

Date of accident 31/03/2020  
Your Insured vehicle no. SHA 78H

**HWA SENG SPRAY PAINTING CO**  
160 Sin Ming Drive  
#05-11 Sin Ming Autocity  
SINGAPORE 575722  
(REGISTRATION NO.: 095744/00B)  
TEL : 64533100  
FAX : 62669932

**ESTIMATE REPAIR COSTS TO HONDA INSIGHT REG. NO.: SKP 7326 A**

		S\$
1pc	Tailgate	928.20
2pcs	Tailgate Hinges (S\$42.20/pc)	84.40
2pcs	Tailgate Absorber (S\$124.80/pc)	249.60
1pc	Tailgate Garnish	305.60
1pc	Emblem 'INSIGHT'	48.50
1pc	Logo Emblem	38.60
1pc	Emblem 'HYBRID'	52.50
1pc	Tailgate Upper Lock	262.20
1pc	Tailgate Lower Lock	42.00
1pc	Tailgate Handle	74.80
2pcs	Taillamp (S\$576.00/pc)	1152.00
1pc	Tailgate Reflector	211.00
1pc	Rear Bumper	701.60
1pc	Rear Bumper Reinforcement	385.00
1pc	Rear Bumper Beam	197.00
2pcs	Rear Bumper Retainer (S\$47.40/pc)	94.80
1pc	Rear Bumper Lower Garnish	189.00
2pcs	Rear Bumper Lower Garnish Reflector (S\$44.20/pc)	88.40
1pc	End Panel	438.70
1pc	End Panel Garnish	141.20
1pc	Spare Tyre Panel	611.30
1pc	Spare Tyre Board	197.00

6493.40

Less : 20%

1298.68

5194.72

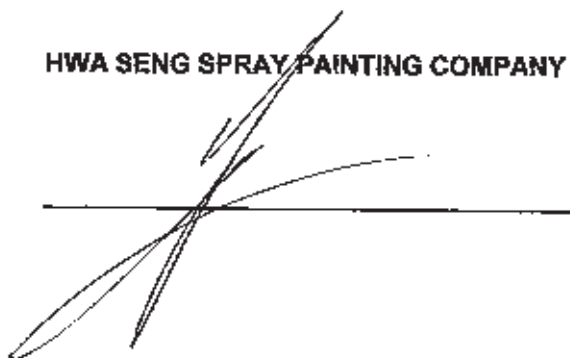
**LABOUR & MISC CHARGES**

Panel Knocking	1000.00
Spray Painting	1200.00
Wire Checking	50.00
Labour to remove and install rear windscreen	160.00
Sealant & Clip	80.00
Inner Seal	60.00
Labour to remove and install upholstery	150.00
1 Set Reverse Sensor	230.00
1 set Number Plate with Holder	75.00

**TOTAL**

8199.72

**HWA SENG SPRAY PAINTING COMPANY**



## 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	01/04/2020 08:40
Date Of Accident	31/03/2020 06:35
Exact Location Of Accident	T-JUNCTION OF YISHUN RING ROAD AND YISHUN STREET61
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP7326A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	THONG LEE LEASING PTE LTD
Co Reg No	2XXXXX578W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64533633
<b>Vehicle Particulars</b>	
Manufacturer	HONDA
Model	INSIGHT
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5091283578-03
Cover Note Number	
<b>Driver</b>	
Name of Driver	CHENG FOONG LENG
NRIC No	SXXXX654F
Date Of Birth	23/07/1970
Occupation	OUTDOOR
Date Of Driving Pass	30/03/1992
Driving Experience	28 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96530693
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 248 HOUGANG AVENUE 3 #12-428 SINGAPORE
Postcode	530248
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800 - 3438999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHED AND POLICE REPORT

#### 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	SHA7817P
Vehicle Make/Model/Colour	
Details Of Properties	REFER POLICE REPORT AND ATTACHED
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	92472786
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	CHENG FOONG LENG
Approximate Age	
Injuries Sustain	REFER POLICE REPORT AND ATTACHED
Injured person in which vehicle?	SKP7326A
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

IMPORTANT NOTICE

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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. 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.
7. By the lodging 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/PRN No.:

SKETCH PLAN

YISHUN RING ROAD

B → A

→

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

←

A : SRP 7326 A  
B : SHA 7817 P

YISHUN  
17/5

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was waiting for traffic light clearance in a stationary position. A taxi bearing SHA 7817 P collided into the rear of my vehicle causing damages.

Refer Police Statement.

DECLARATION

We declare the foregoing particulars are true in every respect.



Police Officer's Signature  
Date & Time:

Driver's Signature

(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name:  
NRIC/PPN No.:



**SINGAPORE  
POLICE FORCE**



F/20200331/2035

1 of 2

**POLICE REPORT (NP299)**

Report No. F/20200331/2035

Police Station Of Origin  
Sengkang N.P.C  
2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999

Date/Time Report Made 31/03/2020 12:40	Vide Report No.	Station Diary No. 60
Name Of Informant CHENG FOONG LENG	Address APT BLK 248 HOUGANG AVENUE 3 #12-428 SINGAPORE 530248	
ID Type / ID No. NRIC NO / S7024654F	Contact No. Home/Office	Mobile 96630693
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Private Hire Driver	Sex Female	Age 49
Institution/School Name	Date of Birth 23/07/1970	Race Chinese
Date/Time Of Incident 31/03/2020 06:30 - 31/03/2020 06:35	Location Of Incident Intersection of Yishun Ring Road and Yishun Street 61 SINGAPORE	

**Brief details.**

I am lodging this report for record purposes with regards to a traffic accident.

On 31/03/2020 at about 0630hrs, my private hire vehicle (SKP7320A) was involved in a motor vehicle accident with one taxi (SHA7817P) at the intersection of Yishun Ring Road and Yishun St 61. I was waiting for the traffic light clearance in a stationary position and the said taxi collided into the rear of my vehicle causing damages. I am feeling slight pain in my neck area as a result of the accident. I would also

Signature Of Officer Recording The Report: F / Insp VINOTH ILANGO VAN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 31/03/2020 12:40
Officer In-Charge Of Case: F / Sengkang N.P.C / Sr Staff Sgt MOHAMED AASHIF Contact No.: 63438999	Classification Of Case:

Authentication Stamp

Singapore Police Force



**SINGAPORE  
POLICE FORCE**



F/20200331/2035

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20200331/2035

like to add that there was no one else in either vehicles at the time of the accident. I have already informed my private hire vehicle company 'Thong Lee' and they have informed me to lodge a police report. That is all.

Signature Of Officer Recording The Report:

F / Insp VINOTH ILANGO VAN

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
F / Sengkang N.P.C /  
Sr Staff Sgt MOHAMED AASHIF  
Contact No.: 63438999

Signature Of Informant:

Date/Time:  
31/03/2020 12:40

Classification Of Case:

Authentication Stamp

SN 09:



Signature:

Singapore Police Force