辉陽汽車有限公司 HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721 Tel: 64515752 (2 Lines) . Fax: 64514658 Reg No. 201629438M

13/06/2019

Owner:

MKM CAR LEASING PTE LTD

ESTIMATE TO REPAIR TOYOTA PRIUS ALPHA 1.8S A - SLV172D

1				
1pc	rear tailgate		\$	1,218.45
1pc	rear tailgate outer garnish		\$	371.25
1pc	rear tailgate "TOYOTA" logo		\$	61.10
1pc	rear tailgate "PRIUS" emblem		\$	63.90
1pc	rear tailgate "HYBRID" emblem		\$	61.10
1 set	rear tailgate windscreen glass moulding		\$	182.28
1pc	rear tailgate inner lock		\$	374.45
1pc	rear tailgate inner rubber		\$	381.90
1pc	rear tailgate inner garnish		\$	781.90
1pc	rear LH taillamp		\$	581.90
2pcs	rear taillamp lower bracket @\$132.25		\$	264.50
1pc	rear bumper		\$	981.90
2pcs	rear bumper side retainer @\$132.45		\$	264.90
2pcs	rear bumper side refector @\$181.50		\$	363.00
1pc	rear end panel		\$	781.10
1pc	rear end panel outer sensor		\$	
1pc	rear end panel inner garnish		\$	260.00
1pc	rear floot panel		\$	374.85
1pc	rear floot panel garnish		\$	981.50
1pc	rear LH fender inner garnish		\$	585.20
			Ф	758.85
			\$ 9	604.02
	less 25%			,694.03
				,423.51
			\$ 7	,270.52
1set	rear parking sensor	2 m 244	¢.	200.00
1set	rear number plate & casing	s.nett	- 10 	280.00
		s.nett	\$	50.00
	remove & refix rear windscreen glass		•	
	sealant			120.00
	tuffkote		\$	80.00
	wiring			120.00
	spray painting		\$	80.00
	labour charges			00.00
	Total			00.00
	Hui	:	\$ 10,0	000.52
	(7) (10)			

MHYM19078388 / Hui Yang Motor Pte Ltd - HQ ENTRY DATE & TIME: 17/06/2019 11:02 SUBMITTED BY: Loh Siang Chuan Marcus

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 17/06/2019 11:36

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 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.

MODE STATE	ACCIDENT STATEMENT	
Date Of Report	17/06/2019 11:02	
Date Of Accident	13/06/2019 09:25	
Exact Location Of Accident	ALONG PUNGGOL ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	100000
Vehicle Registration Number	SLV172D	
Insured/Policyholder		
Name Of Registered Owner	MKM CAR LEASING PTE LTD	
Co Reg No	201224734R	
Email Address	RINA@MKMCARLEASING.COM.SG	

Mobile Phone No

Alternative Phone No OFFICE-67476880

Vehicle Particulars

Manufacturer TOYOTA

Model PRIUS ALPHA HYBRID-1.8 S CVT (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

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage

COMPREHENSIVE

Fleet Policy

YES

Policy Number

999994421

Cover Note Number

Driver

Name of Driver

JASON TAN WEE PNG

NRIC No
Date Of Birth
Occupation

S6942829J 01/12/1969

OUTDOOR

Date Of Driving Pass

16/06/1998

Driving Experience

20 YEARS AND 11 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-97882522

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

BLK 292A COMPASSVALE STREET

#03-226

Postcode

S541292

OTHER - HIRER

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

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)

2

involved in the accident

YES

Was any body injured in the Accident? 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:

: TAN RUI NING

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

SENGKANG NPC 2 SENGKANG SQUARE #01-02 S545025

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER TO ATTACHED 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

SLH4435T

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NURUL SHAFIQAH BINTE MOHAMED AYUB

NRIC/Passport Number

S9629341J

Contact Number

87497823

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

EARLY MEDICAL TO A TOTAL OF THE PARTY OF THE	
	DETAILS OF INJURED PERSON 1
Name	JASON TAN WEE PNG
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SLV172D
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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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- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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 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)
 - (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:

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

NRIC/FIN No.:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN		
	1 /	X / X-> Tranger light
	,	
		1
11/2		
Web A- SLV		
	Riversale Walk	I R R
VPh B-514.	7722/	Rongol Road
	Rivervalo Drive	
		IA
		1 8
DESCRIBE CIRCUMST	ANCES OF THE ACCIDENT	1 1
	13/00/10 2 =	. 1
0.	n 13/00/19 (9.25p	m, my rehide 4 (SLY1700)
WES travel	ine of P	
VIOS TRAVETTA	ing along runggo! B	ed. My reporte 17 was
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		The May Mily
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10		
CLARATION		A
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11/1		(12.
Vol		4 * *
icyholder's Si gnature e & Time:	Driver's Signature	Reporting Centre Personnel's Signature
o a fille.	(If driver is not the policyholder) Date & Time:	Name:
	Date of Time:	NRIC/FIN No.: