

**KAH MOTOR CO. SDN. BHD.**

(A Member of the Oriental Holdings Berhad)

Service and Body Repair

Tel: +65 6841 3838

Website: www.honda.com.sg

For 24-hours Roadside Assistance, Call 98203838

QUOTATION

GST Reg No.: M200050223

Company Ref. No.: S60FC1380G

Customer	: LONPAC INSURANCE BHD 100 BEACH ROAD #19-00 SHAW TOWERS SINGAPORE 189702	Document No.	: SQT20001026	Page	1
Registration No	: SLE590U	Date	: 2. Mar 2020	Customer No.	: WZL009
Chassis No	: JHMRC1890GC204289	Svc Advisor	: NG SIN HAI	Engine No	: K24W72012005
Model	: ODYSSEY2.4 EXV-S 16YM NAVI-RES	Date Time	: 2. Mar 2020 4:17:34 PM	Surveyor Name	:
Owner's Name	: PHANG YEAN MOI	Survey Date	:	Authorisation Date	:
Ins Policy No.	:				
Date of Accident	: 29/2/2020				

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
	TP DIRECT SETTLEMENT (J/NO:) OWNER: OWNER INSURER: ACC DATE: SURVEYED BY: DATE: REF NO: TP INSURER: TP VEH:						
BOSUN	SUNDRIES	1	100.00		100.00	7.00	107.00
BA02R	REMOVE & RENEW REVERSE SENSORS-4 PCS (N)	1	140.00		140.00	9.80	149.80
BOJSE	SEALANT FOR REAR END PANEL	1	100.00		100.00	7.00	107.00
BOJSE	SEALANT FOR REAR FLOOR PANEL	1	100.00		100.00	7.00	107.00
BOJSE	SEALANT FOR TAILGATE	1	100.00		100.00	7.00	107.00
BML02I	INSPECT RR LIGHTING MECHANISMS. PERFORM WATER	1	100.00		100.00	7.00	107.00
BMI02D	REMOVE & INSTALL SPEAKER BOARD RR SEATS TRUNK	1	380.00		380.00	26.60	406.60
BKTG02R	REMOVE & TRANSFER ITEMS TO NEW TAILGATE. ADJUST &	1	420.00		420.00	29.40	449.40
BG02D	REMOVE & INSTALL RR. WINDSCREEN.(N)	1	680.00		680.00	47.60	727.60
BODAMKIT	WINDSCREEN DAM KIT.	1	100.00		100.00	7.00	107.00
BKRP02M	CUT OFF & RENEW RR PANEL.	1	6500.00		6500.00	455.00	6955.00
BP06R	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS. (6P)	1	4160.00		4160.00	291.20	4451.20
BKOT00R	REMOVE UPHOLSTERY SHATTERED GLASSES	1	650.00		650.00	45.50	695.50
BKBU01R	REMOVE, RE-FIX AND ALIGN REAR VIEW CAMERA	1	650.00		650.00	45.50	695.50
BC012R	RESET VEHICLE SMART ENTRY SYSTEM	1	650.00		650.00	45.50	695.50
Sum Labor					14830.00	1,038.10	15,868.10

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Part prices are subjected to change without notice.

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GST Amount is calculated from individual line(s).

An amount of \$53.50 (incl GST) will be applicable for the request of the above quotation for estimates above \$2,000.00.

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100 BEACH ROAD
#19-00 SHAW TOWERS
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Registration No : SLE590U

Chassis No : JHMRC1890GC204289

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Owner's Name : PHANG YEAN MOI

Ins Policy No. :

Date of Accident : 29/2/2020

Document No. : SQT20001026

Date : 2. Mar 2020

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Engine No : K24W72012005

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Page 2

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
RS-TMP3040L	VPC 4PCS REAR SENSORS	1	320.00		320.00	22.40	342.40
BO-NUM-COMP-L	NUMBER PLATE WITH CASING-L(N)	1	45.00		45.00	3.15	48.15
33500-T6A-003	TAILLIGHT ASSYR.	1	859.90	25	644.92	45.14	690.06
33550-T6A-003	TAILLIGHT ASSYL.	1	859.90	25	644.92	45.14	690.06
34150-T6A-003	LIGHT ASSYR.LID	1	396.20	25	297.15	20.80	317.95
34155-T6A-003	LIGHT ASSYL.LID	1	396.20	25	297.15	20.80	317.95
74890-T6A-J01	GARNISH ASSYRR.LICENSE	1	236.40	25	177.30	12.41	189.71
68100-T6A-Q10ZZ	TAILGATE COMP	1	1098.60	25	823.95	57.68	881.63
74440-T6A-003	WEATHERSTRIPTAILGATE	1	120.50	25	90.37	6.33	96.70
74891-T6A-003	MOLDING ASSYRR.LICENSE GARN	1	180.10	25	135.07	9.45	144.52
74900-T6A-003ZB	GARNISH ASSYTAILGATE SPOILER	1	630.30	25	472.72	33.09	505.81
91513-T6A-003	CLIPTAILGATE SPOILER	6	2.50	25	11.25	0.79	12.04
75701-T6A-000	EMBLEMH	1	27.00	25	20.25	1.42	21.67
04715-T6A-900ZZ	FACERR.BUMPER	1	583.10	25	437.32	30.61	467.93
33505-SLJ-013	REFLECTOR ASSYR.RR.	1	46.50	25	34.87	2.44	37.31
33555-SLJ-013	REFLECTOR ASSYL.RR.	1	46.50	25	34.87	2.44	37.31
71502-T6A-003ZB	FACER.RR.BUMPER GARNISH	1	78.80	25	59.10	4.14	63.24
71507-T6A-003ZB	FACEL.RR.BUMPER GARNISH	1	78.80	25	59.10	4.14	63.24
71512-T6A-921ZB	SPOILER ASSYR.RR.SIDE	1	117.10	25	87.82	6.15	93.97
71517-T6A-921ZB	SPOILER ASSYL.RR.SIDE	1	117.10	25	87.82	6.15	93.97
71593-T6A-003	SPACERR.RR.BUMPER SIDE	1	19.60	25	14.70	1.03	15.73
71598-T6A-003	SPACERL.RR.BUMPER SIDE	1	19.60	25	14.70	1.03	15.73
91505-TM8-003	CLIP,BUMPER	7	2.30	25	12.07	0.84	12.91
66100-T6A-300ZZ	PANEL COMP,RR.	1	472.80	25	354.60	24.82	379.42
04656-T6A-300ZZ	PAN SET3RD SEAT	1	346.70	25	260.02	18.20	278.22
72841-SH3-315	OILSHEET	3	41.70	25	93.82	6.57	100.39
84431-T6A-J01ZA	LINING ASSYTAILGATE LOWER	1	211.60	25	158.70	11.11	169.81
84441-T6A-J01ZA	POCKETTAILGATE LINING PULL	1	11.00	25	8.25	0.58	8.83
84615-T6A-N71ZD	LINING COMPR.RR.SIDE	1	806.90	25	605.17	42.36	647.53

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84640-T6A-003ZA	LINING ASSYRR.PANEL	1	106.30	25	79.72	5.58	85.30
84643-T6A-Q01ZA	COMP LIDTOOL	1	63.00	25	47.25	3.31	50.56
84665-T6A-N71ZD	LINING COMPL.RR.SIDE	1	783.40	25	587.55	41.13	628.68
73211-T6A-Q02	GLASS SET,RR.WINDSHIELD	1	1037.30	25	777.97	54.46	832.43
73214-T6A-003	MOLDINGRR.WINDSHIELD SIDE	2	18.50	25	27.75	1.94	29.69
73215-T6A-003	MOLDINGRR.WINDSHIELD CORNER	1	17.30	25	12.97	0.91	13.88
73216-T6A-003	MOLDINGL.RR.WINDSHIELD CORNER	1	17.30	25	12.97	0.91	13.88
73221-SR4-000	SPACERRR.W/SHIELD	4	4.00	25	12.00	0.84	12.84
73225-TM8-000	RUBBER AWINDSHIELD DAM	1	3.80	25	2.85	0.20	3.05
73226-SZW-000	DAMPERSTD 5X5	2	8.70	25	13.05	0.91	13.96
76711-T6A-003	CAPPIVOT	1	5.00	25	3.75	0.26	4.01
BO-WS-SEALANT	WINDSCREEN SEALANT (N)	2	60.00		120.00	8.40	128.40
Sum Item					8000.81	560.06	8,560.87
BO-V-KOOL-RWS	SUPPLY & INSTALL SOLAR FILM ON REAR WINDSCREEN.	1	300.00		300.00	21.00	321.00
Sum Ext. Service					300.00	21.00	321.00

