

SME MOTOR PTE LTD

1 Kaki Bukit Ave 6, #02-15@ Kaki Bukit, Singapore 417883

TEL: 6747 6106 (6 lines) Fax: 6744 2368 Email: service@smemotor.com.sg

GST:201119451E RCB NO:201119451E

M/S : LONPAC INSURANCE BHD
100 Beach Road #19-00
Shaw Tower
Singapore 189702

TEL: FAX:
ATTN: Motor Claim Department
Your Ref No : 21/LP/TP-075(04)
Claim Type : TP CLAIM
Accident Date : 25/04/2021
Tp Vehicle No: GX1523S

Claim No :
No : EST21042601
Date : 26/04/2021
Policy No : DPCG16S804700
Veh Reg No : SMU9105H
Make / Model : AUDI A6
Chasis No : 0
Engine No:
Reg. No :

ESTIMATE FOR VEHICLE NO: SMU9105H

Discription	Quantity	List Price	Amount
Cost Price		S\$	S\$
1 FRT BONNET	1 PC		\$1,950.00
2 FRT BUMPER	1 PC		\$1,100.00
3 FRT BUMPER RETAINER LH	1 PC		\$50.00
4 FRT BUMPER CLIPS	10 PCS	\$4.00	\$40.00
5 FRT BUMPER INNER SPONGE	1 PC		\$95.00
6 FRT BUMPER REINFORCEMENT	1 PC		\$370.00
7 HEADLAMP LH	1 PC		\$5,100.00
8 FRT NOZZLE COVER LH	1 PC		\$38.00
9 FRT NOZZLE LH	1 PC		\$125.00
10 FRT NOZZLE MOTOR LH	1 PC		\$120.00
11 FRT FENDER LH	1 PC		\$470.00
12 INNER COWLING CLIPS	10 PCS	\$5.50	\$55.00
TOTAL			\$9,513.00
Add 20%			\$1,902.60
			\$11,415.60

Labour

1	WIRE CHECKING	\$20.00
2	REPROGRAMME HEADLAMP	\$450.00
3	LABOUR CHARGE	\$650.00
4	SPRAY PAINTING	\$700.00
TOTAL		\$1,820.00

Amount Before Excess	\$13,235.60
Add GST @7%	\$926.49
Total Amount Payable	\$14,162.09

For SME MOTOR PTE LTD


AUTHORISED SIGNATURE



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	26/04/2021 16:21 (SGT)
Date of Accident	25/04/2021 15:55 (SGT)
Exact Location of Accident	492A Admiralty Link, Singapore 751492
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMU9105H
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KWOK JEAN
NRIC No	SXXXX756J
Email Address	k.jeaaan@gmail.com
Mobile Phone No	(Phone) +65-84444109
Alternative Phone No	+65-84444109

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A6
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
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	Etiga Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCG16S804700
Cover Note Number	-

DRIVER

Name of Driver	JOSEPH NG TECK SOON
NRIC No	SXXXX797F



Date Of Birth	16/03/1993
Occupation	Indoor
Date Of Driving Pass	22/05/2015
Driving experience	5 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83885426
Alt. Phone Number	-
Email Address	josephngts@gmail.com
Address	BLK 506B YISHUN AVE 4 #09-136
Address complement	-
Postcode	762506
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Change/cross lane
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	WIFE
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

VEHICLE B ENTER CARPARK, I STOP BEHIND VEHICLE B, AFTER VEHICLE B REVERSE HIS LORRY, I HORN AT HIM BUT VEHICLE B STILL REVERSE AND HIT MY VEHICLE FRONT LEFT PORTION.

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	GX1523S
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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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 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.
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 making 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.



