

EM-1 AUTO PTE LTD

BLK 8 SIN MING INDUSTRIAL ESTATE SECTOR C

#01-68 SINGAPORE 575643

Contact Number: 6452 3298 (O) 9666 6556 (H/P) 6457 5776 (F)

Email Address: em1autopteltd@gmail.com

COMPANY / GST REG. NO. : 201316380R

Vehicle Number : GBC 8529A

Vehicle Model : NISSAN NV200

Accident Date : 06.01.2021

Original Reg Date : 26.12.2013

Date : 08.01.2021

Chassis : VSKYBAM20U0062203

TP Ins. **ERGO**

ESTIMATE

1	1 pc	Tailgate RH		1,159.30	Nbt
2	1 pc	Tailgate Glass RH		398.20	Nx dip
3	1 pc	Tailgate Windscreen Inner Seal RH		60.00	Nx
4	1 pc	Tailgate Emblem dci		69.60	Nx
5	1 pc	Tailgate Inner Bottom Lock RH		156.20	N?
6	1 pc	Tailgate Inner Bottom Lock Catch RH		58.00	Nx
7	1 pc	Tailgate Inner Rubber RH		139.20	Nx
8	2 pcs	Tailgate Hinge RH	86.00	172.00	N Rx
9	1 pc	Tailgate Checker RH		72.00	N Rx
10	1 pc	Tailgate Inner Board RH		292.50	N de
11	1 set	Tailgate Inner Board Clips RH		40.00	N u
12	1 pc	Tailgate Weatherstrip		195.20	N de
13	1 pc	End Panel		465.00	N Rx
14	1 pc	Rear Bumper		790.00	N de
15	2 pcs	Rear Bumper Side Retainers	39.00	78.00	N Rx?
16	1 set	Rear Bumper Clips		50.00	N Rx
17	1 pc	Rear Bumper Sponge		119.60	N?
18	1 pc	Rear Bumper Reflector RH		67.90	N Rx
19	1 pc	Taillamp RH		289.50	N X
20	1 pc	Tailgate Badge LH		78.20	N Rx
21	1 pc	Tailgate Emblem NV200 LH		125.10	N Rx
				4,875.50	
				Less 10%	487.55
					4,387.95

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B/F

4,387.95

Special Nett

1	1 pc	Tailgate Glass Sealant	60.00
2	1 pc	Tailgate Sticker 70km/h	15.00
3	1 set	Reverse Sensor	250.00

122-40.
14
200mm

Labour charge

Panel Beating	1,000.00
Spray painting	900.00
Check Wiring	30.00
Anti rust	60.00
Remove and install tailgate glass.	120.00
Remove and install tailgate part.	90.00
Remove and install carpet and interior.	150.00
Remove and install reverse sensor	90.00

600.
600.
✓
30.
60.
60.
60.
30

7,152.95

Less 20% 1,430.59

Lump sum 5,722.36

Tanfer 97495749
WP' 2/1/21 @ 430
0.5 days
4/8 Resurvey after repair
tanfer@lkkauto.com

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during repair
- 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 approved and is subject to final approval from LKK company

Acknowledged by Repairer

Signature:

Date:

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	608H
Vehicle Details	
Vehicle No.:	GBC8529A
Vehicle to be Exported:	No
Intended Deregistration Date:	08 Jan 2021
Vehicle Make:	NISSAN
Vehicle Model:	NV200 1.5L MT ABS AIRBAG 2WD 6DR
Primary Colour:	Grey
Manufacturing Year:	2013
Engine No.:	K9KF276D127290
Chassis No.:	VSKYBAM20U0062203
Maximum Power Output:	-
Open Market Value:	\$20,345.00
Original Registration Date:	26 Dec 2013
First Registration Date:	26 Dec 2013
Transfer Count:	0
Actual ARF Paid:	\$1,018.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	25 Dec 2023
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$55,503.00
COE Rebate Amount:	\$16,442.00
Total Rebate Amount:	\$16,442.00

