

J-MART MOTOR PTE LTD

Block 5, Defu Lane 10, #01-578,
Defu Industrial Park C, Singapore 539186
Tel : 6343-0934 Fax : 6343-0921
Email : jmartauto@gmail.com
Registration No: 201400246D
GST Reg. No: 201400246D

RE : estimate cost for vehicle no : GBA 7618T

Bal brought forward:	\$	14,808.50
Towing.		100.00
Panel beating.		2000.00
Spray painting.		2,000.00
Transfer 2 door parts.		160.00
Alignment.		80.00
Undercarriage.		300.00
		<hr/> 19,448.50
	Plus 7% GST	<hr/> 1,361.40
		<hr/> 20,809.90

SD : Twenty thousand eight hundred nine & cents ninety only.

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22-Apr-20

Our ref : TP/4837/20

Chye Hup Seng Trading Company

RE : estimate cost for vehicle no : GBA 7618T

1 pc	frt rh door	\$	1,960.00
1 pc	frt rh door protector		210.00
2 pcs	frt rh door hinges		180.00
1 pc	frt rh door handle		170.00
1 pc	frt rh door w/strip		236.00
1 pc	frt rh door lock		230.00
1 pc	frt rh door regulator gear		364.00
1 pc	frt rh door regulator motor		574.00
1 pc	frt rh door trimboard		764.00
1 pc	frt rh door step garnish		210.00
1 pc	frt rh door lock switch		170.00
1 pc	frt rh pillar rubber		180.00
1 pc	rear rh door		1,760.00
1 pc	rear rh door protector		210.00
1 pc	rear rh door outer handle		170.00
2 pcs	rear rh door hinges		180.00
1 pc	rear rh door lock		230.00
1 pc	rear rh door catch		90.00
1 pc	rear rh door regulator gear		364.00
1 pc	rear rh door regulator gear motor		574.00
1 pc	rear rh door w/strip		230.00
1 pc	rear rh door trimboard		764.00
1 pc	rear rh door pillar rubber		170.00
1 pc	centre door pillar		1070.00
1 pc	rocker panel		860.00
1 pc	rear rh door pillar		1280.00
1 pc	rear rh fender		1540.00
1 pc	rear axle		1980.00
1 pc	rear rh air duct		90.00
			<hr/>
			16810.00
		less 15%	<hr/>
			2521.50
			<hr/>
			14288.50
1 pc	body sticker		20.00 snett
1 pc	rear rh tyre		250.00
1 pc	rear rh rim		250.00
			<hr/>
			14808.50

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 21/04/2020 11:42
 Date Of Accident 20/04/2020 13:50
 Exact Location Of Accident JUNC DEFU LANE 1 & DEFU AVE 2
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBA7618T
Insured/Policyholder
 Name Of Registered Owner CHYE HUP SENG TRADING COMPANY
 Co Reg No 0XXXX300X
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-89999999

Vehicle Particulars

Manufacturer ISUZU
 Model TFR86HDR
 Exact Purpose for which vehicle was being used at time of accident WORKING
 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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company LONPAC INSURANCE BHD
 Type Of Coverage THIRD PARTY
 Fleet Policy NO
 Policy Number Z19V05003921
 Cover Note Number

Driver

Name of Driver ANG SOK HUAT
 NRIC No SXXXX566J
 Date Of Birth 04/09/1957
 Occupation INDOOR
 Date Of Driving Pass 18/10/1978
 Driving Experience 41 YEARS AND 6 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-96615484
 Fax Number
 Contact Number OFFICE-96615484
 EMail Address NOEMAIL

Address	BLK 604 ANG MO KIO AVENUE 5
	#10-2701
Postcode	560604
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	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	2
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

REFER TO STATEMENT.

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	SHF589S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
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

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2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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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 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.

再合成貿易公司
IYE HUP SENG TRADING CO

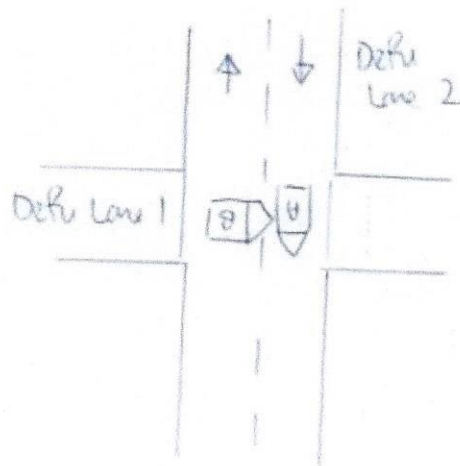
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



Date: 20/4/20
 A: GBA 7618T
 B: SHF 589S

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I'm driving along the main road of Defu Lane 2, suddenly veh B came out from the small road of Defu Lane 1 & failed to stop at the stop line & collided onto my veh RH portion.

DECLARATION
 再 告 司
 HYE HUP SENG TRADING CO. is true in every respect.

Policyholder's Signature
 Date & Time:

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

Reporting Centre Personnel Signature
 Name:
 NRIC/FIN No.: