

# STUTTGART AUTO PTE LTD 27A TANJONG PENJURU, SINGAPORE 609042 EUROKARS GROUP ESTIMATE COST OF REPAIRS

CHIN	A TAIPING	INSURANCE (SINGAPORE)	NAME:					WIP:		21921	
3 Anson Road			ADDRESS :					EXCESS:			
#16-0	0 Springleaf	Tower						DATE:		16-Sep-21	
Singa	ore 079909										
ATTN.	:	MOTOR CLAIMS	TEL:								
FAX:											
VEH NO: SJP9088K		SJP9088K	DATE IN :		CONTACT PERSON :			JOBI		63310682	
CHASSIS NO :		WP0ZZZ97ZJL117689	MILEAGE:		TYPE OF CLAIM:			1WO	OWN DAMAGE		
MODI	Li	Panamera	DATE REG.:	7-Nov-18	POLICY NO.:						
	T			NATURE O	WORKS						
s/NO			Pai	rts Descriptio	<u>on</u>						
				QTY		1ST	SUPP	REVISED		PRICES	
1	FRONT BUN	/IPER		1	P971-898-010				\$	2,237.60	
2	FRONT GRIL	LE CENTER		1	P971-807-683-B -OK1				\$	308.50	
3	FRONT GRIL	LE LH		1	P971-807-681OK1				\$	129.00	
4	FRONT GRIL	LE LH OUTER TRIM		1	P971-807-485OK1				\$	99.30	
5	FRONT GRIL	LE DISC SUPPORT LH		1	P971-807-985OK1				\$	94.50	
6	FRONT GRILLE LH DISC			1	P971-807-877OK1				\$	127.70	
7	HOUSING FOR CAMERA			1	P971-807-762OK1				\$	43.00	
8	SUPPORT BI	RACKET FOR CAMERA		1	P971-807-997				\$	40.20	
9	SENSOR			6	P5Q0-919-275-B -G2X				\$	1,511.40	
10	SENSOR GASKET			6	P5Q0-919-1339B9				\$	18.60	
11	NUMBER PL	ATE BRACKET		1	P971-807-999OK1				\$	85.00	
12	HEADLIGHT	BRACKET LH		1	P971-807-347				\$	85.80	
13	FRONT BUM	IPER RETAINER LH		1	P971-807-283				\$	38.80	
14	FIXING DEVI	CE		2	P971-807-180				\$	27.40	
15	FRONT BUIV	IPER REINFORCEMENT		1	P971-805-241-E -				\$	1,099.90	
16	FRONT BUM	IPER SPONGE		1	P971-807-550				\$	83.90	
17	ADDITIONAL HEADLAMP LH			1	P971-953-041-H -				\$	757.30	
18				0	0				\$		
					TOTAL PARTS				\$	6,787.90	
									\$	-	
					TOTAL PARTS COST				\$	6,787.90	
			14	SUPPLEME	NTARY						
NO		DESCRIPTION		QTY	PARTS NO	1st	Supp	REVISED		PRICES	
1								^			
2											
3											
	<u>Labour Description</u>										
1	TO REMOVE	O REMOVE /REPLACE FRONT BUMPER, REINFORCEMENT & ALL DAMAGED BODY PARTS. TO							\$	3,120.00	
	REPAIR ALL AREAS AFFECTED BY THE ACCIDENT.										
2	TO RESPRAY	FRONT BUMPER							\$	1,500.00	

3	TO SUPPLY FRONT LICENCE PLATE WITH CASING	NETT	\$ 70.00	
4	TO TRANSFER THE FRONT SENSORS.			\$ 300.00
5	TO TRANSFER THE FRONT CAMERA.			\$ 300.00
6	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING	G.		\$ 250.00
7	O REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.		NETT	\$ 600.00
8	SUNDRIES.	NETT	\$ 50.00	
		TOTAL LABOUR	\$ -	\$ 6,190.00
		TOTAL PARTS	\$ -	\$ 6,787.90
		TOTAL	\$	\$ 12,977.90
		LESS EXCESS	\$ -	\$ .¥:
		TOTAL AFTER EXCESS	\$	\$ 12,977.90
		GST 7%	\$ -	\$ 908.45
		GRAND TOTAL	\$ -	\$ 13,886.35

### REMARKS:

THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT.

TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400.00 WILL BE APPLY AS ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.

SL032196000A / Lal Huat (Meng Kee) Motor Pte Ltd ENTRY DATE & TIME: 06/09/2021 18:03 (SGT) SUBMITTED BY: LHMK -3 VERSION: I (08/09/2021 11:24 (SGT))



# SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process,
 This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

3. Information provided must be as truthful and accurate as possible, Any wilful misrepresentation or witholding 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 **Exact Location of Accident** Additional Location Information Country/State of Loss

06/09/2021 18:03 (SGT) 06/09/2021 10:15 (SGT) Bukit Merah Central, Singapore Blk 119 multi storey carpark Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SJP9088K

INSURED/POLICYHOLDER

is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No.

