

SS1Q21BM0002 / SU Brothers Motor Workshop ENTRY DATE & TIME: 22/11/2021 15:59 (SGT)
SUBMITTED BY: Ong Soon Eng VERSION: 1 (23/11/2021 17:33 (SGT))



# 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 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 22/11/2021 15:59 (SGT) Date of Accident 21/11/2021 19:05 (SGT) **Exact Location of Accident** Singapore Additional Location Information

SLIP ROAD FROM BISHAN RD TO TOA PAYOH ZEBRA **CROSSING** 

Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMF3084C

INSURED/POLICYHOLDER

is company?

Name Of Registered Owner NRIC No **Email Address** 

Mobile Phone No (Phone) +65-90302770 Alternative Phone No +65-90302770

VEHICLE PARTICULARS

\anufacturer Honda Model Vezel 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? Vehicle Category

Transmission CC

Private use

S7145048A

No - Claiming third party Private car

REUTENS SHARON SANDRA

sharon.reutens@gmail.com

Auto 1500

**INSURANCE COMPANY** 

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number Cover Note Number NTUC Income Insurance Co-operative Ltd Comprehensive No

5119363491-01

DRIVER

Name of Driver

REUTENS SHARON SANDRA

NRIC No S7145048A Date Of Birth 15/12/1971 Occupation Indoor Date Of Driving Pass 19/05/2003 Driving experience 18 YEARS AND 6 MONTHS Gender Female Mobile Number (Phone) +65-90302770 Alt. Phone Number +65-90302770 Email Address sharon.reutens@gmail.com Address BLK 223 BISHAN STREET 23 #04-133 Address complement Postcode 570223 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 - 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 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 person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name KOH SEE KIAT Gender Male 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 SUNDAY, 21 NOV 2021, AT ABOUT 7:05PM., I, SHARON REUTERS, WAS DRIVING SMF 3084 C, FROM BISHAN ROAD

TOWARDS TOA PAYOH, AT THE SLIP ROAD AT THE CORNER OF BISHAN SKATE/HARMONY PARK. I STOPPED AT THE ZEBRA-CROSSING FOR A PEDESTRIAN TO CROSS WHEN I WAS HIT FROM BEHIND BY A BLUE TAXI SHA 4293 U. THE IMPACT CAUSED MY CAR'S REAR BUMPER AND BACK HATCH DOOR TO BE BADLY DAMAGED, NOT SURE ABOUT OTHER NON-VISIBLE DAMAGES AT THIS MOMENT. ONLY MINOR DAMAGE WAS INCURRED BY THE TAXI. NO INJURIES WERE NOTED AND THIS IS ACKNOWLEDGED BY ALL PARTIES. REAR CAMERA FOOTAGE FROM SMF 3084 C SHOWS THAT THE TAXI DID NOT SLOW DOWN BEFORE HITTING SMF 3084 C WHICH HAD ALREADY BEEN STATIONARY FOR SOME TIME AT THE ZEBRA-CROSSING.

ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident **KIV** Was there any audio recorded? Nο

# DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	0114 400011
Vehicle Manufacturer	SHA4293U
	347
Vehicle Model	( <b>=</b> ))
Vehicle Variant	æ¥.
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	LAI KOK WAH
NRIC No	S0231280H
Contact Number	(Phone) +65-96857131
Address	=
Address complement	_
Postcode	_
Insurance Company Name	-
Nature Of Damage	-
•	≅ 
Details of property damaged in accident	<u>.</u>
No. Of Passenger (Including Driver)	2

#### SKETCH PLAN

#### MPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GA 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 puries.
- 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 mode available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Funderstand, acknowledge, agree and consent that

(a) My insurer , my workshop and the General hisurance 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 law yers 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 objins and any necessary investigations relating to

- (a) investigating the accident and/or my claims;
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by my;
- (w) admnistering 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 and packages); and/or
- (v) complying wich applicable law in administering, processing, handling and/or dealing with my claims

(collectively the 'Purposes')

- (b) at insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, maytare 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 (irms), which may be sited outside of Singapore, for one or more of the above Purposes

francuteurane monsterlene Philopholder's Signature / Date & Driver's Signature (If driver is not the policyhulder) / Date Wenessed by Reporting Centre Time 22/11/24 12: 30 pm & Time 22/11/21 Personnel 12130pm Sketch Plan POELL ROA TON PAYOR SMF 3084 C 2 - TAXI . SHA 4293 U 9 BISHAN POND

Describe Circumstances of the Accident On Sunday, 21 Nov 2021, at about 7:05 pm., I, sharon Rewens was driving SMF 3084C, from Breham Road towards Too Payon, at the thip road at the corner of Phishan Skate / Harmony park. I stopped at the zelova-crossing for a pedestrian to cross when I was hir from behind my a blue taxi SHA 4293 U. The impact caused my car's rear bumper and back hatch door to be badly damaged, NOT nue abour other non-visible damages at this moment. Only minor homese mas incurred by the taki. No injuries were noted and this is acknowledged by all powers. Rear corners tootage from SMF 3084C shows that the taxidid not slow down before hitting SMF3084C which had already been stationary for some time at the eclara - wassing Please Tick at Su Brothers Other Workshop unic Name of Wishop A E SOP ANTO CAME Declaration Envent Address WWo declare the foregoing particulars are true in every respect. · acsopac@ singuet. Avanoriteuran Inavolteuran Policyholder's Signature / Date & Driver's Signature (if driver is not the policyholder) / Onte Wilnessed by Reporting Centre

8 Time 2.2 11/21 1pm.

Personnel

Time 22/11/21 1pm.



# GENERAL INSURANCE

IMPORTANT.NOTE Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Griginal Report.

# ADDENDUM

MAKING THE AMENDMENTS	SWE JOBA C
(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:  Original Report No: SS / 62 2   6 M 0 0 0 2 SAND'S  Name (its shown in anic)   Rewiters   Sharen   NRIC/FIN/Passport    NAME (its shown in anic)   NRIC/FIN/Passport    NAME (its shown in anic)   NRIC/FIN/Passport    NRIC/FIN/Passport   NRIC/FIN/Passport   NRIC/FIN/Passport    NRIC/FIN/Passport   NRIC/FIN/Passport   N	No SKKIKO4FA
Name (as shown in self)  (*Vehicle Driver/Vehicle Owner) (*) Please driete as appropriate  (*Vehicle Driver/Vehicle Owner) (*) Please driete as appropriate	Singapore (\$70 114)
Name (as shown in self)  ("Vehicle Driver/Vehicle Owner) (") Please delete as appropriate  ("Vehicle Driver/Vehicle Owner) (") Please delete as appropriate  Address:  BIIC 223 Bishon Si.23 R 04-133  Address:  Contact (Tel):  Character Contact (Self):  Contact (Tel):	90301770
Small Address:	14, 07
Date of Accident:	Ton Payoh Zebra
Place of Accident Slip Room From Bishan Room E Insurance Company:	The state of the s

(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:

instead of	d Enail add	is sh	aron, rente	ns 60 gonail.
Int. Contact				
			19	

Harriver ar-

Policyholder / Driver's Signature

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



# Enquire Vehicle Owner Details (As At 21 Nov 2021 / 19:05:00)

### Vehicle Owner Details

Owner ID Type:

Company

Owner Name:

**COMFORT TRANSPORTATION PTE LTD** 

Registered Block/House No.:

383

Registered Unit No.:

Registered Postal Code:

575717

Owner ID:

199303821R

Registered Address Type:

Private Residential (Condo Apt or House) /

Shopping / Office Complexes

Registered Street Name:

SIN MING DRIVE

Registered Building Name:

**GAS BUILDING** 

# Vehicle Insurance Details

Vehicle No.:

SHA4293U

Insurance Company Name:

**AXA INSURANCE PTE LTD** 

Make Description/Model:

HYUNDAI / AE IONIQ HEV FL 1.6 DCT

Printed on 25 Nov 2021 15:57:57

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專營達善必甲出租 汽車修理 汽車保險賠償服務 嘉實多授權服務中心

**Authorised Signature** 

# NATIONAL AUTOMOBILE SERVICE

Block 5033, Ang Mo Kio Industrial Park 2, #01-279 (off Ang Mo Kio Avenue 3) Singapore 569536

TEL: 6482 5577 (3 Lines) FAX: 6482 5000 TOWING SERVICE: 9182 8211 (After 10.30pm)

