

# PRECISE AUTO SERVICE

NO 1 KAKI BUKIT AVE 6 #02-34/36 AUTOBAY SINGAPORE 417883

TEL : 6745 7367 FAX : 6841 3390

CO. REG. NO. : 35766600C GST REG. NO. : 35766600C

05-11-21

Accident Date : 03-11-2021

OUR REF : SLM 4656X/T/21

**M/s India International Insurance Pte Ltd**  
**64 Cecil Street**  
**#05-01 IOB Building**  
**Singapore 049711**

**ATTN : (Ms.Meenachi) MOTOR CLAIMS DEPARTMENT**

INSURED : YEO HONG HONG

POLICY NO : D19MPC0001209\_02

VEHICLE NO : SLM 4656X

MODEL : HYUNDAI ELANTRA

CHASSIS NO : KMHD841CMHU333519

## ESTIMATE BILL

### COST PLUS

Bonnet		520.00
Front Number Plate Garnish		54.10
Bonnrt Lock Mechanism		75.00
Head Lamp Assy	2pcs @ 750.00	1,500.00
Head Lamp Bracket	2pcs @ 23.00	46.00
Front Bumper Fascia		290.00
Front Bumper Clips	10pcs @ 2.00	20.00
Front Bumper Tow Cover		15.00
Front Bumper Grille Center		400.00
Front Bumper Sponge		55.00
Front Bumper Reinforcement Beam		265.00
Front Bumper Bracket	2pcs @ 22.00	44.00
Front Bumper Side Retainer	2pcs @ 25.00	50.00
Front Bumper Top Garnish Cover		45.00
Front Bumper Top Garnish Cover Clips	6pcs @ 2.00	12.00
Front Support Panel		320.00

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3,711.10

Cost Plus 15%:

556.67

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4,267.77

**SPECIAL NETT ITEM**

Front Number Plate	45.00
Front Number Plate Casing	29.00

**LABOUR CHARGE**

Towing.	100.00
To Check Wiring System.	80.00
To Remove & Refix Air Cond Condensor, Vacuum & Top Up Gas.	180.00
To Remove & Refix Radiator and Top Up Coolant.	180.00
To Respray Affected Areas.	850.00
To Replace Damaged Parts, Straighten, Repair And Aligned All Parts.	950.00

	6,681.77
GST 7%:	467.72
<b>TOTAL AMOUNT:</b>	<b><u>7,149.49</u></b>

## 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	05/11/2021 17:31 (SGT)
Date of Accident	03/11/2021 18:30 (SGT)
Exact Location of Accident	Lornie Viaduct, Singapore
Additional Location Information	EXIT TO BISHAN FLYOVER (TWDS BARTLEY RD EAST)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM4656X
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YEO HONG HONG
NRIC No	S0054709C
Email Address	cosmoxie.sea@gmail.com
Mobile Phone No	(Phone) +65-8511091
Alternative Phone No	+65-8511091

### VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Elantra
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1600

### INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D19MPC0001209_02
Cover Note Number	-

### DRIVER

Name of Driver	XIE ZHENYU COSMO
NRIC No	S9305640Z

Date Of Birth	11/02/2008
Occupation	Outdoor
Date Of Driving Pass	08/12/2011
Driving experience	9 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81254083
Alt. Phone Number	-
Email Address	cosmoxie.sea@gmail.com
Address	BLK 335B YISHUN ST 31 #09-61
Address complement	-
Postcode	762335
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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 vehicle 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

ON 03/11/2021 AT ABOUT 1830HRS, I WAS DRIVING MY CAR (SLM4656X) ALONG LORNIE VIADUCT. UPON REACHING THE JUNCTION EXIT TO BISHAN FLYOVER, THE VEHICLE IN FRONT OF ME (SGR6881G) SUDDENLY APPLIED E-BRAKE TO STOP AND I HAVE NO ENOUGH TIME TO STOP AND THEN ACCIDENTALLY HIT ONTO REAR PORTION OF VEHICLE B. NO ONE INJURED IN THIS ACCIDENT.

