TAN CHONG MOTOR SALES PTE. LTD. 911, BUKIT TIMAH ROAD SINGAPORE 589623

ESTIMATE

: ACCIDENT/BODY REPAIRS

WORKSHOP

: BUKIT TIMAH

CONTACT NO

: 4694091

REFERENCE

: INS/IC/ZHR/0331/2020

DATE

: 26-DEC-2020

MS FIRST CAPITAL INSURANCE LIMITED

36 ROBINSON ROAD

#16-01 CITY HOUSE

S(068877)

TEL: 65073848

FAX :

ATTN: MOTOR CLAIM DEPT

OWNER'S NAME

: KAN NGEE MENG

ADDRESS

: 50B FABER HEIGHTS

#04-10

S(129196)

TELEPHONE NO

: 96701661/93371976

DIRECT SETTLEMENT

OWNER CLAIMING LOSS OF USE / RENTAL

CAR AT WORKSHOP / CAR NOT AT WORKSHOP

KINDLY REVERT TO ME ASAP 26-12-2020

EMAIL: zuhri@tanchong.com

OFFICE: 67038916

FAX: 64697472

TYPE OF CLAIM : DIRECT SETTLEMENT / THIRD PARTY CLAIM

POLICY NO

: TP-SHC627G

VEHICLE NO

: SLA6824C

MODEL CODE

: JDRNRRZT32EWA----

MODEL/YEAR

: X-TRAIL 2.0L ALL MODE 4X4I

ENGINE NO

: MR20830561B

CHASSIS NO

: JN1JANT32Z0001581

MILEAGE

1 KM

DATE IN

: 26/12/2020

LIABILITY

0.00

EXCESS CLAUSE :

0.00

ESTIMATE BY

: MUHAMMAD ZUHRI

ACCIDENT DATE : 22/12/2020

TAN CHONG MOTOR SALES PTE. LTD. BUKIT TIMAH W/SHOP SERVICE DEPARTMENT

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SLA6824C

s/no	JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1	RPI	PERFORM RUST PROOFING & TREATMENT FOR 2X AFFECTED PANEL	240,00	120
2	SEALI	APPLY SEALANT TO ALL AFFECTED PANEL JOINTS & RESEAL NECESSARY AREA	100.00	
3	WAPI	ELECTRONIC 4 WHEEL ALIGNMENT & ADJUST STRG ANGLES TO STANDARD SPECIFICATION- PASSENGER	93.00	X
4	ZZ/001	TRANSFER MECHANISM PART FOR FR LH DOOR	80.00	
5	ZZ/002	REPAIR FR LH FENDER, RR LH DOOR & LH SILY-OUTER RENEW FRT LH DOOR $@3c_{W0} + V$	1560,00	780
6	ZZ/003	S/PAINT FR/RR LH DOOR, FR LH FENDER & LH SILY-OUTER	1000.00 KZ	5 h
7	ZZ/004	CONDUCT WHEEL BALANCING FOR FR LH TYRE	たレ 15.00 、	X
		TOTAL LABOUR CHARGES	3088.00	

TAN CHONG MOTOR SALES PTE. LTD. BUKIT TIMAH W/SHOP SERVICE DEPARTMENT

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SLA6824C

DAMAGED PARTS & PRICES

					1000
s/no	PARTS DESCRIPTION	PARTS NUMBER	NETT	LIST	S/NETT REMARKS
1	SUNDRIES	NPN			49.60 20
2	MOUL-FR DOOR PAD, LH	80877-4CE0A	194.70 CV	f /	
3	HINGE LOWR ASSY	A000L-00408	58.90 🗡		
4	MOTOR ASSY-REG	80730-4CA0A	568.10 🗴		
5	REGULATOR-DOOR	80721-6FR0A	98.90 🗡		
6	MOULDING SASH	80283-4CA0A	106.60 10-		
7	TAPE-FR DOOR, LH	80819-4CA0B	19.50 1		
8	DOOR-FRONT LH	H010A-4CBMA	8.10 K		
9	CLIP-TRIM(2.7X3)	01553-10641	8.10 Ne	1/	
10	CLIP(3.3X2)	76882-JG10A	6.60 爱	ne/	
11	GROMMET(4.9X6)	76881-JG00A	29.40 Ke		
12	CLIP(2.7X2)	76847-JG00A	5.40 ale	/	
13	GROM-PTN(2.7X4)	76848-JG00A	10.80 1		
14	MOULDING ASSY-F	63861-4CE0A	180.00 SCA		
15	COVER ASSY-SILL	76851-4CE0A	650.00 7		
					-
	SUB TOTAL		3027.30	0.00	40.00
	LESS DISCOUNT (NETT-20.00%, LIST-30.00%, S/NETT0	0%)	605.46		0.00
	GRAND TOTAL		2421.84	0.00	40.00
	OVERALL TOTAL		2461.84		

