Progressive Car Care Pte Ltd Blk 3022A Ubi Road 1 #01-46 408716

Insurer Reference: TP 1219 - 5809

Repairer Reference: 025201

Date calculated: 30/12/2019 4:17 PM

Full Report Registration: SLS 5747 D Printed: 30/12/2019 4:17 PM

Summary Information

Claim

Location: Printed by:

Claim Reference:

Estimated Repair Time: Actual Repair Days:

Singapore (SG) Wayne Lim

TP 1219 - 5809

Currency: Date of Incident:

Hire Car Start: Hire Car End:

Work Provider:

AXA Insurance Pte Ltd

SGD 28/12/19

Vehicle Details

Vehicle

Manufacturer:

NISSAN

Model: Sub Model: X-TRAIL (T32/T32R)

Model Sheet Number:

BASE MODEL 71 XT 01

Registration:

SLS 5747 D

VIN number:

JN1JANT32Z0010227

Odometer: **Model Specs**

FROM 01/2017 2.0 LTR 110 KW ALU WHEELS 7J X 19

EMISSION STD EURO 6

S1/E0 (P)

AIR CONDITIONING

X-TRONIC CVT TYRE PRESSURE SENSOR

RR BUMPER LWR PROT

FRONT/REAR MUDFLAPS

ULTRASONIC PARK SYS VERS GEN COUNTRIES

FRONT DRIVE

RR BUMPER PROTECT PAINTING OFF VEHICLE TAILGATE OPENING WHEEL COVER 17 INCH CHASS JIG CAROLINER

START & STOP SYSTEM TWO COAT PEARL/MICA

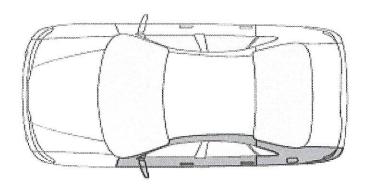
Vehicle Condition

Vehicle Status

Pre-Accident Damage: Date of Inspection:

Damage Areas

AII Underbody



Labour

	Time Base 10 WU/h	Pri	ce = 45.	00 SGD/h
Code	Description			Price SGD
NO NUMBER	JOB ALLOWANCE		5.0	22.50
7617A1)	R + R REAR AXLE CARRIER		9.0	40.50
NO NUMBER	ALIGN VEHICLE CPL		10.0	45.00
5000A1	RENEW L/R SIDE PANEL INCLUDES: R + R REAR SEAT, REAR BUMPER, TAIL LAMP, SEAL AND ALL TRIMS IN THE REPAIR SECTION DOES NOT INCLUDE: R + R REAR SIDE WINDOW		94.0	423.00
UC28A1	R + R L/R INNER PARKING AID SENSOR		1.0	4.50
UC28A1	R + R R/R INNER PARKING AID SENSOR		1.0	4.50
UC26A1)	R + R L/R OUTER PARKING AID SENSOR		1.0	4.50
UC26A1)	R + R R/R OUTER PARKING AID SENSOR		1.0	4.50
5010A1	RENEW REAR BUMPER (REMOVED)		2.0	9.00
NO NUMBER	R + R RR CTR BUMPER MOULDING		2.0	9.00
8004A1)	R + R LEFT REAR SIDE WINDOW GLASS		1.0	4.50
UF71A1	R + R LEFT REAR WHEELHOUSE SHELL		4.0	18.00
NO NUMBER	R + R L/R BODY PROTECTION MLDG		1.0	4.50
NO NUMBER	R + R R/R BODY PROTECTION MLDG		1.0	4.50
7706A1)	R + R FRONT EXHAUST PIPE		5.0	22.50
7712A1	R + R REAR EXHAUST PIPE		3.0	13.50
PW10A1)	FIT AND BALANCE LEFT REAR TYRE (ADDITIONAL WORK)		1.0	4.50
PW1011)	R + R TYRE ADD/WORK		4.0	18.00
7312A1)	R + R RIGHT REAR BRAKE DISC INCLUDES: R + R LEFT REAR WHEEL		3.0	13.50
7615A1)	R + R L/R WHEEL HUB INCLUDES: R + R WHEEL, BRAKE DISC AND SPLASH SHIELD		3.0	13.50
7616A1)	R + R LEFT AND RIGHT REAR WHEEL HUB		1.0	4.50
NH51A1)	R + R L/R REAR CONTROL ARM		1.0	4.50
NO NUMBER	R + R L/R SPRING		2.0	9.00
NO NUMBER	R + R RIGHT REAR COIL SPRING		2.0	9.00
NH47A1)	R + R L/R REAR CONTROL ARM		1.0	4.50
1781	L/R DOOR REPAIR		20.0*	90.00
	Labour Cost	Hrs	wu	
	Panel / Mechanical Labour Alignment	16.90	169.0	760.50
	Measuring Work	1.00	10.0	45.00
	Total of Labour			805.50

