

JEC AUTO SERVICE

1 KAKI BUKIT AVENUE 6
#02-11 AUTOBAY SINGAPORE 415933
Tel: +65 92327457

TO	: CHINA TAIPING	DATE	: 8/1/2020
ATTENTION	: MOTOR INSURANCE CLAIM	JOB TYPE	: OD CLAIM
ESTIMATE REPORT	: SUPPLEMENTARY		
<u>VEHICLE DETAILS</u>			
VEHICLE NO	: GL8888G		
VEHICLE MODEL	: TOYOTA HIACE		
CHASSIS NO	:		
ACCIDENT DETAILS	DATE	: 4/1/2020	
	TIME	: 1520 HRS	
THIRD PARTY REQUESTOR / CONTACT	:	XIAN (92327457)	

CLAIM DETAILS: PARTS

	ITEMS	QTY	UNIT PRICE	TOTAL
1	FRONT BUMPER REINFORCEMENT STAY BRACKET <i>Best</i>	2	\$ 175.00	\$ 350.00
2	INETRCOOLER COWLING <i>Cowling</i>	1	\$ 48.00	\$ 48.00
3	ADBLUE TANK <i>Cowling</i>	1	\$ 385.00	\$ 385.00
4	FRONT BUMPER BRACKET <i>Best</i>	2	\$ 36.00	\$ 72.00
5	RADIATOR <i>Derked</i>	1	\$ 680.00	\$ 680.00
6	RADITOR FAN COWLING <i>Cowling</i>	1	\$ 110.00	\$ 110.00

TOTAL PRICE:

\$ 1,645.00

ADD 15%

\$ 246.75

SUB TOTAL PRICE:

\$ 1,891.75

Admin

10/01/20

SLG

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 willful 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 06/01/2020 14:21
Date Of Accident 04/01/2020 15:20
Exact Location Of Accident ECP TWDS CHANGI
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GL8888G
Insured/Policyholder
Name Of Registered Owner M/S SAFE ENGINEERING SERVICES PTE LTD
Co Reg No
Email Address NOEMAIL
Mobile Phone No
Alternative Phone No OFFICE-68770940

Vehicle Particulars

Manufacturer TOYOTA
Model HIACE
Exact Purpose for which vehicle was being used at time of accident WORK
Are you claiming under your own insurance policy for repair to your vehicle? YES
If No, Please state action to be taken

Vehicle Category

COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number DMCVSN3077141900
Cover Note Number

Driver

Name of Driver KAW WEI LIANG
NRIC No GXXXXX846Q
Date Of Birth 05/08/1983
Occupation OUTDOOR
Date Of Driving Pass 28/08/2017
Driving Experience 2 YEARS AND 4 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-96564866
Fax Number
Contact Number
Email Address NOEMAIL

Address 323 UBI AVE 1 #06-573
Postcode 400323
Was driver an employee of the Insured's Company YES
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 CHAIN COLLISION
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 3
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) 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

I WAS TRAVELLING ALONG ECP TWDS CHANGI. VEH B WHICH WAS INFRONT OF ME SUDDENLY JAMMED BRAKE AND STOP. I MANAGE TO STOP BUT CANNOT STOP IN TIME. AS THE REUSLT, MY VEH HIT ONTO VEH B REAR PORTION. AFTER HITTING VEH B, VEH B DRIVER NEVER BRAKE THE VEH, HIS VEH CONTINUE ROLLED FORWARD HIT ONTO VEH C REAR PORTION.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Remarks/ Reasons: WITH DRIVER
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLN9144T
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLU7764E

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)

Accident Sketch Plan

SKETCH PLAN



A = SL 22286
B = SLN 7144T
C = SLU 3764E

Ecip two's Chong.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Statement

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Public Holder's Signature
Date & Time

