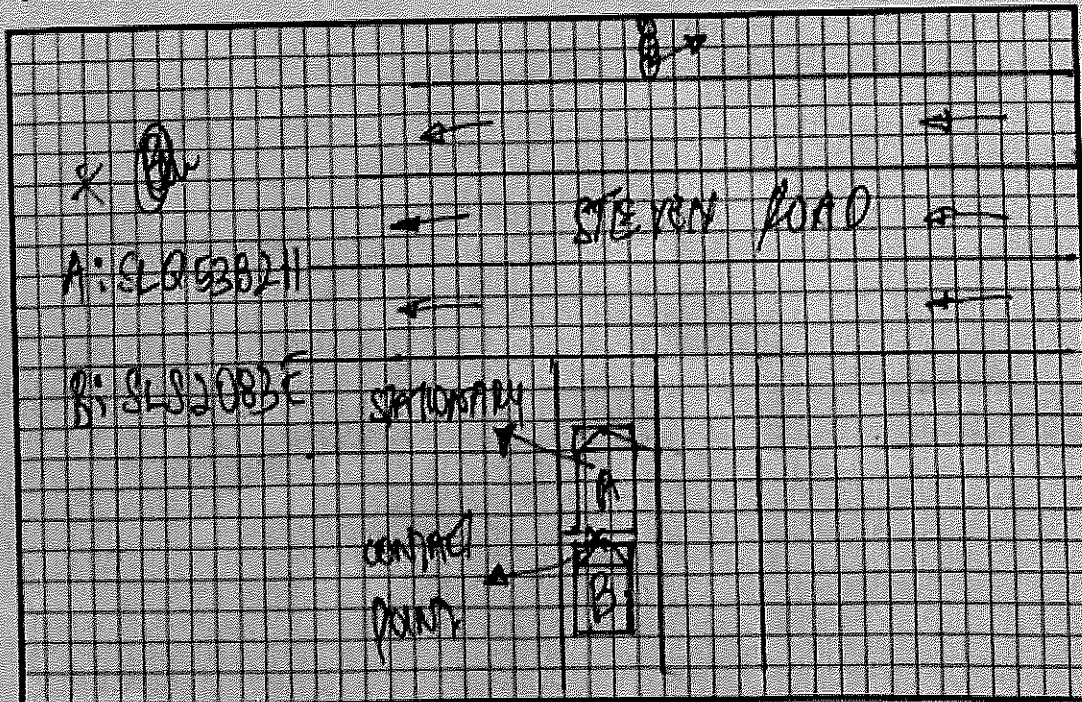
VERIFIED BY AJAX MARS
REPORTING OFFICER
Hashim Kamari

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel

Sketch Plan



ACCIDENT STATEMENT (2000 characters)

ON THE DAY AND TIME MENTIONED, I WAS DRIVING ALONG THE SAID MENTIONED LOCATION AND STOPPED AT THE TRAFFIC LIGHT AS IT WAS RED. WHEN MY VEHICLE WAS STATIONARY, IT WAS HIT FROM THE REAR BY VEHICLE B. NO ONE WAS INJURED. STATEMENT WAS READ TO ME AND I ACKNOWLEDGED IT.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
HASHIM BIN KAMARI

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

14 May 2019 at 3:03 PM

Date/Time:

14 May 2019 at 3:03 PM