Hitachi Capital Asia Pacific Pte. Ltd. Jun Taiyo Service Centre

No. 8 Fourth Lok Yang Road Singapore 629705

Tel: 64663022 Fax: 68966591

Co. Reg.No. 199400399N GST Reg.No. M2-011899-3

VEHICLE ESTIMATE dated 11/11/2019

LONPAC

ACCIDENT DATE : 07/11/2019 @ 11:30

VRN

: SLN613R

ATTN: MOTOR CLAIMS DEPT

MODEL

: TOYOTA ALTIS 1.6

TP VRN

: SLG6848C

PARTS REPLACEMENT 1. Body Repair	Qty		S\$ Unit	S\$ Amt	S\$ Labor
1 BOOT LID	1	\$	755.00	\$ 755.00	
2 BOOT LID LOGO	1	\$	60.00	\$ 60.00	
3 BOOT LID LOGO "COROLLA"	1	\$	48.00	\$ 48.00	
4 BOOT LID LOGO "ALTIS"	1	\$	45.00	\$ 45.00	
5 BOOT LOCK	1	\$	382.50	\$ 382.50	
6 BOOT HINGE R/L	2	\$	68.00	\$ 136.00	
7 BOOT INSULATOR CLIP	10	\$	5.00	\$ 50.00	
8 REAR BUMPER	1	\$	486.50	\$ 486.50	
9 REAR BUMPER CLIP	10	\$	5.00	\$ 50.00	
10 REAR BUMPER RETAINER RH	1	\$	120.00	\$ 120.00	
11 REAR BUMPER REFLECTOR RH	1	\$	58.00	\$ 58.00	
12 REAR BUMPER REINFORCEMENT	1	\$	395.00	\$ 395.00	
13 REVERSE SENSOR (SET)	1	\$	360.00	\$ 360.00	
				\$ 2,946.00	
Discount -25%				\$ 736.50	
				\$ 2,209.50	
		PA	RTS TOTAL	\$ 2,209.50	

2. Labour Charges

Panel Beat, Cut, Weld, Re-align & Replace Damaged Parts Of REAR Affected Area	\$	1,000.00
Putty, Blend And Spray Paint on REAR Affected Area	\$	1,000.00
Check Wiring and Ensure Proper Functioning	\$	80.00
Dismantle and Transfer Boot Lid Fittings & Mechanisms to New Boot Lid	\$	180.00
Remove and Reinstall Reverse Sensors	\$	120.00
Remove and Reinstall Rear Reverse Camera	_\$_	120.00
	10	

\$ 2,500.00 LABOURS TOTAL

> Grand Total : \$ 4,709.50 Add 7% GST : \$ 329.67 Nett Total \$ 5,039.17

No. of repair days: ____ 8

CUSTOMER SIGNATURE

HITACHI CAPTIAL ASTATA CIFIC PTE LTD (MANAGER)

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
- 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

	ACCIDENT STATEMENT		
Date Of Report	07/11/2019 17:32		
Date Of Accident	07/11/2019 11:30		
Exact Location Of Accident	BEDOK SOUTH RD TOWARDS BEDOK SOUTH AVE 3		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SLN613P		

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLN613R	
Insured/Policyholder		

Name Of Registered Owner HITACHI CAPITAL ASIA PACIFIC PTE LTD

Co Reg No 199400399N

Email Address JUNTAIYO@HCSPL.COM.SG

Mobile Phone No

Alternative Phone No OFFICE-64663022

Vehicle Particulars

Manufacturer TOYOTA

Model COROLLA ALTIS-1.6 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?

If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company SOMPO INSURANCE SINGAPORE PTE, LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number D19MTRENT000205

Cover Note Number

Driver

Name of Driver TAN NOR NEE NRIC No S1546404F Date Of Birth 30/07/1962 Occupation **OUTDOOR** Date Of Driving Pass 17/04/1980

39 YEARS AND 6 MONTHS **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-94567697

Fax Number

Contact Number

EMail Address JENNIFER.TAN@MDPL.COM.SG Address

BLK 662D EDGEDALE PLAINS

#14-704

Postcode

824662

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

OTHER - LESSEE

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?

YES

Was any other material or property damaged? 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

REFER TO ATTACHED.

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

SLG6848C

Vehicle Make/Model/Colour

HYUNDAI

Details Of Properties

Vehicle Category

PRIVATE CAR

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.
- 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. 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.
- 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.

Date & Time:

Policyholder's Signature Date & Time:

jaha kawa ka kwa je

Oriver's Signature (If driver is not the policyholder) Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN	ream ream ream processes.	and the second s
. A . A real manage of the company		The same of the second of the
and the second s		Annual Section Control of the Contro
	Married Papara in Salaha, da arras caras papas di manaya a amenanda a ang a managa a salaha a salaha a salaha	The residence of the second se
The second of the second secon	V - AN VARIANT COM SERVICE MADE: 4 SAN SERVICE STREET, SAN SERVICE PROPERTY SANS CO.	23 AC 401 PARCE - 184 - 194 AC 101 AC
		Control of the second management of the second of the seco
	and the same that the same and	The state of the s
		the state of the s
	╶╎┈┝╺┋ ╌┋╌╂╌┠╌╬╌╏	
DESCRIBE CIRCUMSTANCES OF T	HE ACCIDENT	
ON 07/11/2019 (11.30a)	w) I was priving from Be	dols South Rol tolural
Bedols South Ave 3 Sun	ddenly the back of my in	hunapad by other vehicle.
	/	
		<u> </u>
	1	

DECLARATION ASIA PA		
/We declare the foregoing particulars	are true in every respect.	STAL ASIA
0	/ ^	12/
13	C. Oww	/ (H)
		12 17
Policyholder's Signature Date & Time:	Driver's Signature	Reporting Centre Personnel's Signature
10 m m m M 1 1111 M 1	(if driver is not the policyholder)	Name:

Date & Time:

ers, wit jaar i Right-borg Za

NRIC/FIN No.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Company	
Owner ID:	399N	
Vehicle Details		
Vehicle No.:	SLN613R	
Vehicle to be Exported:	No	
Intended Deregistration Date:	28 Nov 2019	
Vehicle Make:	TOYOTA	
Vehicle Model:	COROLLA ALTIS 1.6 CVT	
Primary Colour:	Black	
Manufacturing Year:	2016	
Engine No.:	1ZRY330889	
Chassis No.:	MR053REH104557483	
Maximum Power Output:	90.0 kW (120 bhp)	
Open Market Value:	\$19,990.00	
Original Registration Date:	21 Apr 2017	
First Registration Date:	21 Apr 2017	
Transfer Count:	0	
Actual ARF Paid:	\$19,990.00	
Intended PARF Rebate Details		
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	20 Apr 2027	
PARF Rebate Amount:	\$14,992.00	
Intended COE Rebate Details		
COE Expiry Date:	20 Apr 2027	
COE Category:	A - Car up to 1600cc & 97kW (130bhp)	
COE Period(Years):	10	
QP Paid:	\$48,401.00	
COE Rebate Amount:	\$35,801.00	
Total Rebate Amount:	\$50,793.00	

The information contained herein is correct as at 08 Nov 2019

ОК