



KAH MOTOR CO. SDN. BHD.
(A Member of the Oriental Holdings Berhad)

Service and Body Repair

Tel: +65 6841 3838

Website: www.honda.com.sg

For 24-hours Roadside Assistance, Call 98203838

QUOTATION

GST Reg No.: M200050223
Company Ref. No.: S60FC1380G

Customer	: INDIA INTERNATIONAL INSURANCE PTE 64 CECIL STREET #04-00 & #05-00 IOB BUILDING SINGAPORE 049711	Document No.	: SQT21001346	Page	1
Registration No	: SCY3692R	Date	: 19. Apr 2021	Customer No.	: WZI007
Chassis No	: JHMGK5850KS204458	Svc Advisor	: NG SIN HAI	Engine No	: L15B34100250
Model	: JAZZ 1.5VTIR CVT 19YM (EURO 6)	Date Time	: 19. Apr 2021 4:54:15 PM	Surveyor Name	:
Owner's Name	: CHOY WENG MENG	Survey Date	:	Authorisation Date	:
Ins Policy No.	:				
Date of Accident	: 18/4/2021				

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
	TP DIRECT SETTLEMENT (J/NO:) OWNER: OWNER INSURER: ACC DATE: SURVEYED BY: DATE: REF NO: TP INSURER: TP VEH:						
04711-T5B-J50ZZ	FACE,FR.BUMPER	1	497.20	25	372.90	26.10	399.00
71102-T5L-T80	LOWER GRILLE ASSY,FR.	1	157.40	25	118.05	8.26	126.31
71103-T5B-J50	GARNISH ASSY,R.FR.FOG	1	77.60	25	58.20	4.07	62.27
71104-T5B-J50	COVER,FR.TOWING HOOK	1	7.70	25	5.77	0.40	6.17
71108-T5B-J50	GARNISH ASSY,L.FR.FOG	1	77.60	25	58.20	4.07	62.27
71130-T5B-J50	BEAM COMP,FR.BUMPER	1	319.70	25	239.77	16.78	256.55
71140-T5B-J60	BEAM UPPER,R.FR.BUMPER	1	31.80	25	23.85	1.67	25.52
71193-T5A-000	SPACERR.FR.BUMPER	1	10.40	25	7.80	0.55	8.35
71198-T5A-000	SPACERL.FR.BUMPER	1	10.40	25	7.80	0.55	8.35
91505-TM8-003	CLIP,BUMPER	15	2.30	25	25.87	1.81	27.68
71121-T5B-J50	BASE,FR.GRILLE HOOK	1	264.60	25	198.45	13.89	212.34
71123-T5B-J60	MOLDING UPPER,FR.GRILLE	1	145.50	25	109.12	7.64	116.76
75700-T5A-000	EMBLEM H	1	17.20	25	12.90	0.90	13.80
90301-ST0-003	NUTPUSH 3MM	2	2.10	25	3.15	0.22	3.37
60211-T5R-A00ZZ	PANEL ,R.FR.FENDER	1	425.10	25	318.82	22.32	341.14
74100-TAS-000	FENDER ASSY,R.FR.	1	84.60	25	63.45	4.44	67.89
91501-TR0-003	CLIP,INNER FENDER	11	2.80	25	23.10	1.62	24.72
33100-T5A-T21	LIGHT ASSY,R.HEAD	1	1664.80	25	1248.60	87.40	1336.00
44600-T5B-J00	HUB ASSYFR.	1	138.30	25	103.72	7.26	110.98

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This is a computer generated invoice. No signature is required.

Part prices are subjected to change without notice.

The above estimated cost of repair do not include any unforeseen damages.

GST Amount is calculated from individual line(s).

An amount of \$53.50 (incl GST) will be applicable for the request of the above quotation for estimates above \$2,000.00.

However, if the repairs are subsequently done at Kah Motor Co. Sdn. Bhd, it will be refunded.



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Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
44300-TD4-J51	BEARING ASSY,FR.HUB	1	141.60	25	106.20	7.43	113.63
42700-TAR-E91	DISK ALUMINIUM WHEEL,16X6	1	262.70	25	197.02	13.79	210.81
				Sum Item	3302.74	231.17	3,533.91
BOSUN	SUNDRIES	1	100.00		100.00	7.00	107.00
BML011	INSPECT FR LIGHTING MECHANISMS & FOCUS	1	180.00		180.00	12.60	192.60
BC012R	RESET VEHICLE SMART ENTRY SYSTEM	1	650.00		650.00	45.50	695.50
BKB01R	REMOVE & RENEW FR BUMPER INCLUDING FITTINGS ON	1	2000.00		2000.00	140.00	2140.00
BP03R	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS. (3P)	1	2000.00		2000.00	140.00	2140.00
BMU12R	REMOVE & REPLACE FR R UNDERCARRIAGE PARTS. (N)	1	1200.00		1200.00	84.00	1284.00
BOSUN	REMOVE AND RENEW RHF WHEEL/RIM/TYRE	1	50.00		50.00	3.50	53.50
				Sum Labor	6180.00	432.60	6,612.60
BO-WHEEL ALIGN X4	WHEEL ALIGNMENT X4	1	180.00		180.00	12.60	192.60
				Sum Ext. Service	180.00	12.60	192.60

Survey By

Date & Time

Excess

Status

Signature

Total Amount 9,662.74 676.37 **10,339.11**

Total (Inclusive of GST) **10,339.11**

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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 19/04/2021 15:11 (SGT)
Date of Accident 18/04/2021 13:30 (SGT)
Exact Location of Accident Near 141 North Bridge Rd, Singapore 179099
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SCY3692R

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHOY WENG MENG
NRIC No SXXXX796D
Email Address WENGMENG@HOTMAIL.COM
Mobile Phone No (Phone) +65-90084074
Alternative Phone No (Home) +65-90084074

VEHICLE PARTICULARS

Manufacturer Honda
Model Jazz
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 Private car
Transmission Auto
CC 1500

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number -
Cover Note Number -

DRIVER

Name of Driver CHOY WENG MENG
NRIC No SXXXX796D

Date Of Birth	14/07/1981
Occupation	Indoor
Date Of Driving Pass	30/04/2003
Driving experience	18 YEARS
Gender	Male
Mobile Number	(Phone) +65-90084074
Alt. Phone Number	(Home) +65-90084074
Email Address	WENGMENG@HOTMAIL.COM
Address	455A ANG MO KIO STREET 44 #24-07 S561455
Address complement	-
Postcode	-
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 - 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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	MARIA ELENA DE JESUS
Gender	Female

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

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM4762Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

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) _____

Vehicle Number: _____

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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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 interested parties.
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:

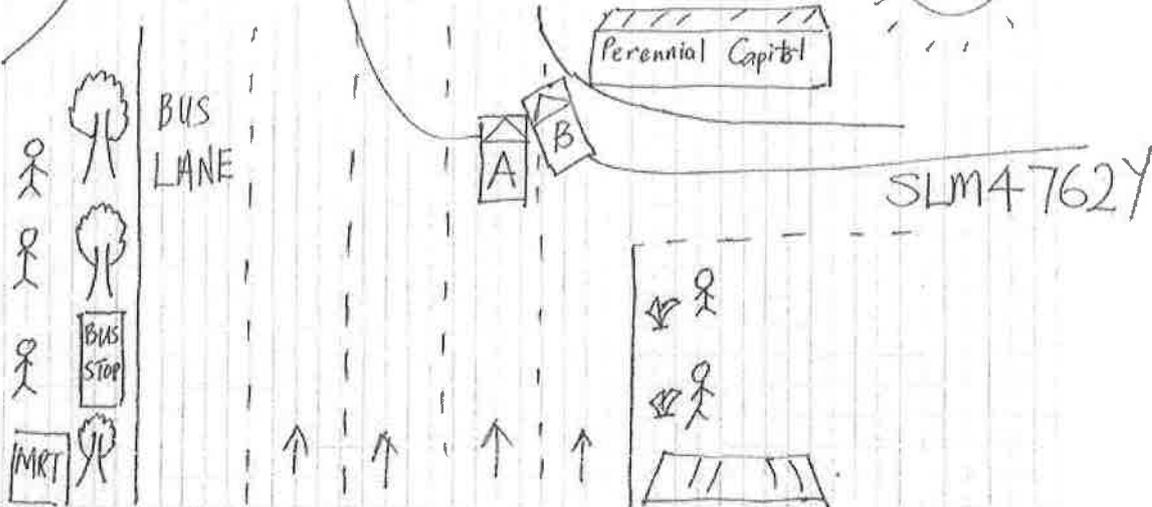


 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

Vehicle Number:

SCY3692R

SKETCH PLAN
CHURCH



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along North Bridge Road.

Vehicle B came out from the minor road and hit onto my vehicle A.

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.:

