



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	SLH 2283 C			
Parts (a) Cost / List Price Items	\$	1,744.40		
Plus/Less 25%	\$	436.10		
Total of Cost / List	\$	1,308.30		
(b) Nett Price Items	<u></u>			
Less				
Total of Nett Item				
(c) Special Nett Items	\$	200.00		
Total Parts Cost	\$	1,508.30		
Labour	\$	1,570.00		
Total	\$	3,078.30		
The above total will be subjected to 7	7% G.S.T.			
Name of Surveyor	1			
Company	;			
Survey conducted on	;		at	
Remarks By Surveyor				
(a) The repair of this vehicle is a	uthorized /	is not authorized until furth	er notice.	
(b) Recommended Days of Rep	air :		day(s)	
(c) Resurvey	,å	Required / Not Required		
(d) Excess	:\$			
(e) Signature of surveyor	ı		Date:	



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Spare Parts

Vehicle No.	:
Make & Model	:
Chassis No	;

SLH 2283 C

TOYOTA PRIUS JTDKB3FU703536506 Submit By Year Manufacture **JENNY** 2016

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					
9					
10					
11					
12					
13					
14					
15					
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17					
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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.



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Labour

Vehic	le No. : SLH 2283 C	Submit By	:Ca	rmen Lim
Make	& Model : TOYOTA PRIUS	Year of Manufacture	:	2016
S/No	Labour Descr	ription	Esimated Price	Adjusted Price
1	TO RENEW DAMAGED PARTS & KN	IOCK OUT ACCIDENT		
	REPAIR AREA. (REAR BUMPER,END	D PANEL, TAILDOOR)	\$600.00	
2	TO PUTTY, RESPRAY PAINT FOR A	FFECTED ACCIDENT		
	REPAIR AREA. (REAR BUMPER,END	D PANEL,TAILDOOR)	\$600.00	
3	To check wiring		\$50.00	
4	To remove & refit reverse sensor		\$120.00	
5	To tuff coat		\$50.00	
6	To remove & refit spare tyre, spare tyre	e board, carpet trim		
	to assist work load.		\$150.00	
	2			

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 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 loagement 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.			
Personal Secretary of the	ACCIDENT STATEMENT		
Date Of Report	19/11/2019 18:47		
Date Of Accident	19/11/2019 16:15		
Exact Location Of Accident	ALONG BUKIT TIMAH ROAD		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SLH2283C		
Insured/Policyholder			
Name Of Registered Owner	GRAB RENTALS PTE LTD		
Co Reg No	201617200G		
Email Address	NOEMAIL		

Mobile Phone No

Alternative Phone No OFFICE-31388644

Vehicle Particulars

Manufacturer TOYOTA

Model PRIUS-1.8 HYBRID 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

MSIG INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number A29114756MKF

Cover Note Number

Driver

Name of Driver YEO KHOON TAT

NRIC No S1291789I Date Of Birth 14/07/1958 Occupation OUTDOOR Date Of Driving Pass 06/06/1979

Driving Experience 40 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92388311

Fax Number

Contact Number

EMail Address NOEMAIL Address

BLK 251 CHOA CHU KANG AVE 2 #07-290

Postcode

680251

Was driver an employee of the Insured's Company NO

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 DRY

Road Surface

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?

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:

: NOT APPLICABLE

GENDER:

: FEMALE

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 19/11/19, TIME ABOUT 4:15PM, LOCATION IS ALONG BUKIT TIMAH ROAD TURNING TO DUNEARN ROAD, SOMEWHERE NEAR THE CASCADIA CONDO. I WAS ALREADY WAITING AT THE TURNING LANE/AREA WHEN SUDDENLY A 3RD PARTY VEHICLE SHA6513Y HIT THE REAR OF MY VEHICLE. THE LEFT REAR BUMPER SIDE OF MY VEHICLE WAS DAMAGED. SHA6513Y FRONT RIGHT BUMPER SIDE WAS DAMAGED ALSO. AT THAT TIME OF ACCIDENT, I HAVE A FEMALE PASSENGER ON BOARD. I WAS GOING TO DROP HER AT JALAN KAMPONG CHANTEK.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

SD CARD WITH WORKSHOP

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHA6513Y

Vehicle Make/Model/Colour

HYUNDAI / BLUE

Details Of Properties

VEH B

Vehicle Category

TAXI

Name of Driver

KHAMARUDDIN

NRIC/Passport Number

Contact Number

96474984

Address

Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Passenger 1

FRONT RIGHT PORTION

NAME:

: NOT APPLICABLE

GENDER: : FEMALE

Sketch Plan

SLH 2283C

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- This Form must be completed by the Pollcyholder 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.
- 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.
- 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.
- S. 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 passessed 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 ;
 - 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:
 - 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

(a) for complying with requirements under any regulations, laws or court orders.

Policynology's Signature

Driver's Signature

(If driver is not the policyholder)

Date & Time:

9/11/19 5.50 pm

Reporting Century ersonned's Signature Name:

NAIC/FIN No.

. Jenny Ng

SKETCH PLAN		1 1	7	
(A) SLH 22-0	836	3	18/	
(B) SHA 6513	1	Ayer Jambe	J'In Real	
->		Dr	mecin Rd	7
		River/Roc	See . / / / /	//
4			BURH THAN ROAD	
		he cascadia Condo		ssan ervice
DESCRIBE CIRCUMSTAN				
On 19/1/19, ti	me about 4.15pm	location is alo	ng Bukit Timah 1	Road
			ear The Cascad	
I was alrea	dy waiting at	the turning	lare area wh	en rose 1
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DECLARATION			10 10 10 10 10 10 10 10 10 10 10 10 10 1	
We secure the foregoing pa	rticulars are true in every res	pect.	t.	
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pic movers Safeture	Driver's Signature	· Maria	Reporting Entre ersonnel	s Signature
nte à l'e	(If driver is not the p Date & Time:		Name: NRIE/FIN No.; Jewn	M NA
	19/1/19:	5. 50pm.	· ·) 0
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