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OPT/MA///ERH SINGAPORE

OPTIMA WERKZ PTE LTD Co. Reg. No. 201212455W

www.ow.sg

6 /OptimaWerkz

/OptimaWerkz

Date:

12.12.2020

Vehicle No: SKE1231L

Model:

MERCEDES BENZ CLA180

Chassis:

WDD1173422N646259-2018

Reg.Year:

2018

Own Damage insurer: UOI

Third Party Veh No:

Date of Accident:

21.11.2019

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Not Asthoriu Rearry BEPRIM

		STIMATE	ر	Ex &	750L
NO.	DESCRIPTION		QTY	UNIT S\$	AMOUNT S\$
1	FRONT BUMPER		1	A.	r/em \$1,045.00
2	FRONT BUMPER SIDE BRACKET RH	and the second	1		P11 \$82.50
3	FRONT GRILLE ASSY FULL SET		1		CM \$550.00
4	FRONT BUMPER LOWER GRILLE	100 8 4 7 4 10	1		1 \$209.00
5	FRONT TOW COVER		1		Mir \$50.60
6	BONNET (Muninim)	7	1		Na \$880.00
7	FRONT LOCK ASSY		1		₹ \$192.50
8	FRONT REINFORCEMENT BEAM	A	1		\$220.00
9	FRONT SPONGE ABSORBER		1		\$110.00
10	FRONT BUMPER FOG LAMP COVER RH		1		\$82.50
11	FRONT BUMPER LICENSE PLATE BASE		1		Nd \$110.00
12	HEADLAMP RH	3 515 C - 5 L	1		CM \$1,595.00
13	HEADLAMP BRACKET RH		1		\$77.00
14	FRONT WINDSCREEN WITH MOULDING		1	- HATTE TO LE	CM \$495.00
15	FRONT FENDER RH		1	5.	N \$385.00
16	FRONT AIR GUIDE	accounted to the comment	. 1		\$396.00
17	CONDENSER		1_	10.00	/m \$643.50
18	RADIATOR		1		ノ ト \$495.00
19	A-PILLAR RH OUTER		1		↑ \$275.00
20	A-PILLAR RH INNER		1		R \$220.00
			1		
	- Tu			SUB TOTAL	\$8,113.60
				PLUS 15%	\$1,217.04

	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	FRONT SENSORS	4	\$150.00	\$600.00
2	FRONT BUMPER GROMMETS	1		Ma \$120.00
3	FRONT GRILLE CLIPS	1		My \$70.00
4	FRONT LICENSE PLATE WITH HOLDER	1		Nes \$55.00

Head office Tel: (+85) 8472 1313 | Fax: (+85) 8472 2112 Branch

9A Serangoon North Ave 5 Singapore 554500 Tel: (+85) 6484 9919 | Fax: (+85) 6481 1993

Branch (Motor Insurance Claims) Bik 10 Ang Mo Kio Ind. Park 2A #01-05 Singapore 568047 Tel: (+65) 6481 1522 | Fax: (+66) 8481 1011

PARTS TOTAL



\$9,330.64



OPTIMA WERKZ PTE LTD Co. Reg. No. 201212455W

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f) /OptimaWerkz

/optimaWerkz

Date:

12.12.2020

Vehicle No: SKE1231L

Model:

MERCEDES BENZ CLA180

Chassis:

WDD1173422N646259-2018

Reg.Year:

2018

Own Damage insurer: UOI

Third Party Veh No:

Date of Accident:

21.11.2019

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIT FRONT ACCIDENT AREA.

F04 \$1,000.00

LABOUR CHARGES TO SUPPLY PAINT & FURNISHING MATERIALS FRONT ACCIDENT AREA.

\$1,400.00 1000

LABOUR CHARGES TO REMOVE & REFIX FRONT BUMPER SENSOR.

\$120.00

LABOUR CHARGES TO REMOVE AND RE-INSTALL REAR WINDSCREEN.

\$180.00 1201

TO DIAGNOSE FAULT CODE, RESET MEMORY & HEADLAMP SETTING.

\$250.00 7

TO APPLY ANTI-RUST.

NZ

\$150.00 X

LABOUR CHARGES TO CHECK WIRING & ELECTRICAL SYSTEM & ETC.

\$150.00 201

LABOUR TOTAL

\$3,250.00

Vic

TOTAL

\$13,170.64

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.

	ACCIDENT STATEMENT
Date Of Report	16/12/2019 09:46
Date Of Accident	21/11/2019 08:10
Exact Location Of Accident	TAMPINES AVE 3 TWDS AVE 4 NEAR BLK 831 AVE 3
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
(hicle Registration Number	SKE1231L
)nsured/Policyholder	
Name Of Registered Owner	JOHNSON YAP
NRIC No	S7209534J
Email Address	JONSSON_YAP@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81266072
Alternative Phone No	OTHERS-81266072
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLA180
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Y 'cle Category	PRIVATE CAR
Insurance Company	NA
Name of Insurance Company	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO THE PROPERTY OF THE PROPERT
Policy Number	DHOM120037321800
Cover Note Number	and a company of the contract of the first of the contract of
Driver	
Name of Driver	JOHNSON YAP
NRIC No	S7209534J
Date Of Birth	16/03/1972
Occupation	INDOOR
Date Of Driving Pass	01/(01/1998)
Driving Experience	21-YEARS AND TO MONTHS
Gender	WALE
。	(UOIO/AL))\+86.8(128607/2)
Fax Number	
了一个一个一个人,在一个一个人的一个人的一个人,但是一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的	♥前用自RS+91286072
EMail Address	IONSSONLYAR@YAHOOGOM

3 TAMPINES AVE T8 #14-03 ARC AT TAMPINES Address 529595 Postcode Was driver an employee of the Insured's Company OWNER 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 COLLIDED INTO BICYCLIST Type Of Accident CLEAR Weather Conditions DRY Road Surface Other Information Was any foreign vehicle involved in this accident? NO Number of vehicles (including own vehicle) .wolved in the accident YES Nas any body injured in the Accident? Was any injured conveyed to hospital by YES ambulance? Was any other material or properly damaged? YES I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. Number of Passengers (Including Driver) **Details of Police Action** YES Was the accident reported to the police? If Yes, Please state which Police Station TRAFFIC POLICE DIVISION HQ Police Station Name ROAD, 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE Police Station Address TEL NO: 65470000 - FAX NO: Police Station Contact Yas notice of intended Prosecution given? If Yes, against whom? Tircumstances of Accident PLS REFER TO THE POLICE REPORT:T/20191121/2142 Attachment(s) NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT Are accident photos available for attachment? Was there any video captured by Car Camera? YES WITH TRAFFIC POLICE Remarks/ Reasons: Was there any audio recorded? Details of Witness 1 MR GOH Name 81809669 Phone Number Email Address DETAILS OF OTHER VEHICLE PROPERTY 1 Vehicle Registration Number CYCLIST Vehicle Make/Model/Colour Details Of Properties NAVUNKNOWN

Vehicle Calegory

A - SKE/J31L	· A	GOB _	 	TAMPIN	1ES
B-CYCLIST	IA			TAMPIN	B
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France Station Of Chapter

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Lettime Report Mente 2111/2019 16-25		ar.	Wite-Person Mr.:	Samiler
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AFTER NO	LOS TREE		Contect No.:	
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Accident	Allerted by Police	Dries	Date/Theit/	The tree
Location	E	No.	2011 Drenner	图 图 图

TAMPNES AVENUE 3

TAMPHEE AVE 3 THIS THIS PHEE THE 4 YEAR STITUTE OF

Cea	Finer Surface:	ANES AMES
Traffic Fow: Type of Colleion:	Traffic Contest:	Talle some
Moving Vehicle Against - Cyclist		Andrido Thursher

Details of Vehicle Involvenice No. 17/09	Make			
SKE1231L Car	MERCE	Mode	200	Contraction of the
	EDC T	E DIRTED ENGLINE	SWN.	
		- Sustain		
Skc/de	E 64	1 11 50 4 12	3.5	which have the property of the state of

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Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

Unknown Cyclist

(Bicycle)

NIL

NIL

No. of Days granted Medical Leave

2 of 4 Report No. T/20191121/2142

CONTINUATION OF REPORT

Details of Vel	nicle Insurance		<u> </u>	
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKE1231L	UNITED OVERSEAS INSURANCE	DHOM1200373218	19/10/2018	18/10/2020
		(T.)		
Details of Per	son involved	· 1984年	7-1	
Any Pedestria	n Involved: No	7000		
	rians Injured: NIL	Use of Pedestrian Cro	33ing. 147 t	and the state
Priver			Walker 17 Jahr 1988	ancient de Carlon
ame	JOHNSON YAP	ID No.	S7209534J	l i de la
Related Vehic	le SKE1231L (Car)	Contact N	81266072	The State of the Control of the Control
Hospital/Clinic	the second of th	Class of Driving Licence & Expiry Date	Class: NIL Date of Ex	
Date Treatme No. of Days 9	ent NIL granted Medical Leave NIL	Date Discharge NiL Degree of Injury NIL		
Cyclist	Title Constant	I ID No.	INII	

ID No.

Contact No.

Class of

Licence & Expiry Date

Driving

Date Discharge | NIL

Degree of Injury | NIL

NIL

NIL

Class: NIL

Date of Expiry: NIL

Brief Details.

Name

Related Vehicle

Hospital/Clinic

Date Treatment

I was driving along Tampines Ave 3 towards Tampines Ave 4 on the left of 2 lanes at stated date and time. As I was approaching the pedestrian crossing near Block 831 of the above road, a cyclist was at the center divider of the crossing and was moving across the road. The traffic light was green in my favour at the time. As I neared the crossing, I saw the cyclist on the 1st lane and I immediately jam braked. By this time, the bike was in my lane but I was unable to stop in time and hit onto the cyclist with the front right side of the car. The cyclist flew and landed on my windscreen and eventually landed on fleor on the right side of my car. Ambulance arrived in about 5 minutes. Paramedics could detect a pulse from the cyclist and conveyed the cyclist to hospital. Later I was informed that it was a fatal case and was arrested to TP.

NIL

Tibers was a witness at the scane by the name of title Goh, Hp. \$1809659 who is willing to provide an account.