Paint

Paint Work	SYSTEM AZT	Time Basis	10 WU/h
Code	Description - TWO COAT PEARL/MICA	wu	Price SGD
	L/R SIDE PANEL CPL NEW PART PAINTING	32.0	
	REAR BUMPER NEW PART PAINT K1R	8.0	
	L/R DOOR REPAIR PAINTING <50%	16.0	

Paint Material Per Part

Code	Description				Price SGD
3481	L/R SIDE PANEL CPL NEW PART PAINTING				45.10
2583	REAR BUMPER NEW PART PAINT K1R				33.95
1781	L/R DOOR REPAIR PAINTING <50%				27.46
	Labour Cost - Paint Factor	45.00 SGD/h	Hrs	wu	Price SGD
	Time Paint	45.00 300/11		56.0	
	Preparation Main Work Metal		2.10	21.0	94.50
	•				
	Preparation Comp. Work Plastic	40 14/11 /1-	0.50	5.0	22.50
	Total	10 WU/h	8.20	82.0	369.00

Material Cost - Paint	Price SGD
New Part Painting	45.10
New Part Painting - Plastic K1R	33.95
Repair Painting	27.46
Material-constant Metal	18.10
Material-constant Plastic	9.00
Total	133.61

Spare Parts

				prices as at 2015-06-01/01
Code	Description	Part Number	Supplier	Price SGD
2583	REAR BUMPER	85022 6FR2H		420.00
2631	L/R BUMPER SUPPORT	85221 4CE0A		30.00
2632	R/R BUMPER SUPPORT	85220 4CE0A		30.00
2650	RR BUMPER CLAMP KIT	KE980 4C600		20.00
3481	L/R SIDE PANEL CPL	G8101 4CCMB		900.00
3679	L/R WHEELARCH MLDG	78861 4CE1A		160.00
3803	L/R SIDE WINDOW	83301 4CC0A		380.00
3861	L/R WDW BONDING KIT	KA463 00096		0.00
4201	L/R WHEELHOUSE COVER	76749 4CC0B		95.00
9071	REAR AXLE SUBFRAME	55401 1YA0C		950.00
9119	L/R LOWER JOINT ROD	55111 JG01E		220.00
9121	L/R UPPER JOINT ROD	55121 JD04A		220.00
9181	L/R WHEEL HUB	43202 4CE0A		290.00
9201	L/R SHOCK ABSORBER	E6210 5HA0B		135.00
9393	L/R AXLE STEERING	55502 4CA1D		870.00
9551	L/R WHEEL	D0C00 4CB3A		1,200.00
1000	L/R COWLING CLIP			20.00
1001	ARCH GARNISH CLIP			40.00
f: OEM Parts	Savings			0.00
n: Non-OEM Parts	Subtotal			5,980.00
u: Used parts	Addition(+15.00%)			897.00
	Total			6,877.00

Extras

Code	Description	Price SGD
1002	ALIGNMENT	60.00*
1003	AUDATEX FEE	42.00*
1004	QTR GLASS SEALANT	40.00*
	Total Extras	142.00