Yes HPC Builders Pte Ltd 200414934H fan.xz@holmail,com (Phone) +65-93863172 (Office) +65-62277927

VEHICLE PARTICULARS

Manufacturer Model Varient 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? . Vehicle Category Transmission CC

Porsche Panamera

Employment

Yes Private car Auto 2995

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

China Taiping Insurance (Singapore) Pte. Ltd. Comprehensive DMPCSNA00000451900

DRIVER

Name of Driver NRIC No

Shi Jianhua S2741662D Date Of Birth Occupation Date Of Driving Pass Driving experience Gender

Mobile Number Alt, Phone Number Email Address Address

Address complement

Postcode

Is the driver the policyholder? If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Please refer to sketch plan

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Was there any audio recorded?

28/09/1963 Indoor 02/10/2004

16 YEARS AND 11 MONTHS

(Phone) +65-90610025

fan.xz@hotmail.com

27 Keppel Bay View #15-83

098416 No

Employee Νo

Collision - Major/Minor Rd

Clear Dry

No 2

No

Yes

No

No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

Nο

No

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour Vehicle Category

Name of Driver Contact Number

Address Address complement SFY9655Z

Private car

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2 This Formmust 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 Formby insurance companies is not an admission of policy liability on the part of file insurance companies.
- 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 ledgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and (o copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 'Porsonal Information') and disclose and transfer such Porsonal 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 law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (ii) 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Angle Soh

Sketch Plan

be Circumstances of the Accident	
on 6/9/21, 9+ about 10.15 am	- 1 was drawne
Cle no SJP 9088 K at the multi sto 119 BUKIT Merals Central As 9 M slope to the cargane, a vehicle no moving on the driveway and 9 ac	YOUR CONDON EN
(110 Ruk)+ Mayale Cantral A. A. In	and discourse will
along the the company a realizable in	and of the
Stope to The Congress of a venice no	30 9833 July Just
to the said vehicle's right rear door	clasurally "
is the said venicle 3 ngut very down	-)100
	269/
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	The second second second
g eran	

# Declaration

IWe declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centro Personnel Angle So

Angle Soh

CENEDAL



IMPORIANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report. **ADDENDUM** (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Orlginal Report Not SL032196000A \_\_\_\_\_ Vehicle Registration No. SJP 9088K Name (as shown in HRICH HPC Builders Pie Ltd NRIC/FIN/Passport No: 2XXXXX934H (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate Address: \_\_ Contact (Tel): 52277927 Mobile No.: 93863172 Email Address: fan.xz@hotmail.com Date of Accident: 06/09/2021 Time of Accident: 10:15 hours Place of Accident: Blk 119 Bukit Merah Central multi-storey car park Insurance Company: China Taiping Insurance (Singapore) Pte Ltd (B) ADDITIONAL INFORMATION /AMENDMENTS: I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments: I would like to daim against my own insurance M/S China Taiping Insurance (Singapore) for the repair. Affix company stamp & sign Policyholder / Driver's Signatu Reporting Centre Personnel's Signature Date: 02/09/202 Name: NRIC/FIN No.: Date: 08 09/2021

trop of the control o

Accident report SL032196000A



Motor Private Car

MX4F

\_\_\_\_

BR0056A Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chopter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1860 Road Transport Act, 1887 (Malaysis) Motor Vehicles (Third-Party Risks) Rules, 1859 (Malaysis)

CERTIFICATE No.

DMPCSNW00150792001

Engine No.: 023902

Cha. No.:WP0ZZZ97ZJL117689

1. Index Mark and Registration

Number of Vehicle

SJP9088K

2. Name of Policy Holder

HPC BUILDERS PTE LTD

 Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

07/11/2020

Named Drivers Ex Sect. I

\$\$2,500.00

112020

Additional Ex Other than Named Drivers:

......

Ex Sect. | - Age <= 25 Ex Sect. | - Age >= 26 \$\$3,000.00 \$\$500.00

\* Ago as at date of accident

EX ON WINDSCREEN.

\$\$350.00

4. Date of Expiry of Insurance

08/11/2021

Persons or Classes of Persons entitled to drive\*
 Any person who is driving on the Policyholder's order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Umilations as to use:\*

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for him or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with eny trade or business or use for any purpose in connection with the Motor Trade. Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubted. One time Walver of Excess for the first \$\$500 will apply to the insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

\* Limitations rendered Inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chepter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD,

Issued By: SIME DARBY INSURANCE BROKERS
Authorised Officer

Authorised Signatory

## REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$2741662D





AUHNAIL IHE





Des of birth 28=09-1983 Country/Place of birth CHINA

Sex M

S2741662D

9504836





CHINESE Date of leave 22-10-2018

27 KEPPEL BAY VIEW #15-83 SINGAPORE 098416