Survey By

Date & Time

Excess

Status

Signature

Total Amount 23,130.81 1,619.16 24,749.97**Total (Inclusive of GST)** 24,749.97

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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 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	02/03/2020 16:39
Date Of Accident	29/02/2020 14:25
Exact Location Of Accident	JALAN JURONG KECHIL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE590U
Insured/Policyholder	
Name Of Registered Owner	PHANG YEAN MOI
NRIC No	SXXXX154C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81836288
Alternative Phone No	OFFICE-81836288

Vehicle Particulars

Manufacturer	HONDA
Model	ODYSSEY-2.4 (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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	YEW EU MIN
NRIC No	SXXXX912F
Date Of Birth	07/04/1975
Occupation	INDOOR
Date Of Driving Pass	22/01/2000
Driving Experience	20 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81836288
Fax Number	
Contact Number	OFFICE-81836288
Email Address	NOEMAIL

Address	S
Postcode	
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
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

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBG7408B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	


Sketch Plan

Vehicle Number: _____


SKETCH PLAN

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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 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.

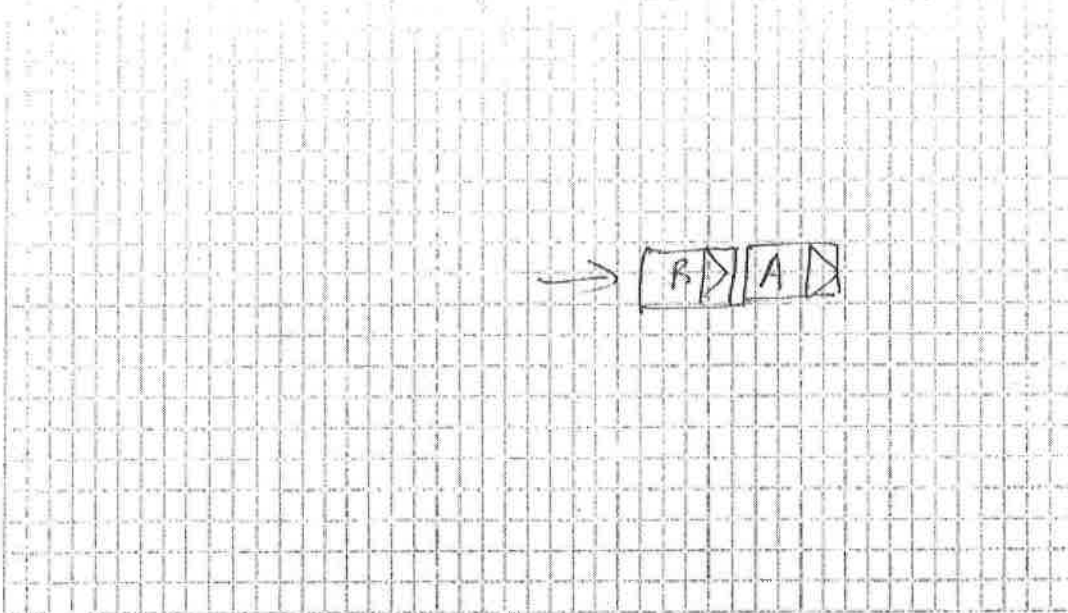

Policyholder's Signature
Date & Time: _____

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


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

Vehicle Number:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving home along Jalan Juru Kerhil.
As I approached the traffic light at the junction of
Jalan Juru Kerhil and Joh Y. Dr (I was beside busstop
42154) the traffic light turned red and the car
in front of me stopped, hence I stopped too.
Suddenly I experienced a loud bang and from behind.
The vehicle behind me had hit my rear rear.

DECLARATION

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


Policyholder's Signature
Date & Time: _____

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


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