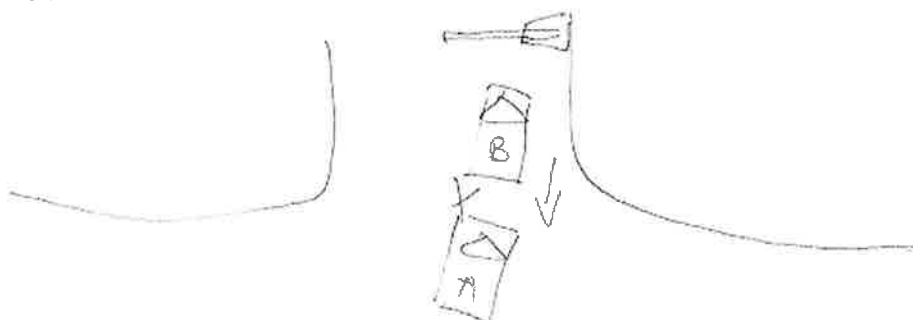
Policyholder's Signature / Date & Time



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

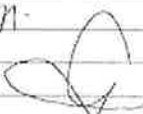
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

veh B ^{can} ~~entire~~ park, I stop behind veh B, after veh B
 resken his lorry, I horn at him but veh B still resken
 I hit my veh front left protion.



Declaration

We declare the foregoing particulars are true in every respect.

F 

Policyholder's Signature / Date &
Time



Driver's Signature (if driver is not the policyholder) / Date
& Time

Witnessed by Reporting Centre
Personnel

Done

Certificate.pdf



Vacation Shield Plus - Certificate of Insurance

IMPORTANT NOTICE

1. **STATEMENT** pursuant to Section 25(5) of the Insurance Act - We would remind you that you must disclose fully and faithfully the facts you know or ought to know otherwise you may not receive any benefits from your Policy.
2. Please note that this insurance is subject to the premium being paid and received in full by the Company (s) before the inception date where the Policy is issued to an individual; or (b) within the period specified in the Premium Payment Warranty applied to the Policy in all other instances falling which there will be no liability under this cover.

A) The Proposer

Full Name (as in passport): Kwok Jean
 Passport or NRIC No: S9312756J
 Address: 826 YISHUN STREET #1 #02-556, SINGAPORE 760826
 Date of Birth: 10/04/1993
 Gender: Female

B) The Insured

S/No	Name	Relationship to Insured	Gender	Date of Birth
1	Kwok Jean	Main Insured	Female	10/04/1993

(Children under any Family Plan must be under the age of 18 or up to 24 years if still studying full-time in a recognized institution of higher learning.)

C) Coverage

Type of Plan: Individual
 Type of Benefit: Business
 Period of Cover: From: 03/05/2016 to 07/05/2016 (5 day(s))
 Destination: Asia
 Premium: S\$24.50 (no GST is required)

Policy/Certificate No.: DPCG16S804700
 Date of Issue: 01/05/2016

Etiqa Insurance Pte. Ltd.

Authorized Signature

POLICY OWNER'S PROTECTION SCHEME

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your Policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of the coverage, where applicable, please contact your insurer or visit the GIA/LIA or SDIC website (www.gia.org.sg or www.sdic.org.sg).

Personal DATA Use

Any information collected or held by us whether contained in Your application or otherwise obtained may be used and / or disclosed to Our associated individuals/companies or any independent third parties (within or outside Singapore) for any matters relating to Your application, any policy issued and to provide advice or information concerning products and services which We believe may be of interest to You and to communication with You for any purpose. Your data may also be used for audit, business analysis and reinsurance purposes.

Underwritten By: Etiqa Insurance Pte. Ltd.

 Emergency Services Hotline: (65) 6327-2215
 ALLIANZ GLOBAL ASSISTANCE

This Certificate is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of Vacation Shield Plus Insurance Policy.



INSURER ENQUIRY

Find insurer

Vehicle reg. no.

GX1523S

Date of Accident

26/04/2021



Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **Lonpac Insurance Bhd**

Period of Insurance **20/02/2021 - 19/02/2022**

Requested By **Han Zhuang Chou (SME MOTO...**

Requested Date **26/04/2021 13:22**

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**