Final Calculation

	SGD	SGD
Parts	5,980.00	
Addition(+15.00%)	897.00	
Total Parts		6,877.00
Labour Time Base 10 WU/h		
Total 169.0 WU X 45.00 SGD/h	760.50	
Alignment Measuring Work	45.00	
Total of Labour	45.00	805.50
Total Of Extras		142.00
Paint Work Time Base 10 WU/h		
Labour Cost 82.0 WU X 45.00 SGD/h	369.00	
Material Cost	133.61	
Total Paint Including Material		502.61
Repair Cost Excludes GST		8,327.11
GST (+7.00%)		582.90
Repair Cost Included GST		8,910.01

Comments

* - USER SUPPLIED DATA NN - NO MANUFACTURERS CODE EXISTS

) - WU PARTIAL INCL IN OTHER POSITIONS

Assessment Note

No assessment notes entered.

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.	
	ACCIDENT STATEMENT
Date Of Report	28/12/2019 15:45
Date Of Accident	28/12/2019 12:40
Exact Location Of Accident	TEMASEK BOULEVARD
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLS5747D
Insured/Policyholder	
Name Of Registered Owner	TEE LAM EWE
NRIC No	SXXXX063F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81136112
Alternative Phone No	OTHERS-82285394
Vehicle Particulars	
Manufacturer	NISSAN
Model	X-TRAIL-2.0 (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 CAR
Insurance Company	
Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO

Policy Number

PNPV2019-00012828

Cover Note Number

Driver

Name of Driver TEE YU XUAN NRIC No SXXXX099H Date Of Birth 02/02/1992 Occupation **INDOOR** Date Of Driving Pass 26/03/2012

Driving Experience 7 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-82285394

Fax Number **Contact Number**

EMail Address SHAWNTEEYUXUAN@GMAIL.COM

55 ZION ROAD 55A Address

SINGAPORE

Postcode 247780

Was driver an employee of the Insured's Company NO

CHILDREN 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 - MAJOR/MINOR RD

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

Was any body injured in the Accident?

NO

2

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

2

Number of Passengers (Including Driver)

Passenger 1

NAME:

: PAX 1

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

REFER TO THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

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

GY7663B

Vehicle Make/Model/Colour

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

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

Lunderstand, adknowledge, agree and consent that:

- 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
- my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their shird 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:

Oriver's Signature (if driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Sketch Plan #2

TCH PLAN			
			<u>Vehicle</u>
			A-51557470
			B- GT 7663
		Alexander and a second a second and a second a second and	
	-		
1	~ ~ ~ ~	< '	
*	- TTB		
The second secon	TUIL		
			Legend
	\ ! /		PPI
			Vehicle Motorcycle
SCRIBE CIRCUMSTANCES OF	THE ACCIDENT		
At 1240pm on	28th Dec 2019 . I was ,	dilving down Temas	ek Blad to
	ce City's pooling to Compark.	HA A van GY	7663 B, WH
exet exiting from	or small Jane on the left	1. I continued on a	my posth since I
<u> </u>	way, and it seems like he	was stating stains	down.
	J.)		
Unfortunally he did	and stom down while I was	dilling by I d	alitimphed to guernet
			f my CAI, No
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our was injured i	in the gestdurt.		-
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			·····
		Andrew Control of the	
			
			^
ECLARATION		Marie Ma	11
We declare the foregoing partic	alars are true in every respect.	analast seem antique secret he country.	ill hier after after stand of mulaness
We declare the foregoing particles take be advised that your insurer may be an the day of occurrence. Kindly check	ulars are true in every respect. have a fourteen (14) days clause whereby the claim o your policy for mere system.	against own policy must be made w	italy the stipulated timeframe
ease be advised that you' insurer may to om the day of occurrence. Kindly check	have a fourteen (14) days clause suberetly the claim of your policy for more substitute to the claim of the c		1/100
We declare the foregoing particles to advised that your insurer may be on the day of occurrence. Kindly check officyholder's Signature ate & Time:	ulars are true in every respect, nave a fourteen (14) days clause whereby the claim of your policy for more shift Driver's Signature (If driver is not the policyholder)		Persahnel's Signature