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

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

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CLAIM DETAILS: PARTS

	ITEMS	QTY	UNIT PRICE	TOTAL
1	FRONT BUMPER <i>Replaced</i>	1	\$ 220.00	\$ 220.00
2	FRONT BUMPER CLIPS <i>new</i>	1 SET	\$ 20.00	\$ 20.00
3	FRONT BUMPER SIDE HOLDER ?	2	\$ 60.00	\$ 120.00
4	FRONT BUMPER LOWER GRILLE <i>Replaced</i>	1	\$ 60.00	\$ 60.00
5	FRONT BUMPER TOW COVER <i>Missing</i>	1	\$ 16.00	\$ 16.00
6	FRONT BUMPER REINFORCEMENT ?	1	\$ 105.00	\$ 105.00
7	FRONT BUMPER TOP BEAM ?	1	\$ 75.00	\$ 75.00
8	FRONT BUMPER FOG LAMP <i>2nd</i>	2	\$ 125.00	\$ 250.00
9	FRONT BUMPER FOG LAMP COVER <i>new</i>	2	\$ 36.00	\$ 72.00
10	FRONT GRILLE ?	1	\$ 210.00	\$ 210.00
11	FRONT GRILLE UPPER CHROME MOULDING <i>2nd</i>	1	\$ 190.00	\$ 190.00
12	FRONT GRILLE LOWER CHROME MOULDING	1	\$ 205.00	\$ 205.00
13	HEADLAMP <i>Replaced</i>	2	\$ 985.00	\$ 1,970.00
14	BONNET <i>Disassembled</i>	1	\$ 265.00	\$ 265.00
15	BONNET LOGO <i>new</i>	1	\$ 30.00	\$ 30.00
16	BONNET LOCK ?	1	\$ 72.00	\$ 72.00
17	FRONT SUPPORT PANEL <i>Repaired</i>	1	\$ 170.00	\$ 170.00
18	FRONT SUPPORT PANEL TOP COVER ?	1	\$ 55.00	\$ 55.00
19	FRONT SUPPORT PANEL TOP COVER CLIPS <i>new</i>	1 SET	\$ 10.00	\$ 10.00
20	WIPER WASHER TANK <i>Replaced</i>	1	\$ 85.00	\$ 85.00
21	AIR CON CONDENSER <i>Replaced</i>	1	\$ 530.00	\$ 530.00
22	AIR CON DISCHARGE PIPE ?	1	\$ 210.00	\$ 210.00
23	AIR CON SUCTION PIPE ?	1	\$ 225.00	\$ 225.00
24	AIR CON LIQUID PIPE ?	1	\$ 215.00	\$ 215.00
TOTAL PRICE:				\$ 5,380.00

ADD 15% \$ 807.00
SUB TOTAL PRICE: \$ 6,187.00

SPECIAL NETT ITEMS

ITEMS	QTY	UNIT PRICE	TOTAL
1 FRONT NUMBER PLATE <i>included</i>	1	\$ 30.00	\$ 30.00
2 FRONT NUMBER PLATE HOLDER <i>included</i>	1	\$ 30.00	\$ 30.00
TOTAL:			\$ 60.00

LABOUR

JOB	PRICE	ADJUSTED COST	APPROVED
1 PANEL BEATING, REMOVE AND REFIT PARTS	\$ 1,000.00	700	
2 SPRAY PAINTING TO AFFECTED AREA	\$ 800.00	500	
3 WIRING CHECK	\$ 50.00	30	
4 TUFF COAT	\$ 100.00	50	
5 TO REMOVE CONDENSER AND RADIATOR AND TO TOP UP	\$ 180.00	120	
TOTAL \$ 2,130.00			

ESTIMATE REPORT

TOTAL PARTS COST: \$ 6,187.00

TOTAL LABOUR COST: \$ 2,130.00

TOTAL REPAIR COST: \$ 8,317.00

APPROVED DETAILS

SURVEYOR:

Adrian Ling 08/01/20

CONTACT:

96893735

FAX:

PART BY PART LUMP SUM:

NO. OF DAYS:

06 days

Excess: To be advised.

Not Authorised.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date: