

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

TAX INVOICE

EQ INSURANCE COMPANY LTD 5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEX SINGAPORE 069110 INV No. AC2007481

INV Date 09/11/2020

Reference CS/EQI20011239/Uqf3e2

Code EQ

PROFESSIONAL SERVICE FEE

Vehicle No. SMQ 9702E

Insured Veh. SKT 3207R

Claim No. DM20HO01516-JG

Policy No. DMPPHQ20-003330

Accident Date 14/10/2020

Inspection Date 20/10/2020

Description	Total
Survey Inspection	160.00
Resurvey Inspection	
Digital Photographs	
Transportation	
Subtotal	160.00
GST (7%)	11.20
Grand Total	171.20

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to 'LKK Auto Consultants Pte Ltd'

LKK Auto Consultants Pte Ltd

KHM



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		Affiliated to Federation Internation	nale Des Experts En Automobi	le			
EQ II	NSURANCE COM	PANY LTD	Ref : CS/EQI20011239/U	Jqf3e2			
#17-0	XWELL ROAD 00 TOWER BLOCK Date: 09-11-2020 COMPLEXSINGAPORE 069110 Code: EQI						
1.							
	Insured Veh.	SKT 3207R	Veh. Inspected	SMQ 9702E			
	Policy No.	DMPPHQ20-003330	Coverage (\$)	0.00			
	Claim No.	DM20HO01516-JG	Excess (\$)	0.00			
	Assign From	JOEL GOH	Assign Date	16/10/2020			
2.		Vehicle Partic	culars & Condition				
	Make & Model	KIA CERATO (A)	c.c	1591			
	Engine No.	HIDDEN	Year of Reg.	2019			
	Chassis No.	KNAF3416MK5047524	Colour	BLACK			
	Odometer	10767	Steering	IN ORDER			
	Brakes	IN ORDER	Modification	SPORTS RIM			
	General	GOOD					
3.	3. Conditions of Tyres						
		Size	Make	Balance			
	R/H Front Tyre	205/55 R16	NEXEN	8 mm			
	L/H Front Tyre	205/55 R16	NEXEN	8 mm			
	R/H Rear Tyre	205/55 R16	NEXEN	8 mm			
	L/H Rear Tyre	205/55 R16	NEXEN	8 mm			
4.			on of Damages				
	THE VEHICLE SU	STAINED DAMAGES AT THE O/S	FRONT PORTION.				
	DAMAGES SEE DETAILS.						
5.			Information				
	Accident Date	14/10/2020	Inspection Date	20/10/2020			
	Survey held at	CYCLE & CARRIAGE.FULCO M	OTOR DEALER PL				
		NO.330 UBI ROAD 3 SINGAPORE 408650					
5a.		Re	emarks				
		ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W		REPAIRS.			
5b.		Estimate I	Days of Repair				
	ESTIMATED NORI	MAL PERIOD FOR REPAIR:	3 Working Days				



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMQ 9702E

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	RH LAMP ASSY-HEAD (SN)	NOT NECESSARY	1,219.00	-
1	COVER-FRONT BUMPER (SN)	DEEP CUT	633.00	633.00
1	LWR GRILLE-FRONT B (SN)	SCRATCHED	262.00	262.00
10	FASTENER-BUMPER (SN)	NECESSARY	20.00	20.00
1	RH BRACKET-FR BUMPER (SN)	NOT NECESSARY	22.00	-
1	LH BRACKET-FR BUMPER (SN)	NOT NECESSARY	22.00	-
1	RH MOULDING-FRONT BU (SN)	SCRATCHED	36.00	36.00
1	RH LAMP ASSY-SIDE (SN)	SCRATCHED	143.00	143.00
1	RH AIR DUCT-FR BUMPE (SN)	NOT NECESSARY	15.00	-
1	ORNAMENT-KIA NO.1 (ADDITIONAL)(SN)	NECESSARY	32.00	32.00
			2,404.00	1,126.00
	<u>LABOUR</u>			
	DIAGNOSTIC-SCANNING.		250.00	250.00
	TO CHECK ALL LIGHTING/WIRING SYSTEM ON FRONT ACCIDENT AFFECTED AREAS.		100.00	80.00
	TO REPLACE RH HEADLAMP, FRONT BUMPER UPR & LWR, SIGNAL LIGHT, CLIPS, BRACKETS, ETC. STRAIGHTEN, REFORM, ALIGN ON FRONT ACCIDENT AFFECTED AREAS.		1,200.00	600.00
	SPRAY PAINTING ON FRONT ACCIDENT AFFECTED AREAS.		1,260.00	420.00
			2,810.00	1,350.00
	GRAND TOTAL		5,214.00	2,476.00

RECOMMENDED COST OF REPAIRS			2,476.00
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Report Ref No. CS/EQI20011239/Uqf3e2

CHUA KANG SENG

Licensed Appraiser



CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD EUNOS LINK SERVICE CENTRE



330 Ubi Road 3 Singapore 408650 Tel: 67461000 Fax: 64875857

ESTIMATE

Invoice Name & Address	Marie S. Company of the Company of t	10
EQ INSURANCE COMPANY LTD	Cust No/Name	Owner Name & Vehicle Info
5 Maxwell Road #17-00	The second secon	LCV11683/Mr Ong Han Lee(Wang Hanli)
Tower Block, MND Complex.	Date In/Mileage	SMQ9702E*ECB19 / 12/12/2019
Singapore 069110	The second secon	The state of the s
		KNAF3416MK5047524
Contact No		G4FGKH741988
	Colour/Trim	KIA/CER1.6AEXG333
	COTOGE/TETM	ABP / WK

Account No	Terms	Date/Time Printed	CSE	0				
F0000061	All and the second			Operator		WIP No	Martin California	CAMBRICO VINCON
10000001	Mark Street, S	02/11/2020/ 11:33		303 / Renemer		54931	THE PERSON NAMED IN COLUMN 1	
		Description of Goods	e / Canilas		-			
X KS 86318	3R 500			THE RESERVE AND ADDRESS OF THE PARTY OF THE	Qty	Unit Price	Disc%	Amount
Z NOTES SUPPLEMEN		ORNAMENT - N	NIA NU. I	App	1.00	32.00	0.00	Nec 32.00



Confirm & accepted by	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-
confirm a accepted by	Parts	32.0
	Labour	0.0
	Standard Menu	0.0
	Specialist Job	0.0
	Others(Lub, etc)	0.0
	Sundry	0.0
Authorized signatory and company stamp	Total (w/o GST)	32.0

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number
Contact Number

EMail Address

- 1. Please report <u>correctly</u> 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</u> 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

	ACCIDENT STATEMENT
Date Of Report	15/10/2020 15:21
Date Of Accident	14/10/2020 09:00
Exact Location Of Accident	WOODLANDS SPORTS COMPLEX, OPEN CARPARK
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMQ9702E
Insured/Policyholder	
Name Of Registered Owner	ONG HAN LEE
NRIC No	S7827147G
Email Address	DARRENOHL78@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96903258
Alternative Phone No	OTHERS-96903258
Vehicle Particulars	
Manufacturer	KIA
Model	CERATO-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	STATIONARY MODE, PARKED IN A LOT
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	190025928
Cover Note Number	
Driver	
Name of Driver	ONG HAN LEE
NRIC No	S7827147G
Date Of Birth	20/09/1978
Occupation	OUTDOOR
Date Of Driving Pass	19/09/2000
Driving Experience	20 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96903258

OTHERS-96903258

DARRENOHL78@GMAIL.COM

Address BLK 996B BUANGKOK CRESCENT #16-901

Postcode 532996 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

-

General Information of the Accident

Type Of Accident COLLIDED INTO PARKED VEHICLE

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

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.

Number of Passengers (Including Driver) 0

Details of Police Action

Was the accident reported to the police?

If Yes,Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT

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 SKT3207R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver MRS GOH

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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Sketch Plan

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.
- 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:
 - (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:

Oriver's Signature (If driver is not the policyholder)

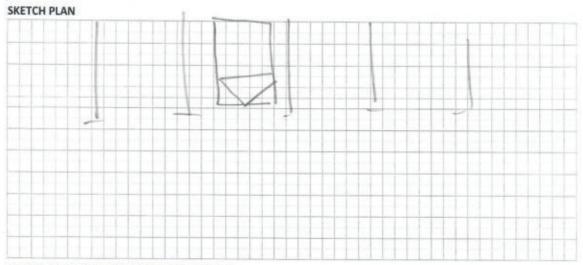
Date & Time:

Reporting Centre Personnel's Signature Name:

Name:

NRIC/FIN No.:

Sketch Plan #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14/10/20 @ anotoround 0900hs, I parked my vehicle
at a parting lot, upon carporle of woodlands Sport Complex
At around 1230hs when I went to retrieve my vehicle, I
Saw a note stating I may have scratched your car
98210303'. I then I noticed that my front right bumper
sistered screetch worlds. I called the number on the
note and spoke to one Mr Grah who mentioned that
his rufe had drove # relice 'SICT 3207 R' and had
hit my car while reversing.

DECLARATION

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

Policyholder's Signature

Date & Time: 15/10/20

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



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PHOTOGRAPHS FOR VEHICLE NO. SMQ 9702E

INSPECTION















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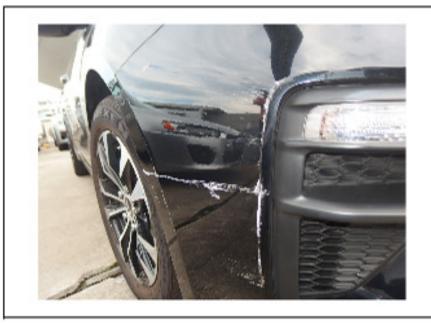
51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6256 3561 FAX: 6256 4315















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RE-INSPECTION











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RE-INSPECTION

