哈汽車貿易服務

HUP MOTOR TRADING & SERVICE

Blk 9004 Tampines Street 93 #01-120 Singapore 528838 Tel: 6784 0039 Fax: 6784 0076 Email: hupmotor@gmail.com Reg. No. 378091/00W Date: 18th JAN 2020 TP 2977/01/20 Our Ref: Your Ref: MR WONG KOK WAI KENNETH 192. Depot Rd. #14-23 Singapore 109690 Estimate cost of repair to MAZDA 6 SP 2.0 (A) Saloon - SDS 275 B \$ 1,231.50 1 pc rear bumper @ \$ 5.50 110.00 20 pcs rear bumper top & low clips @ \$ 35.00 70.00 2 pcs rear bumper o/s & n/s tow bar cover 53.90 1 pc rear bumper o/s reflecter 315.00 1 pc rear bumper lower garnish skirt 55.00 10 pcs rear bumper lower garnish clips & stopper @ \$ 5.50 set rear bumper o/s & n/s inner reverse sensor @ \$ 203.60 407.20 1 set rear bumper o/s & n/s outer reverse senser @ \$ 203.60 407.20 2 pcs rear bumper o/s & n/s top retainer © \$ 25.00 2 pcs rear bumper o/s & n/s side retainer © \$ 42.00 50.00 84.00 2 pcs rear bumper o/s & n/s side bracket clips @ \$ 7.50 15.00 583.30 1 pc rear bumper reinforcement 2 pcs rear bumper reinforcement o/s & n/s stay @ \$ 85.30 170.60 35.00 1 pc rear m/s exhaust bracket 35.00 1 pc rear o/s exhaust bracket mounting 606.70 1 pc rear end panel @ \$ 5.50 33.00 6 pcs rear end panel top garnish clips 4,262.40 852.48 Less 20% 3,409.92 50.00 To wiring check up for accected wiring system. To remove & refix carpet, floor mat, garnish, floor board cover, spare tyre, tool set & necessary parts, to enable 120.00 repair rear end panel & necessary parts. To jack, straighten & knocking out rear exhaust & tail pipe. 150.00 Labour charge to remove & cut out damaged parts, to jack, straighten & knocking out rear end panel & necessary parts, to weld, renew & align above parts. 750.00 To putty & respray painting on all affected accident parts, 950.00 60.00 To respray Tuff-Kote on all affected accident parts.

Dollars: Five Thousand Four Hundred Eighty Nine And Cents Ninety Two Only.

5,489.92



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-20-010956

Date of Request:

18/01/2020

Your Ref No:

Online Purchase

Hup Motor Trading & Service Blk 9004 Tampines Street 93 #01-120 Singapore 528838

Dear Sir/Madam,

Enquiry Date

18/01/2020

Enquiry By

Sandy Loo Chwee Ngoh

TP Vehicle No.

SJP7815S

Accident Date

17/01/2020

Enquiry Result

Enquiry Result				
TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.	
SJP7815S	China Taiping Insurance (Singapore) Pte. Ltd.	13/03/2019-07/04/2020	6389 6111	

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.

This is a computer generated document and requires no signature.



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

TAX INVOICE

Our Ref No:

GR-20-010956

Date of Request:

18/01/2020

Your Ref No:

Online Purchase

Hup Motor Trading & Service Blk 9004 Tampines Street 93

#01-120

Singapore 528838

Dear Sir/Madam,

Enquiry Date

18/01/2020

Enquiry By

Sandy Loo Chwee Ngoh

TP Vehicle No.

SJP7815S

Accident Date

17/01/2020

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:

[X] GIRO [] Cash [] Cheque

MHMT20008387 / Hup Motor Trading & Service - HQ ENTRY DATE & TIME: 18/01/2020 11:56 SUBMITTED BY: Sandy Loo Chwee Ngoh

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 repudiace 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	18/01/2020 11:56
Date Of Accident	17/01/2020 22:40
Exact Location Of Accident	JUNCTION OF ALEXANDRA RD TOWARDS TIONG BAHRU RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SDS275B
Insured/Policyholder	
Name Of Registered Owner	WONG KOK WAI KENNETH
NRIC No	SXXXX410B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96873256
Alternative Phone No	OTHERS-96873256
Vehicle Particulars	
Manufacturer	MAZDA
Model	6-2.0 4-DOOR SEDAN 2.0L 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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO

Name of Driver GOH SEOW LING NRIC No. SXXXX836B

D19MPC0002896

NRIC No SXXXX836B

Date Of Birth 24/06/1970

Occupation INDOOR

Date Of Driving Pass 15/11/2002

Driving Experience 17 YEARS AND 2 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96214423

Fax Number
Contact Number

Policy Number

Cover Note Number

Address 192 DEPOT ROAD #14-23

Postcode 109690

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **SPOUSE**

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

1

Number of Passengers (Including Driver)

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

KINDLY REFER TO SKETCH PLAN 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

SJP7815S Vehicle Registration Number

HONDA / AIRWAVE 1.5 Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver YU GAO FEI SXXXX385A NRIC/Passport Number

Contact Number 97881548

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.
- 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.
- 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 Ly 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 (all insurers) 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:
 - (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:

Name:

NRIC/FIN No.:

SKETCH PLAN	and the state of t
AKEKAUSEA ED	
TO THE REPORT OF THE PROPERTY	
A: SD0 2758 B: STA 78750	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	个 I V V I
on 17/01/2020 B 2240hrs, I was trav	relling on Alckandra Rd
waiting at traffic light to turn green towards Tiong Bahru Rd. When traffic started to move toward slowly to che suddenly car B (SJP 18155) banged to we exchanged particulars of car B. An	i light turns green, ecle trattle. om behind. After accident, ver admitted his fault
and signed on a note. My car has	and the state of t
of the accident however time and date is not in sync.	of the voce morage
	and a supplication of the
	Reporting Only
You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a <u>Fourteen (14) days clause</u>	Calatim OD
whereby the claim must be made within the stipulated timeframe from	
the day of occurance.	Claim TP Claim OD/TP at other workshop

DECLARATION

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

Policylsoider's Signature Date & Time: Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



ACCIDENT REPORTING CENTRE & AUTHORISED WORKSHOP: HUP MOTOR TRADING & SERVICE

BLK 9004 TAMPINES STREET 93 #01-120 SINGAPORE 528838 TEL: 67840039 (24 hrs) HP: 98154655 Email: hupmotor@gmail.com

INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cacil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

COVER: COMPREHENSIVE

Office (65) 63476100 Email insure@fil.com.sg Pax (65) 62244174 Website www.ii.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189).
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1999 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D19MPC0002896

: SDS275B

1. Index Mark and Registration Number of Vehicle

: JM6GJ1072G0208482

2. Name of Policyholder

Chassis No

: WONG KOK WAI KENNETH

3 Effective date of Insurance

: 16 Jun 2019

4. Expiry date of Insurance

: 15 Jun 2020

- 5. Persons or Classes of Persons entitled to drive*
 - (a) The Policyholder

The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle

Limitations as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover

- a) Use for hire or reward.
- b) Use for racing, pace-making, reliability trial, speed-testing
- c) Use for the carriage of goods other than samples in connection with any trade or business.
- d) Use for any purpose in connection with the Motor Trade:

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Insured & Named Drivers Excess Sect I :SGD750.00 Unnamed Drivers Excess Sect I :SGD1250.00 Windscreen Excess :SGD100.00

Hire Purchase Company : N

FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.

I/We HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Agent/Broker : A000038/M Plus Consultancy

Date of Issue : 04/06/2019 12:07:13 MXI-Private Car (Insured Driving) For India International Insurance Pte Ltd

Authorised Signatory

Vehicle Details	
Vehicle No.:	SDS275B
Make / Model:	MAZDA / MAZDA6 4-DOOR SEDAN 2.0L SP.6EAT
Vehicle Type :	P10 - Passenger Motor Car
Vehicle Attachment 1 :	No Attachment
Vehicle Scheme :	Normal
Chassis No.:	JM6GJ1072G0208482
Propellant:	Petrol
Engine No.:	PE20655019
Motor No. :	-
Engine Capacity :	1998 cc
Power Rating :	-
Maximum Power Output :	121.0 kW (162 bhp)
Maximum Laden Weight :	1935 kg
Unladen Weight:	1454 kg
Year Of Manufacture :	2015
Original Registration Date :	16 Jun 2015
Lifespan Expiry Date :	-
COE Category :	B - Car above 1600cc or 97kW (130bhp)
Quota Premium :	\$78,001.00
COE Expiry Date :	15 Jun 2025
Road Tax Expiry Date :	15 Jun 2020
PARF Eligibility Expiry Date :	15 Jun 2025
Inspection Due Date :	15 Jun 2020
Intended Transfer Date :	18 Jan 2020
CO2 Emission :	138.00 (g/km)
CEV/VES Rebate Utilised Amount :	\$10,000.00
CO Emission :	-
HC Emission :	-
NOx Emission :	
PM Emission :	

Fees To Be Paid For Transfer	
Transfer Fees	\$25.00
	