



ACCIDENT REPAIR ESTIMATES

Our Ref:

In-house Vehicle Assessor

Signature :

Total Repair Cost	\$ 3,001.20
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63837362 -

(e) Signature of surveyor :  Date: _____

ACIDENT REPAIR ESTIMATES?

Spark Car Care

ComfortDelGro Engineering Pte Ltd
205 Braddell Road S (579701)
Tel: 63837168 / 63837466 Fax: 62815767

Spare Parts

Vehicle No : SJQ2568H Case Owner : BRENDA

Make & Model : HYUNDAI AVANTE Year Manufacture : _____

Chassis No : KMH DU41BR9U750072 Engine No : G4FC9U647492

Sales Order : _____ Supplier : _____

Order By : _____ Type of Claim : THIRD PARTY

S/No	Part Description	QTY	Cost Price	List Price	Nett Price	S/N	Disposition By Surveyor
1	REAR RH DOOR HANDLE / BR	1		\$ 48.00			
2	REAR RH DOOR HANDLE SIDE COVER ?	1		\$ 20.00			
3	REAR RH DOOR HANDLE INNER BACK BASE / BR	1		\$ 43.00			
4	REAR RH DOOR / BNC	1		\$ 1,744.00			
5	REAR RH DOOR BLACK STICKER / MEC	1		\$ 45.00			
6	REAR RH DOOR GLASS OUTER MOULDING XMM			\$ 46.00			
7	REAR RH DOOR LOCK ?	1		\$ 268.00			
8	0	1					
9	0	1					
10	0	1					
11	0	1					
12	0	1					
13	0	1					
14	0	1					
15	0	1					
16	0	1					
17	0	1					
18	0						
19	0	1					
20	0						
21	0						
22	0						
23	0	2					
24	0						
25	0	1					
26	0	1					
27	0	1					
28	0	1					
29	0	1					
30	0	1					

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

Signature:

Date:

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

Tel: 63837168 / 63837466 Fax: 62815767

Case Owner	:	<u>BRENDA</u>
Year of Manufacture	:	2009

Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.

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	21/07/2021 14:22 (SGT)
Date of Accident	20/07/2021 16:02 (SGT)
Exact Location of Accident	1D Cantonment Rd, Singapore 085401
Additional Location Information	LVL 1 HDB MULTI STOREY CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ2568H
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	U NAY MYO AUNG
NRIC No	SXXXX375A
Email Address	naymyoang1@gmail.com
Mobile Phone No	(Phone) +65-90092475
Alternative Phone No	+65-90092475

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
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	1600

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100133918
Cover Note Number	-

DRIVER

Name of Driver	U NAY MYO AUNG
NRIC No	SXXXX375A

Date Of Birth	07/03/1970
Occupation	Indoor
Date Of Driving Pass	28/11/2007
Driving experience	13 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90092475
Alt. Phone Number	+65-90092475
Email Address	naymyoaung1@gmail.com
Address	BLK 1F CANTOMENT ROAD #04-63
Address complement	-
Postcode	085601
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 - Opening Door of Vehicle
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 vehicle or property damaged?	Yes
Number of Passengers (including Driver)	2
Has the driver been approached by unknown persons soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	KHIN MYO WIN
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?	-

ENCLOSURE ATTACHED BY ACCIDENT

PLEASE REFER TO ATTACHED

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	SH8614Z
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi

CHEONG SENG YONG

(Phone) = 65-67271668

Address _____

Address complement

Procedures

Insurance Company Name

Nature Of Damage

Details of property damaged in accident:

No. of Passengers (including Driver)

Wang, Y. and G. Chen, 2005, 'The Effect of the Exchange Rate on the Trade Balance in China', *Journal of International Trade and Development*, 16(1), 1-14.

14-21760

0-2000 0-100 0-1000

Abstract

(E³₂₀₀₉₀₂) X-67-04730442

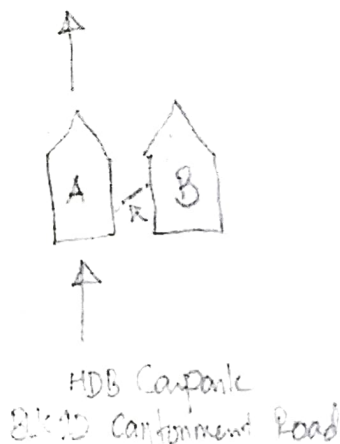
Figure 2

[illegible]

SKETCH PLAN

A: SJD2568H

B: SHB6142



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the day of 20th July 2021 about 4:02 pm, I was driving out of my HDB carpark. In front of my car, the SMRT taxi (SHB6142) was stopping and waiting. ~~for~~ As there was enough space beside that taxi, I drove and passed over the taxi. In the half-way of passing, the passenger in the taxi suddenly open the passenger door at the left back of the taxi. The door hit my car's left side passenger door and damaged the door and door handler.

The taxi driver and the passenger admitted their fault. The passenger provided her particulars to the taxi driver. The taxi driver provided his particulars to me, and exchanged the info then, we left.

No one was injured or hurt during incident. My wife (Khin Myo Win) was with me in my car during the incident and she witness the incident.

DECLARATION

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

Policyholder's Signature
Date & Time

21/7/2021

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

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