

9-3-21

Sompo Insurance (Singapore) Pte Ltd
50 Raffles place #03-03
Lanc Tower
Singapore 048623

Attn: motor claims Dept

Accident on 6-3-21 at CTE towards town

involving vehicle nos SJB 62285 & GBJ 4103J

I am giving you notice of the above accident involving my vehicle no. SJB 62285 and vehicle no. GBJ 4103J insured by your company.

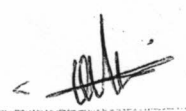
As the accident was caused solely by the negligence of your insured driver, I hold your company fully responsible for all damages sustained by me as a result of the said accident.

My vehicle is presently lying at M/s. King's Auto Spray Paint Pte Ltd
Bik 160 sin ming Drive #05-10 Singapore 575722
Tel 96532526
Fax 62663974

I would appreciate if you could arrange your assessor to inspect my vehicle at the said garage. AH HUAT

I look forward to your kind assistance and co-operation in this matter.

Yours faithfully


Soh Ai Lin (Suh Ailin)

9-3-21

King's Auto Spray Paint Pte Ltd
 Blk 160 Simming Drive #05-10
 Simming Autocity Singapore S75722

Re: Estimate cost for SJB6228S HONDA CIVIC

SUPPLY OF PARTS:

1pc rear boot lid	\$ 580.20
1pc rear boot lid center garnish	110.80
1pc rear center garnish logo	14.90
1pc rear center garnish civic emblem	14.50
1pc rear center garnish ivtec emblem	15.50
1pc rear boot lid lock	82.00
1pc rear boot lid rubber	70.00
1pc rear boot lid inner trim	68.00
10p rear inner trim clips @ 4.50	45.00
2pc rear tail lamp @ 350.50	701.00
1pc rear tail lamp lower retainer	18.00
1pc rear bumper	650.50
4pc rear bumper sensor @ 140.40	561.60
1pc rear bumper lower spoiler	200.00
1pc rear spoiler cover	20.00
6pc rear spoiler clips @ 3.50	21.00
1pc rear bumper beam	160.00
2pc rear bumper side retainer @ 15.00	30.00
8pc rear bumper clips @ 3.50	28.00
1pc rear bumper side reflector	10.50
1pc rear side reflector grille	19.30
1pc rear center panel	265.00
1pc rear center panel top trim	80.30
6pc rear top trim clips @ 4.50	27.00
1pc rear camera	\$ 550.00
	<hr/>
	\$ 4343.10
	868.62
	<hr/>
	\$ 3474.48

Less 20%

King's Auto Spray Paint Pte Ltd
Blk 160 Simming Drive #05-10
Simming Autocity Singapore 575722

9-3-21

Balance b/f

3474.48

ipc Rear number plate

\$ 40

LABOUR:

Renew the above mentioned parts
Knocking, cutting, welding & straighten
rear damaged parts

\$ 900

spray paintings

\$ 900

5314.48

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	-
Date of Accident	06/03/2021 18:28 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE towards town
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJB6228S
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Soh Ai Lin (Su Ailin)
NRIC No	SXXXX572E
Email Address	sohailin2511@gmail.com
Mobile Phone No	(Phone) +65-97642191
Alternative Phone No	+65-97642191

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Civic
Variant	-
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 - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SD19V07440/VPC2/R01
Cover Note Number	-

DRIVER

Name of Driver	Soh Ai Lin (Su Ailin)
NRIC No	SXXXX572E
Date Of Birth	25/11/1967
Occupation	Outdoor

(Draft)

Date Of Driving Pass	30/10/1990
Driving experience	30 YEARS AND 5 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97642191
Alt. Phone Number	+65-97642191
Email Address	sohailin2511@gmail.com
Address	Blk 53 Hillview Avenue #07-01
Address complement	-
Postcode	669566
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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

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 1

Vehicle Registration Number	GBJ4103J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-900944150
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-



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 **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
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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:

3.50 pm

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

3.50 pm

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

Jenny Lim

(Draft)

Nature Of Damage

-

Details of property damaged in accident

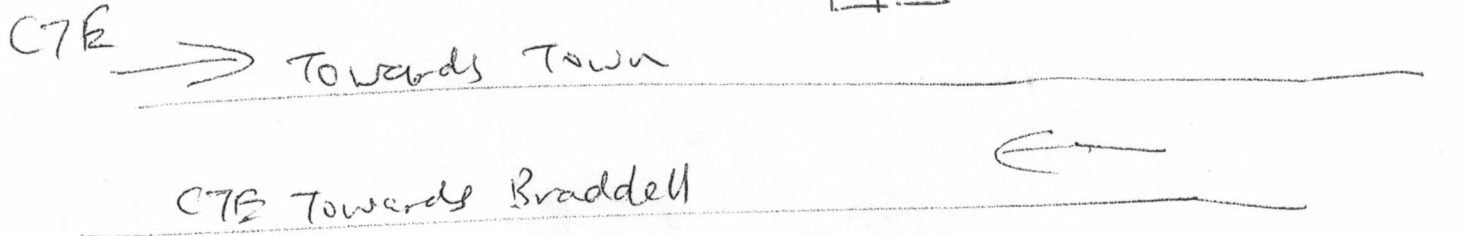
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No. Of Passenger (Including Driver)

1



SKETCH PLAN


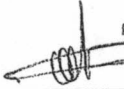



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 6th of March at 6:28 pm I was driving towards town along CTE near PIE Slit Rd. The traffic in front was slow moving & I came to a stop. Suddenly a lorry ~~behind~~ with no GBJ 4103J hit onto my then SJB 62285 on my rear car. I came out to exchange HP no. & I took some photo of the accident.

DECLARATION

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

 8/3/21
 Policyholder's Signature
 Date & Time: 3:50 pm
 8/3/21
 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 3:50 pm

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