|   | SSIGNMENT COCKARY: 20224   |
|---|--|
| <u>AS</u>                                       |  |
| From Date                                       | Veh No SKD 8974K - 3012 JAN  |
| Estimated Cost.                                 | Type M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  |
| OD / TP / WS / TP RES / OD RES / EVA / INV / MV | Truck / Trailer or   |
| To the second Victorial Alice                   | Make: MERCENES 7602 C180 Komp 1597   |
|   | Colour GREY A. Insured / Std / NI / NA   |
| at Workshop m/s                                 | Sp.Reading 133 781 The adio, Insured / Std / NI / NA   |
| d   | Eng/No:  |
| nsured.   | C/No: WDD 201404529664912  |
| Policy No                                       | Gen. Cond: Good / Fair/ Poor / Burnt   |
| Claims No.                                      | Steering: Inorder / Jammed / Leaked / Burnt or   |
| Sum Insured: Excess:                            | - 8  |
| (Client's Record)                               |  |
| Make of Veh:                                    | Modi: Nil / SRim / STD A/Rim or  |
|   | Tyre Size: F: 225/45R1   |
| (Policy Condition)                              | R:   |
| Remark: The veh had commenced its N/S C         | DIS BS / DUN' EXNOVA / GY / FS / LIZA / MIC - OHTSU . PIR : SUM!   |
| repair at the time of inspection.               | TOYO / YOKO or   |
| Sal, or Market Value: 38K                       | Front  |
| DAC Ascident Rport: Consistent? : Yes or No     | R/Bal. 6 mm P Sal. 5 mm  |
| Consistent2 : Ves or No                         | L/Bal. 6 mm L Sal. 6 mm  |
| Ros · Yes or No                                 | D.O.A. (5 04) 2020 = 31. 19/05/2020  |
| 3 Val. Yes or No                                | Survey held at Moun (Bm)   |
| Lum Sum: 76                                     | Des. of Damages From Rear I O/S I N/S I U/C I Rooftop or   |
| CA / REV / REP. / 24 HRS                        |  |
| Vehicle: IN  Date: Person Contacted:            | The U/C / Chassis frame / Body Structure affected due to collision.  |
| Date / Time   Action / Instruction              |  |
| Soler time                                      |  |
|   |  |
|   |  |
|   | ·  |
|   |  |
|   |  |
|   |  |
|   | in the second se |
|   | Days Of Repair:  |
| Date/Time, File Pass to? : Preli. Report        | Rosurvey No. of Trip: Survey Fee.  |
| i) : Final Report                               | Resurvey No. of Trip.  |
| Date/Time, File Return to?                      |  |
| 2)  |  |
|   | . Interview 15 tales   |
| Per Formal :                                    | : Tech. Invs (3  |
| Lang Page (18 Atte                              | Weal end   |



Automotive

Main Office:

Mova Building No. 22, Jalan Kilang, Singapore 159419 Tel: (65) 6476 3333 Fax: (65) 6271 5891 www.mova.com.sg

Workshop Dept: Block 1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: **(65) 6272 3892** Fax: (65) 6270 8314

:- TP/CK138155 Co. Reg. 198904033G GST Reg. M2-0088864-2 ACC. Date :- 15/04/20

:- C.O.D Days Terms

Estimate# :- CK420627

:- SKD8974K

Veh Model: - MERCEDES-BENZ C180

Page #

Veh#

Claim #

Remarks :- WFG 17 JW 2012 (2011)

**Estimate** 

22/04/2020

CHINA TAIPING INSURANCE (S) PTE LTD 3 Anson Road #16-00 Springleaf Tower

Singapore 079909.

Attention :- XA017

| No.        | Description  | Qt | y        | U.Price Ar                              | mounts S\$                                 |
|------------|--|----|----------|---|--|
|            | LIST ITEMS :   |    |          |   |  |
| 1.         | FRONT GRILLE ASSY  | 1  | PC       | 790.00                                  | 790.00                                     |
| 2.         | FRONT GRILLE BRACKET   | 1  | PC       | 35.00                                   | 35.00                                      |
| 3.         | FRONT BUMPER &-  | 1  | PC       | 1,350.00                                | 1,350.00                                   |
| 4.         | FRONT NUMBER PLATE GARNISH CLAR  | 1  | PC       | 145.00                                  | 145.00                                     |
| 5.         | FRONT BUMPER CHROME LH & RH  | 2  | PC       | 112.00                                  | 224.00<br>135.00                           |
| 6.         | FRONT BUMPER LOWER GRILLE &-   | 1  | PC       | 135.00                                  | 135.00                                     |
| 7.         | FRONT BUMPER SPONGE ?  | 1  | PC       | 135.00                                  | 1,755.00                                   |
| 8.         | BOOTLID LOGO No.   | 1  | PC       | 1,755.00                                | 55.00                                      |
| 9.         | BOOT EMBLEM - C180 No.   |    | PC       | 55.00                                   | 90.00                                      |
| 10.        | BOOT EMBLEM - COMPRESSOR   | 1  | PC       | 90.00                                   | 115.00                                     |
| 11.<br>12. | TAUL 4440 DU 7   | 1  | PC<br>PC | 115.00<br>668.00                        | 668.00                                     |
| 13.        | TALLAND CARALLILLS BUILTY X /KH - '  | 2  | PC       | 35.00                                   | 70.00                                      |
| 14.        | TAILLAMP GARNISH LH & RH LH - X   RH - Y   RH - ?  | 2  | PC       | 78.00                                   | 156.00                                     |
| 15.        | REAR BUMPER  | 1  | PC       | 1,365.00                                | 1,365.00                                   |
| 16.        | REAR BUMPER CHROME CTR CAR   | 1  | PC       | 198.00                                  | 198.00                                     |
| 17.        | REAR BUMPER CHROME LH & RH   | 2  | PC       | 145.00                                  | 290.00                                     |
| 18.        | REAR BUMPER TOW COVER RH 🛪   | 1  | PC       | 54.00                                   | 54.00                                      |
| 19.        | REAR BUMPER REINFORCEMENT .  | i  | PC       | 735.00                                  | 735.00                                     |
| 20.        | REAR BUMPER SIDE RETAINER LH & RH ME /   | 2  | PC       | 45.00                                   | 90.00                                      |
| 21.        | HEADLAMP RH - CHECK  | 1  | PC       | 10.00                                   |  |
| 22.        | FRONT BUMPER REINFORCEMENT - CHECK   | 1  |          |   |  |
| 23.        | END PANEL - REPAIR   | i  | 10       |   |  |
|            | LIST TOTAL S\$   |    |          |   | 8,455.00                                   |
|            | 10% DISCOUNT S\$   |    |          |   | -845.50                                    |
|            |  |    |          | ******                                  | 7,609.50                                   |
|            | SPECIAL NET ITEMS :  |    |          |   |  |
| 1.         | FRONT NUMBER PLATE AF  | 1  | PC       | 40.00                                   | 40.00                                      |
| 2.         | REAR PARKING SENSOR ( )  | 1  |          | 300.00                                  | 300.00                                     |
|            | SPECIAL NET TOTAL S\$  |    |          | *************************************** | 340.00                                     |
|            | LABOUR :   |    |          | =====                                   |  |
|            | TO INSPECT FRONT & REAR LIGHTING MECHANISM   |    |          |   | 40 89.00<br>60 89.60                       |
|            | TO REPLACE REAR PARKING SENSOR & DIAGNOSE  |    |          |   | , .  |
|            | FUNCTION   |    |          | 3                                       | 60 80.0                                    |
|            | TO REPAIR ON END PANEL. TO REMOVE & REPLACE  |    |          |   | h <del>a</del> n                           |
|            | DAMAGED ITEMS. REALIGN CONNECTION  |    |          |   | 500.0                                      |
|            | TO REMOVE & REPLACE FRONT DAMAGED ITEMS.   |    |          |   | •  |
|            | REALIGN CONNECTION   |    |          | _                                       | 00 2000                                    |
|            | The second secon |    |          | -                                       | 288.0                                      |
|            | TO RUST PROOF ON REPAIRED AREAAS   |    |          |   | 598.60<br>288.60<br>40 88.60<br>700 808.60 |
|            | TO SPRAY PAINT ON REPAIRED AREAS   |    |          | 57-1-1                                  | , ,  |
|            |  |    |          | 30                                      | 100 8000                                   |
|            |  |    |          |   |  |



## Main Office:

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Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

**Estimate** 

22/04/2020

CHINA TAIPING INSURANCE (S) PTE LTD

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909.

Attention :- XA017

Veh Model :- MERCEDES-BENZ C180

:- 1

:- SKD8974K

Estimate# :- CK420627

Claim #

ACC. Date :- 15/04/20

Terms

Page #

Veh#

:- C.O.D Days

Remarks

No. Description Qty

138155

U.Price Amounts S\$

LABOUR TOTAL S\$

1,820.00

E. & O.E

NON-TAX AMOUNT S

AMOUNT S\$

9,769.50

GST @ 7 %

683.87

AMOUNT DUE S\$

10,453.37

Customer's Signature/Co. Stamp MOVA/AUTOMOTIVE PTE LTD

Jacelyn

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:

Hp 90010068 6 days 19/05/2020@14orbs

Reay after repair

Nove: Owner request vehicle

to be rejected on part by

part basis.

#### 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 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.

| ACCID | ENTE | MATE | MEN | 10 |
|-------|------|------|-----|----|
|-------|------|------|-----|----|

16/04/2020 16:55 Date Of Report 15/04/2020 20:10 Date Of Accident

JUNCTION OF THOMSON RD & MOULMEIN ROAD **Exact Location Of Accident** 

Country/State of Loss SINGAPORE

#### IDETAILS OF OWN VEHICLE

SKD8974K Vehicle Registration Number

Insured/Policyholder

Name Of Registered Owner STEVEN LEE KENG SENG

SXXXX107F NRIC No

**Email Address** STLEEKS@GMAIL.COM (LOCAL) +65-98184844 Mobile Phone No. OFFICE-NOPHONE Alternative Phone No

Vehicle Particulars

MERCEDES-BENZ Manufacturer C 180 KOMPRESSOR Model

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?

THIRD PARTY If No. Please state action to be taken PRIVATE CAR

Vehicle Category

Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

5109212512-01 Policy Number

Cover Note Number

Driver

Name of Driver STEVEN LEE KENG SENG

NRIC No SXXXX107F Date Of Birth 18/12/1951 Occupation INDOOR Date Of Driving Pass 18/11/1977

**Driving Experience** 42 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98184844

Fax Number

Contact Number OFFICE-NOPHONE **EMail Address** STLEEKS@GMAIL.COM Address

3 RHU CROSS

#05-06

Postcode

437433

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

•

Insurance Company of Driver's Own Vehicle

-

modulino company and an arrangement

-

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

NO

Was any body injured in the Accident?

....

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)

2

Passenger 1

NAME:

: ANG YUET FONG

GENDER:

: FEMALE

**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

PLEASE REFER TO THE SKETCH PLAN

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 11

Vehicle Registration Number

SGJ3072L

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

LIM WEE MENG, JERALD

NRIC/Passport Number

SXXXX146J

Contact Number

92730903

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 17

# DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SKZ7718A

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

TEO HIEN CHEW

SXXXX650C

96233829

#### 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:

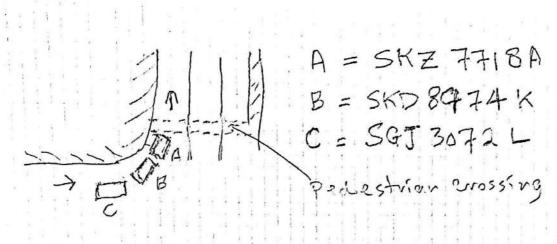
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
  - 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:
  - 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.:

16/4/2050



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Policyholder's Signature

17 15 hrs

Date & Time:

| LK   | CENSE PLATE: SKD 8974 K ACCIDENT DATE & TIME: 15th April 2020 28.10   |  |  |  |
|--|---|--|--|--|
| CC   | ONTACT NUMBER: 98184844 E-MAIL ADDRESS: Stlacks@qmail.com   |  |  |  |
| L  | OCATION: Junction of Thomson Road and Moulemein Road.   |  |  |  |
| 2  | In 15/4/2020 at about 8,10pm I stopped my valuede beliend<br>SKZ7718A which was then stopped to give way to a<br>Pedestrian crossing the traffic Light junction with right of<br>way (greenman), approx 2 to 3 seconds after my cast<br>came to a complete stop. I feet an impact outo my |  |  |  |
|  | car, and me and front passenger's upper body and head   |  |  |  |
|  | I then realised that & car (5GI 3072L) had knocked  |  |  |  |
|  | onto the real of my car and caused my can to stift  |  |  |  |
|  | Forward to knock outs the back real of SKITTIBA.  |  |  |  |
|  | Prior to the impact my car has a clearance of approx  |  |  |  |
|  | 2m to 5KZ 7718A been  |  |  |  |
| 7  | Both my passenger and manight have injured by the impact force  |  |  |  |
| NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMI |   |  |  |  |
|  | OWN DAMAGE CLAIM UNDER YOUR OWN POLICY, PLEASE CHECK YOUR POLICY FOR MORE INFORMATION   |  |  |  |
|  | Please state:   |  |  |  |
|  | ( ) Claim Own Policy ( ) Claim OD/TP at other workshop ( ) Reporting Only   |  |  |  |
|  | DECLARATION  I/We declare the foregoing particulars are true in every respect.  |  |  |  |

Driver's Signature

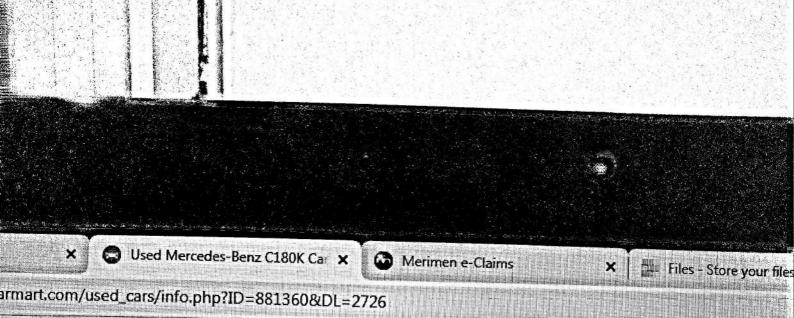
Date & Time:

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



| Price           | \$38,800                                       |                 |  |  |  |
|-----------------|--|-----------------|--|--|--|
| Depreciation ②  | \$13,670 /yr<br>View models with similar depre | Reg Date        | 31-Jan-2012<br>(1yr 8mths 11days COE left) |  |  |
| Mileage         | 134,000 km (16.1k /yr)                         | Manufactured ②  | 2011                                       |  |  |
| Road Tax (*)    | \$742 /yr                                      | Transmission    | Auto                                       |  |  |
| Dereg Value ②   | \$25,069 as of today (change)                  | OMV ①           | \$31,076                                   |  |  |
| COE             | \$46,889                                       | ARF ③           | \$31,076                                   |  |  |
| Engine Cap      | 1,597 cc                                       | Power           | 115.0 kW (154 bhp)                         |  |  |
| Curb Weight 🕒   | 1,500 kg                                       | No. of Owners ( | 2  |  |  |
| Type of Vehicle | Luxury Sedan                                   |                 |  |  |  |

## Features

Fuel Economy 1.6L 4 Cylinders Inline Supercharged Engine, 5 Speed Automatic Transmission, Cruise Control, SRS Airpag, ABS, Auto Headlamp, Rain Sensor. View specs of the Mercedes-Benz C-Class Saloon (2002-2006)

#### Accessories

Multi Function Steering, Cruise Control, Auto Headlights/Wipers, Electric Seats, Retractable Side Mirror With Indicators, Day Running Lights, Fog Lamp

# Description