



TRANS EUROKARS PTE LTD



ESTIMATE COST OF REPAIRS

INDIA INTERNATIONAL INSURANCE P/L 64 CECIL STREET #04-#05 IOB BUILDING SINGAPORE 049711 ATTN. : MOTOR CLAIMS FAX :		NAME : Mr Teo Wei Xiong, Justin ADDRESS : 26 Palm Grove Avenue Singapore 547334 TEL : 91594043		WIP : 61798 EXCESS : DATE: 29-Aug-19	
VEH NO :	SLC1192P	DATE IN :		CONTACT PERSON :	Jess 63957874
CHASSIS NO :	MM6DL2SAAGW185987	MILEAGE :		TYPE OF CLAIM :	THIRD PARTY CLAIM
MODEL :	MAZDA2	DATE REG.	29-Apr-16	POLICY NO. :	
NATURE OF WORKS					
Parts Description					
NO	QTY			REVISED	PRICES
1	REAR BUMPER	1	MDB7A-50-221BBB		\$ 954.50
2	BRACKET CENTER	1	MKD53-50-251		\$ 5.40
3	STAY, REAR BUMPER	2	MDB7A-50-271		\$ 26.00
4	REFLECTOR LHS	1	MD350-51-5L0E		\$ 53.00
5	TAPE PROTECTOR, REAR BUMPER	3	MGS1D-50-EM1A		\$ 25.80
6	GROMMET, REAR BUMPER	4	MBHN1-50-0Z1A		\$ 10.80
7	GROMMET, REAR BUMPER	2	M9991-00-501		\$ 6.00
8	FASTENER, REAR BUMPER	7	MB45A-56-146A		\$ 21.00
9	REAR END PANEL	1	MDBYA-70-75Z		\$ 656.00
10	TRIM, END PANEL	1	MDB7G-68-89X 02		\$ 57.60
11	BEZEL, LOCK	1	MDB7G-68-894 02		\$ 5.70
12	FASTENER, TRIM	32	MGJ21-68-885B02		\$ 96.00
13	ORNAMENT, MAZDA	1	MDB7G-51-721		\$ 57.90
14	MASCOT, REAR	1	MDB7G-51-730		\$ 58.20
15	ORNAMENT, SKYACTIVE	1	MDB7G-51-771		\$ 67.60
16	GROMMET, BOOTLID	2	MGA7B-51-146		\$ 6.60
17	GASKET LHS, BOOTLID	1	MDB7A-51-3J8		\$ 48.60
18	GASKET RHS, BOOTLID	1	MDB7A-51-3H8		\$ 48.60
19	GASKET LHS, TAILLAMP	1	MDB7A-51-163		\$ 33.50
20	GASKET RHS, TAILLAMP	1	MDB7A-51-153		\$ 33.50
21	GUARD STONE LHS,	1	MDB1L-50-4R2		\$ 14.70
22	GUARD STONE RHS,	1	MDB1L-50-4P2		\$ 14.70
TOTAL PARTS					\$ 2,301.70
LESS 10%					\$ 230.17
TOTAL PARTS COST					\$ 2,071.53
Labour Description					
1	TO REPLACE REAR BUMPER, REAR END PANEL. TO REPAIR, REAR FLOOR PANEL, BOOTLID, REAR FENDER LH, REAR FENDER RH AND ALL AREAS AFFECTED BY THE ACCIDENT.				\$ 4,620.00
2	MZ-SP-SREAR7	TO RESPRAY REAR BUMPER, REAR END PANEL, REAR FLOOR PANEL, BOOT LID, REAR FENDER LH AND REAR FENDER RH.			\$ 4,095.00

3	MZ-BR-REVERSE	TO TRANSFER REVERSE SENSORS. (WITH REVERSE SENSOR)	NETT	\$ 660.00
4	MZ-BR-CAMERA	TO TRANSFER REVERSE CAMERA.	NETT	\$ 330.00
5	MZ-BR-TRIMS	TO REMOVE & REFIT CARPET & TRIMS ON THE REAR SECTION TO GIVE WAY TO THE REPAIR ON THE REAR SECTION.		\$ 990.00
6	MZ-BR-SEALER	TO SUPPLY SPRAY TEROSTAT SEALANT ON THE CUTTING		\$ 350.00
7	MZ-BR-CAVITY	TO CARRY-OUT BODY CAVITY PRESERVATION.		\$ 250.00
8	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		\$ 250.00
9	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.		\$ 350.00
10		TO SUPPLY BODY COATING.	NETT	TBA
11	MZ-BR-SUNDRI	SUNDRIES.	NETT	\$ 100.00

TOTAL LABOUR	\$ -	\$ 11,995.00
TOTAL PARTS	\$ -	\$ 2,071.53
TOTAL	\$ -	\$ 14,066.53
LESS EXCESS	\$ -	\$ -
TOTAL AFTER EXCESS	\$ -	
GST 7%	\$ -	\$ -
GRAND TOTAL	\$ -	\$ -

REMARKS:
 THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION
 AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE
 PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE
 THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT
 SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS,
 A **QUOTATION FEE OF \$400** WILL BE APPLIED
 ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR
 PARTS PRICE AS WELL AS LABOUR CHARGES

TRANS EUROKARS PTE LTD

 Authorised Signature



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-19-140841
Date of Request: 28/08/2019

Your Ref No: Online Purchase

Trans Eurokars Pte Ltd
12 Sungei Kadut Ave
Singapore 729648

Dear Sir/Madam,

Enquiry Date 28/08/2019
Enquiry By Jess Francis
TP Vehicle No. SJL4431G
Accident Date 28/08/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJL4431G	India International Insurance Pte Ltd	27/11/2018-26/11/2019	63476100

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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TAX INVOICE