Reg. No: 062389/00M



TRUCK RENTAL **MOTOR REPAIR INSURANCE CLAIMS AGENCY** AUTHORISED CASTROL SERVICE CENTRE

Hirer's Signature

## 车辆出租合同 **VEHICLE RENTAL AGREEMENT**

Date: DI II WM.		14:112996949c
Owner: NATIONAL AUTO Hirer: Reuter	MOBILE SERVICE ("the o	owner") SMF30846
Address: B(L) } 1	Bibly 33	# 04-133 SI 87000)
NRIC / Co. Reg. No:	S714 50 48 A.	H/P: 9030 2770
Owner and Hirer have agreed to e	nter into this Vehicle Rental Agreeme	nt for the motor vehicle described below and upon the nowledges having read and understood all the terms and
	5118 G	Agreement No.: 60480
A 1	Shown Sandra	Odometer:  Date & Time Out:  Date & Time In:  4   1   2   1
Date of Birth:	Dr/Licence No:  TYYOYA  Occupation:  Speech Therapin  Tools:  Spare Tyre:  ONE MA	Hour @\$  ( ) Days @\$ ( ) ( )  Wks @\$  Mths @\$
Hirer is responsible for the first \$	excess for collision/damage to first pag windscreen) plus loss of earnings while d	Sub-Total:  rty, (i.e.)  amaged  Balance To Pay:
Hirer shall pay additional excess of S\$1500 if to 65 years old or has less than 2 years driving ex Driver Not Cover By Insurance General Exception: Insurance policy does not 70 years old and/or with driving experience of	perience.  cover against any driver aged below 22 and/c	PETROL/DIESEL AT YOUR OWN EXPENSE
NATIONAL AUTOMOBILE SER	/ICE	
<i>f</i>		Snavoukentem

# **AESOP AUTOMOTIVE CENTRE**

Blk 5032 Ang Mo Kio Industrial Park 2 #01-299

Singapore 569535

Tel No.: 64830007 64812002 Fax No.: 64811633

E-Mail: aesopac@singnet.com.sg

Tax Reg. No.: 52811984B Buss. Reg. No.: 52811984B

MS. REUTENS SHARON SANDRA BLK 223 BISHAN STREET 23 #04-133

SINGAPORE 570223

Contact: 90302770

Final Repair Bill: 00080026

Date : 08/12/2021 Vehicle Num. : SMF 3084 C

Make/Model: HONDA VEZEL-2018 Chassis/Eng#: RU31303486/LEB6723493

Accident Date : 21/11/2021

Claim No. : Reference :

Policy No. 5119363491-01

Amount S\$

9,500.00

TO LUMP SUMP REPAIR ON ACCIDENT DAMAGE AS ALLIED AUTO APPRAISAL

REPORT REFERENCE NO: 21/0059/TP

SingDollars: Nine Thousand Five Hundred Only

Total S\$

9,500.00

========

AESOP AUTOMOTIVE CENTRE



Our Reference

: 21/0059/TP

Invoice Number

: 1710

Date: 6 December 2021

Ms Reutens Sharon Sandra C/o Block 5032 Ang Mo Kio Ind Park 2 #01-299/301 Singapore 569535

### INVOICE

DESCRIPTION	AMOUNT S\$
Professional Inspection Fee (SMF 3084 C)	\$455.00
Coloured Photographs (102 pieces)	\$102.00
Transport Fee	\$60.00
Re-inspection Fee (25/11/2021 & 04/12/2021)	\$160.00
TOTAL	\$777.00

Terms of payment: Cash on delivery All payments payable to "Ng Heng Chai"

**Allied Auto Appraisal** 



Our Ref

21/0059/TP

Your Ref

Not Advised

Date: 22 November 2021

Ms Reutens Sharon Sandra C/o Block 5032 Ang Mo Kio Ind. Park 2 #01-299/301 Singapore 569535

### ACCIDENT DAMAGED VEHICLE INSPECTION REPORT (WITHOUT PREJUDICE)

Detailed accounts of our inspection are as follows:

### (1) REFERENCE

Name of Claimant : Ms. Reutens Sharon Sandra Date of Request : 22 November 2021
Policy Number : 5119363491-01 Referred By : Insured

Claim Number : Not Advised Date of Inspection : 22 November 2021

Accident Date : 21 November 2021 Date of Re-inspection : 25 Nov 2021 & 4 Dec 2021 Repairer : Aesop Auto-Care Pte Ltd Sum Insured : Not Applicable

Repairer : Aesop Auto-Care Pte Ltd Sum Insured : Not Applicable
Block 5032 Ang Mo Kio Ind. Park 2 Excess Amount : Not Applicable
#01-299/301 3rd Party Vehicle :: SHA 4293 U

Singapore 569535 3rd Party Insurer : AXA Insurance Singapore

Pte Ltd

### (2) PARTICULARS OF VEHICLE

: 62,501 km Mileage Registration Number SMF 3084 C Make & Model Honda Vezel Hybrid 1.5X (A) Chassis Number \* RU31303486 LEB6723493 Engine Number 1 November 2018 Date of Registration **Engine Capacity** 1.496 cc Colour Red

### (3) PRE-ACCIDENT CONDITION (STATIC TEST ONLY)

Steering	: In order	Paint Work	ŝ	Good	
Footbrake	: In order	Modification	*	Sports rim	
Handbrake	: In order	General Condition	10	Fair	

### (4) TYRE CONDITION

	Remaining Thread Depth (%)	Make	Size
Front right tyre	95%	Yokohama	215/60R16
Front left tyre	95%	Yokohama	215/60R16
Rear right tyre	95%	Yokohama	215/60R16
Rear left tyre	95%	Yokohama	215/60R16



### (5) POINT OF IMPACT

Mainly on the rear portion.

#### (6) GENERAL DESCRIPTION OF DAMAGES

The impact of the collision has damaged/affected the tailgate, rear floor panel, rear end inner panel, rear end outer panel, rear bumper face and rear exhaust muffler etc.

Please refer to the Annex for a detailed account of the damages and photographs taken.

#### (7) RECOMMENDATION

We have inspected thoroughly the actual damages found on the vehicle before we conclude as to whether the parts needed replacement or repairs. The estimated cost of repair submitted by the repairer is \$12,482.28. We have adjusted the cost to \$11,175.28 and recommend that the repairs to be taken on a lump sum basis of \$9,500.00. In our opinion, the damaged parts are consistent with that caused by the accident.

### (8) REMARKS

We have not authorised the repairs. However, for information, under normal circumstances, the period of repair should not exceed **12** working days.

This inspection was conducted on a "Without Prejudice" basis.

We are pleased to advise that the inspection work was carried out accordingly, and hereby submit our Appraisal Report and photographs.

Allied Auto Appraisal

H. C. Ng

Motor Vehicle Appraiser



## **ANNEX**

No	Qty	Particulars	Condition	Repairer's Amount	Adjuster's Amount
1	1	Tailgate Assembly	Badly Dented	1,620.00	1,620.00
2	2	Tailgate Windshield Moulding  @\$82.00 each	Necessary	164.00	164.00
3	1	Tailgate VEZEL Emblem	Necessary	57.00	57.00
4	1	Tailgate HYBRID Plate	Necessary	80.10	80.10
5	1	Tailgate Lock Assembly	Dented/Jammed	245.00	245.00
6	1	Tailgate Interior Trim Board	Serviceable	295.00	0.00
7	16	Tailgate Interior Trim Board Clip @\$3.90 each	Necessary	62.40	62.40
8	1	Rear Floor Panel Assembly	Badly Crumpled	1,245.00	1,245.00
9	1	Rear Floor Panel Storage Box	Badly Deformed	264.00	264.00
10	1	Rear End Inner Panel	Badly Dented	396.00	396.00
11	1	Rear End Outer Panel	Badly Dented	585.00	585.00
12	1	Rear Compartment Smart Keyless Antenna	Serviceable	220.00	0.00
13	1	Rear End Panel Inner Garnish	Dented/Deformed	184.00	184.00
14	1	Tailgate Lock Striker	Bent	46.00	46.00
15	1	Tailgate Weather-strip	Deformed/Kinked	190.00	190.00
16	1	Rear Smart Buzzer	Cracked/Broken	150.00	150.00
17	1	Rear Bumper Face	Dented/Deformed	1,185.00	1,185.00
18	6	Rear Bumper Clip @\$3.90 each	Necessary	23.40	23.40
19	1	Rear Bumper Lower Guard	Deformed/Cracked	296.00	296.00
20	8	Rear Bumper Lower Guard Clip @\$3.90 each	Necessary	31.20	31.20
21	1	Exhaust Muffler Assembly	Dented/Bent	855.00	855.00
22	1	Exhaust Muffler Heat Shield	Dented/Deformed	165.00	165.00
				8,359.10	7,844.10
			Less 20%	1,671.82	1,568.82
		Special Nett Items	Sub-Total	6,687.28	6,275.28
23	1	Tailgate Inner Sealer	Necessary	80.00	60.00
24	1	Tailgate Windshield Glass Sealant	Necessary	80.00	60.00
25	1	Rear Floor Panel Joint Sealant	Necessary	80.00	60.00
26	1	Rear End Inner Panel Joint Sealant	Necessary	80.00	60.00
27	1	Rear End Outer Panel Joint Sealant	Necessary	80.00	60.00
28	1	Reverse Sensor Set	Dented/Malfunction	300.00	250.00
			Total Parts (S\$)	7,387.28	6,825.28