The information contained herein is correct as at 08 Jan 2021

OK

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 Submission	07/01/2021 17:12 (SGT)
Date of Accident	06/01/2021 14:00 (SGT)
Exact Location of Accident	Bendemeer Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWNERS

Vehicle Registration Number GBC8529A

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TURNON ENGINEERING PTE LTD
Company Reg No	1XXXXX608H
Email Address	chiacheongpeng@gmail.com
Mobile Phone No	(Phone) +65-90230406
Alternative Phone No	(Office) +65-67450597

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
Variant	-
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?	No - Claiming third party
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	Sompo
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D20MTPCVE003463
Cover Note Number	-

DRIVER

Name of Driver	CHIA CHEONG PENG
NRIC No	SXXXX854J
Date Of Birth	20/02/1963
Occupation	Outdoor

Date Of Driving Pass	12/11/2008
Driving experience	12 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90230406
Alt. Phone Number	-
Email Address	chincheongpeng@gmail.com
Address	APT BLK 46 BENDEMEER ROAD #07-1431
Address complement	-
Postcode	330046
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employoo
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 - Head to Rear
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) soliciting/offering accident claims assistance?	No

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 TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILED OTHER VEHICLE PROPERTY

Vehicle Registration Number	YP6708Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-

Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

SKETCH PLAN

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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.



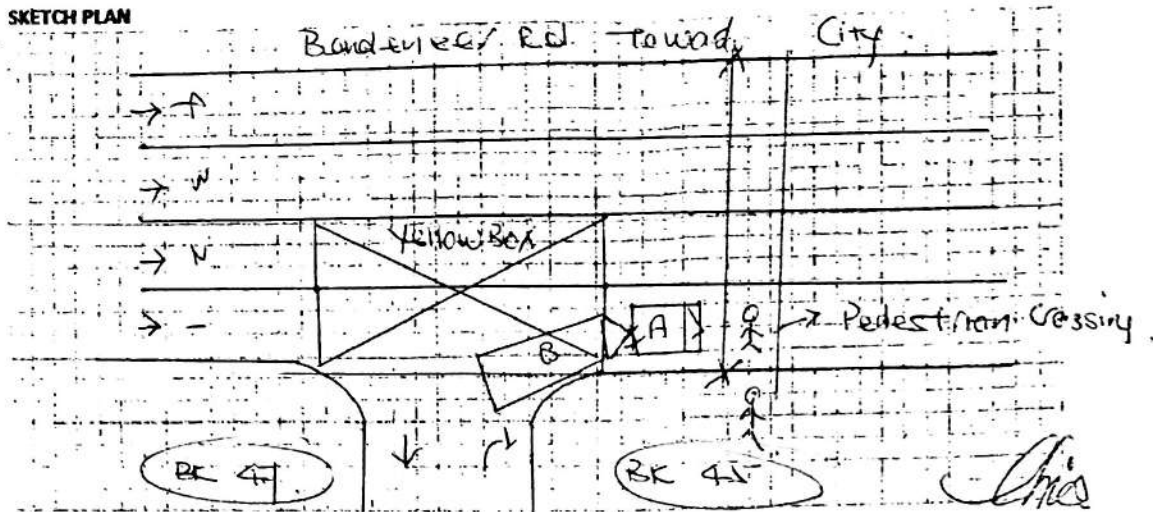
Policyholder's Signature
Date & Time:

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

CITY AUTO PTE LTD
Blk 8 Sin Ming Road
#01-58/60/62 Sin Ming Ind Est
Singapore 575643
Tel: 6453 1235 Fax: 6453 7944
(Claims Section)

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I stop at Pedestrian Crossing, due to the light

Traffic was Red on lane 1. Suddenly vehicle B hit onto my rear portion.

(A) GBC 8529 A

(B) YP 6708 Y.

DECLARATION

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

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.:

CITY AUTO PTE LTD

818 Sin Ming Road
#01-53/60/62 Sin Ming Ind Est
Singapore 575643
Tel: 6453 1235 Fax: 6453 7944
(Claims Section)