Our Ref No: GR-19-140841
Date of Request: 28/08/2019

Your Ref No: Online Purchase

Trans Eurokars Pte Ltd
12 Sungei Kadut Ave
Singapore 729648

Dear Sir/Madam,

Enquiry Date 28/08/2019
Enquiry By Jess Francis
TP Vehicle No. SJL4431G
Accident Date 28/08/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

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	28/08/2019 16:00
Date Of Accident	28/08/2019 09:20
Exact Location Of Accident	CTE EXIT 1A JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC1192P
Insured/Policyholder	
Name Of Registered Owner	MR TEO WEI XIONG, JUSTIN
NRIC No	S8735227G
Email Address	JUSTINTEO87@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91594043
Alternative Phone No	OFFICE-91594043

Vehicle Particulars

Manufacturer	MAZDA
Model	2-1.5 SEDAN L SP.6EAT (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR

Insurance Company

Name of Insurance Company	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	MR TEO WEI XIONG, JUSTIN
NRIC No	S8735227G
Date Of Birth	04/11/1987
Occupation	INDOOR
Date Of Driving Pass	13/11/2007
Driving Experience	11 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91594043
Fax Number	
Contact Number	OFFICE-91594043
E-Mail Address	JUSTINTEO87@GMAIL.COM

Address	26 PALM GROVE AVENUE SINGAPORE 547334
Postcode	547334
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	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)	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

SEE SKETCH PLAN

Attachment(s)

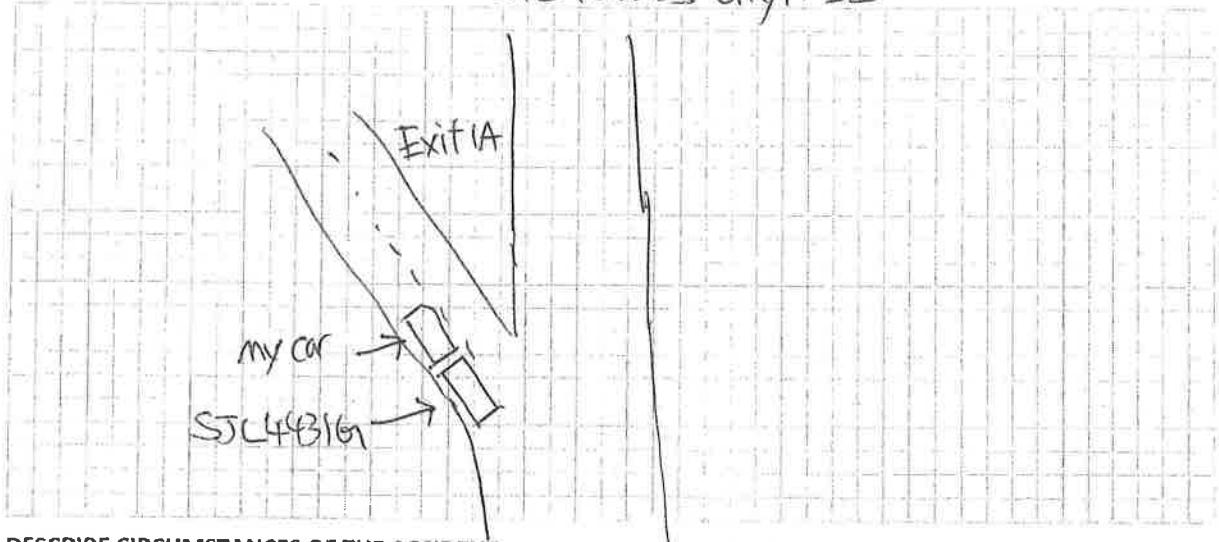
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJL4431G
Vehicle Make/Model/Colour	SUZUKI SWFT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN SIONG HWEE
NRIC/Passport Number	S8011862G
Contact Number	97557753
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

CTE towards City/PIE




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

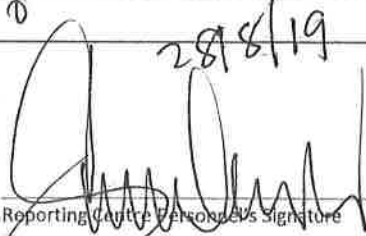
On 28 Aug 19, 9.19am, I was driving along CTE exiting at exit 1A Jalan Bukit Merah. The car in front of me came to a hard stop and I applied my brakes to stop behind the car. About 1 sec after my vehicle stopped, SJL44316 banged into the back of my vehicle.

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:


 Reporting Officer's Signature
 Name:
 NRIC/PIN No.:

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.
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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.
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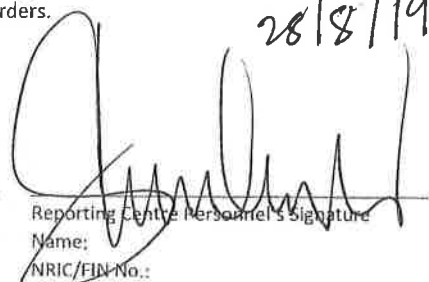
8. Consent under the Personal Data Protection Act (PDPA)

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/mall 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:


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

DRIVER NRIC AND LICENSE Pg. 1

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8735227G



Name
TEO WEI XIONG, JUSTIN

張偉雄

Race
CHINESE

Date of birth
04-11-1987

Sex
M

Country of birth
SINGAPORE

3630776

REPUBLIC OF SINGAPORE DRIVING LICENCE




TEO WEI XIONG, JUSTIN

04 Nov 1987


13 Nov 2007

001543419A

3630776



NRIC No: S8735227G



Date of issue
14-10-2004

Address
26 PALM GROVE AVENUE
SINGAPORE 547334

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE
13 Nov 2007

Class 3 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg

NP 428A

Licence No: S8735227G