LEGEND: REMARKS(OK) = APPROVED, REMARKS(X) = NOT APPROVED

CHONG MOTOR SALES PTE. LTD. BUKIT TIMAH W/SHOP SERVICE DEPARTMENT

SUMMARY OF ESTIMATE FOR VEHICLE REGN NO SLA6824C

TOTAL LABOUR CHARGES

3088.00

TOTAL SPARE PARTS CHARGES

2461.84

GRAND TOTAL

5549.84 *

* All charges do2 not include GST.

SURVEYOR'S PARTICULARS

NAME

SURVEYED DATE

AUTHORIZED DATE

EXCESS CLAUSE

LIABILITY

REMARKS

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: Rasur-Hp Gronobl8 : 11/01/2021 @1125 : 0.00 4 days : 0.00 Res before paint

PLS NOTE: This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges & spare parts in the process of repairs, we shall inform you accordingly.

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

Signatu ...



SINGAPORE ACCIDENT STATEMENT

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

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

 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
- 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 Submission Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss	23/12/2020 16:10 (SGT) 22/12/2020 10:30 (SGT) Bukit Gombak, Singapore 377B BUKIT BATOK ST31
Country/State of Loss	Singapore

Additional Location Information Country/State of Loss	Bukit Gombak, Singapore 377B BUKIT BATOK ST31 Singapore
EDETAILS O	EOWN VEHICLES
Vehicle Registration Number	SLA6824C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KAN NGEE MENG
NRIC No	SXXXX026I
Email Address	kbyeo87@gmail.com
Mobile Phone No	(Phone) +65-96701661
Alternative Phone No	(Home) +65-96701661
VEHICLE PARTICULARS	
Manufacturer	Nissan
Model	X-trail
Variant	-
Exact purpose for which vehicle was being used at time of	
accident	-
Are you claiming under your own insurance policy for repair to	No. Claiming third work.
your vehicle? Vehicle Category	No - Claiming third party Private car
verifical category	Private car
INSURANCE COMPANY	
Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100455533-04
Cover Note Number	2100 10000 07

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100455533-04
Cover Note Number	21001000000

DRIVER

Name of Driver	Secretary of the secretary and secretary secre	YEO KIM BOON
NRIC No	The second secon	SXXXX489C
Date Of Birth		20/04/1987
	A CHARLEST AND A CO. LEVEL AND	Indoor

02/11/2007 Date Of Driving Pass 13 YEARS AND 1 MONTH Driving experience Gender (Phone) +65-93371976 Mobile Number Alt. Phone Number kbyeo87@gmail.com Email Address 319 BUKIT BATOK STREET 33 Address 03-46 Address complement 650319 Postcode No Is the driver the policyholder? If No, Relationship of the Driver with the Insured Relative Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver 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 the accident? No Number of vehicles involved in the accident 2 Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) 1 Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER ATTACHED ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY: 1

Vehicle Registration Number	SHC627G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	CHANG KIM SENG
Contact Number	(Phone) +65-94884872
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-



SKETCH PLAN

SLA58246 Vehicle No: _

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. 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
- 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)

Lunderstand, acknowledge, agree and consent that:

- 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)
 - (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
- (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
- 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.
- 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: 25/12/3

Driver's Signature (If driver is not the policyholder) Date & Time: 23/12/2

e Personnel's Signature Reporting Cen Name:

NRIC/FIN No.:

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	(A) My Vehicle No: SLA 6824C
Accident Location: 3778 6-KFT BATOK ST 3	31
	Time: 10.30 am / pm-
-Brief Details O	f Accident-
AL THE ASSESSED GA 18741 (NEW	ILLEA) OUT OF THE LANEWAY
AS I WAS DRIVING SCA SSUIL (VON	300011 001 01 110 21
FROM THE MULTI-STOREY CARPARK AT	3718 DUNIT BOTTLE 11 31,
A TAXI LAME FROM MY LEFT SIDE	(PASSENGER SEDE) AND HIT ME
AS I WAS PRIVING SLAGSZYC (VER FROM THE MULII-STOREY CARPARK AT A TAXI CAME FROM MY LEFT SIRE HEAR-ON TO MY SIDE	(MASSENGER SEDE) AND MIT ME
A TAXI CAME FROM MY LEFT SIRE HEAD - ON TO MY SIRE.	(PASSENGER SEDE) AND MIT ME
A TAXI CAME FROM MY LEFT SIPE HEAD - ON TO MY SIDE.	(PASSENGER SEDE) AND MIT ME
A TAXI CAME FROM MY LEFT SIPE HEAD - ON TO MY SIDE.	(PASSENGER SEPE) AND MIT ME
A TAXI CAME FROM MY LEFT SIPE HEAD - ON TO MY SIDE.	(PASSENGER SEDE) AND MIT ME
A TAXI CAME FROM MY LEFT SIPE HEAD - ON TO MY SIPE.	(PASSENGER SEDE) AND MIT ME
A TAXI CAME FROM MY LEFT SIPE HEAD - ON TO MY SIPE.	(PASSENGER SEDE) AND MIT ME
A TAXI CAME FROM MY LEFT SIPE HEAD - ON TO MY SIPE.	(PASSENGER SEDE) AND MIT ME
A TAXI CAME FROM MY LEFT SIPE HEAD - ON TO MY SIPE.	(PASSENGER SSOE) AND MIT ME
A TAXI CAME FROM MY LEFT SIPE HEAD - ON TO MY SIPE.	(PASSENGER SSOE) AND MIT ME
A TAXI CAME FROM MY LEFT SIRE HEAD - ON TO MY SIRE.	(PASSENGER SEPE) AND MIT ME
A TAXI CAME FROM MY LEFT SIRE HEAD - ON TO MY SIRE.	(PASSENGER SEDE) AND HIT ME
A TAXI CAME FROM MY LEFT SIRE HEAD - ON TO MY SIRE.	(PASSENGER SEDE) AND MIT ME
A TAXI CAME FROM MY LEFT SIRE HEAD - ON TO MY SIRE.	(PASSENGER SEDE) AND MIT ME
HEAV - ON TO MY SIVE.	
HEAV - ON TO MY SIVE.	n v o l v e Details
- Other Vehicle I	
- Other Vehicle I B) Veh No: SHC (27 4 Hp: 94844872 Pax: Driver	n v o l v e Details
- Other Vehicle I B) Veh No: SHC (27 G Hp: 14884872 Pax: Driver	nvolve Details rName: (MANG KIM SENG)
- O t h e r V e h i c l e I B) Veh No: SHC (21 & Hp: 94894872 Pax: Driver (C) Veh No: Hp: Pax: Driver	nvolve Details rName: (MANG KIM SENG)
- Other Vehicle I B) Veh No: SHC 627 G Hp: 94894872 Pax: Driver C) Veh No: Hp: Pax: Driver DECLARATION	nvolve Details rName: (MANG KIM SENG)
HEAV - 2N T3 MY 32VE. - Other Vehicle I Weh No: SHC (27 G Hp: 94844872 Pax: Driver C) Veh No: Hp: Pax: Driver DECLARATION	nvolve Details rName: (HANG KIM SENG)
- Other Vehicle I B) Veh No: SHC 627 G Hp: 94894872 Pax: Driver C) Veh No: Hp: Pax: Driver DECLARATION	nvolve Details rName: (HANG KIM SENG

Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID:	Singapore NRIC 026I
	in the state of th
Vehicle No:	SLA6824C
Vehicle to be Exported:	No
Intended Deregistration Date:	12 Jan 2021
Vehicle Make:	NISSAN
Vehicle Model:	X-TRAIL 2.0 CVT ABS 4WD S/R 7-STR
Primary Colour:	Green
Manufacturing Year:	2016
Engine No:	MR20830561B
Chassis No.:	JN1JANT32Z0001581
Maximum Power Output:	106.0 kW (142 bhp)
Open Market Value:	\$22,509.00
Original Registration Date:	11 Mar 2016
First Registration Date: -	11 Mar 2016
Transfer Count:	0
Actual ARF Paid:	\$23,513.00
■ EDI からたいにもよいは、大学(ない)とした主要(なたり(そのでは、Adam Adam Adam Adam Adam Adam Adam Adam	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	10 Mar 2026
PARF Rebate Amount:	\$17,634.00
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COE Expiry Date:	10 Mar 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period (Years):	10
QP Paid:	\$46,970.00
COE Rebate Amount:	\$24,226.00
Total Rebate Amount:	\$41,860.00

ОК