#### 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	SGR6881G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-



<b>Address</b>	XXXXXXXXXXXX XXX XXX XXX XXXXXXXXXXXX XX X XXXXXXXXXXXXXXXXXX XXXXXXXXX	-
<b>Address complement</b>	XX	-
<b>Postcode</b>	XXXXXXXXXXXX XXX XX XXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXX	-
<b>Insurance Company Name</b>	XX	-
<b>Nature Of Damage</b>	XX	-
<b>Details of property damaged in accident</b>	XX	VEHICLE B
<b>No. Of Passenger (Including Driver)</b>	XXXXXXXXXXXX XXX XXXXX XXXXXXXXXXXXXXXXXX	-

# SKETCH PLAN

## IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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. 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:

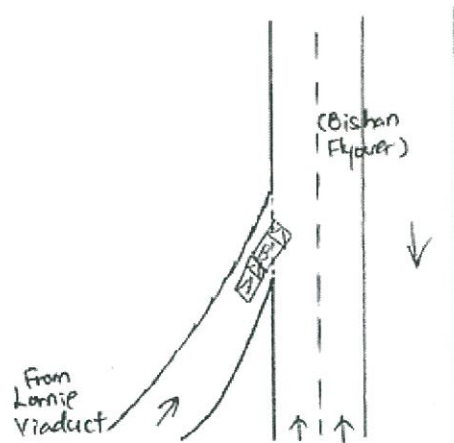
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

SKETCH PLAN



(A) SLM 4656X

(B) SGR 6881G.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 03/11/2021 at about 1830hrs, I was driving my car (SLM 4656X) along Lornie Viaduct. Upon reaching the junction exit to Bishan Flyover, the vehicle in front of me (SGR 6881G) suddenly apply e-brake to stop and i have no enough time to stop and then accidently hit onto rear portion of veh. B. No one injured in this accident.

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.:



## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

**CERTIFICATE NO.: D19MPC0001209\_02**

**COVER: COMPREHENSIVE**

<b>1. Index Mark and Registration Number of Vehicle</b>	: SLM4656X
<b>Chassis No</b>	: KMHD841CMU333519
<b>2. Name of Policyholder</b>	: YEO HONG HONG
<b>3. Effective date of Insurance</b>	: 31 Mar 2021
<b>4. Expiry date of Insurance</b>	: 30 Mar 2022
<b>5. Persons or Classes of Persons entitled to drive*</b>	
(a) The Policyholder	
The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.	
(b) Any other person who is driving on the Policyholder's order or with his/her 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	
<b>6. Limitations as to use*</b>	
Use only for social, domestic and pleasure purposes and for the Policyholder's business.	
<b>The Policy does not cover</b>	
a) Use for hire or reward.	
b) Use for racing, pace-making, reliability trial, speed-testing.	
c) Use for the carriage of goods other than samples in connection with any trade or business.	
d) Use for any purpose in connection with the Motor Trade.	
*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.	

Insured & Named Drivers Excess Sect I : SGD 600.00  
Unnamed Drivers Excess Sect I : SGD 1,100.00  
Windscreen Excess : SGD 100.00

Lease Purchase Company : N.A

FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.

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 (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Agent/Broker : A000050/Sunmex Enterprise  
Date of Issue : 17/03/2021 10:16:18  
MX1-Private Car (Insured Driving)

For India International Insurance Pte Ltd



Authorised Signatory



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0054709C

Name

YEO HONG HONG  
@ANG KEE  
楊芳芳

Race  
CHINESE

Date of Birth  
02-07-1954


Sex  
F

Country of Birth  
SINGAPORE



85110191

1030934



NRIC No. S0054709C



Blood Group  
O\*

Date of issue  
05-06-1993

69 RIVERINA VIEW  
SINGAPORE 518418  
NRIC No: S0054709C Date: 25-08-2002 No: 4350417





NAME

XIE ZHENYU, COSMO

NRIC NO.

S9305640Z



DATE OF BIRTH

29 JAN 1993

SEX

MALE

NATIONALITY / CITIZENSHIP

SINGAPORE CITIZEN

DATE OF ISSUE

11 FEB 2008

ADDRESS

335B YISHUN STREET 31

#09-61

SINGAPORE 762335

^ Hide details



Driving Licence

## QUALIFIED DRIVING LICENCE

Class/Issue Date

**3 / 08 DEC 2011**

Status

**VALID**

Certificate of Merit Status

**NOT ELIGIBLE**

Total Demerit Points

**12**

Photocard Serial Number

**002904199A**

## PROVISIONAL DRIVING LICENCE

**NOT HOLDING**

**Vehicle Ownership**