Our Ref: 21/0059/TP Vehicle No: SMF 3084 C



### Recommended Labours

No	Particulars	Repairer's Amount	Adjuster's Amount
1	To cut/weld rear floor panel assembly, rear end inner panel, rear end outer panel to renew and replace rear accident damaged parts.	2,000.00	1,750.00
2	To remove/install tailgate windshield glass to facilitate the replacement of the tailgate panel include performing water leakage test on the rear windshield seal.	180.00	150.00
3	To transfer tailgate parking aid camera to new tailgate panel include testing camera for functions.	80.00	60.00
4	To transfer tailgate locking mechanism and other components to new tailgate panel include checking components for proper function.	150.00	120.00
5	To remove/install rear seat, rear compartment trim finishers, garnishes and interior upholstery to facilitate the replacement of the rear floor panel assembly.	225.00	180.00
6	To remove/install rear compartment hybrid system to facilitate the replacement of the rear floor panel assembly.	180.00	150.00
7	To check rear lightings and electrical wiring system include performing water leakage test on the rear end panel joint seal.	80.00	50.00
8	To install rear bumper reverse sensors on the new bumper face include testing sensors for functions.	120.00	80.00
9	To remove/install exhaust piping system to facilitate the replacement of the exhaust muffler assembly include checking exhaust system for leaks.	180.00	150.00
10	To check rear compartment hybrid system and erase system fault codes, re-set and re-code to manufacturer specification using computerised diagnostic reader.	300.00	250.00
11	To putty and re-spray painting on the tailgate, rear floor panel assembly, rear end inner panel, rear end outer panel and rear bumper face.	1,400.00	1,250.00
12	Rustproofing on the rear accident affected portions.	200.00	160.00
	Total Labour (S\$)	5,095.00	4,350.00
	Total Repair Cost (S\$)	12,482.28	11,175.28
	Adjusted Repair Cost (Lump sum basis)		\$\$9,500.00





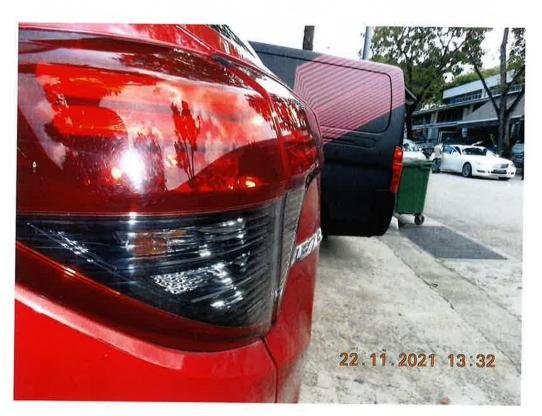




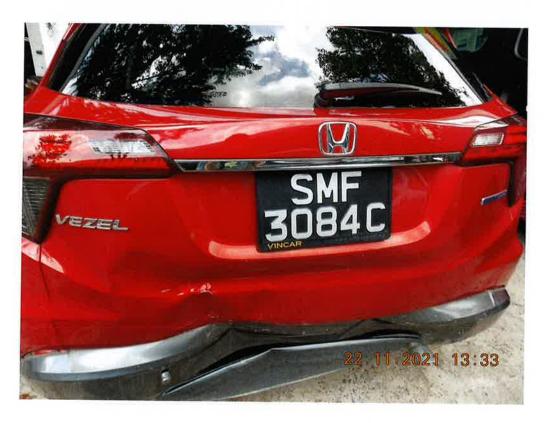


















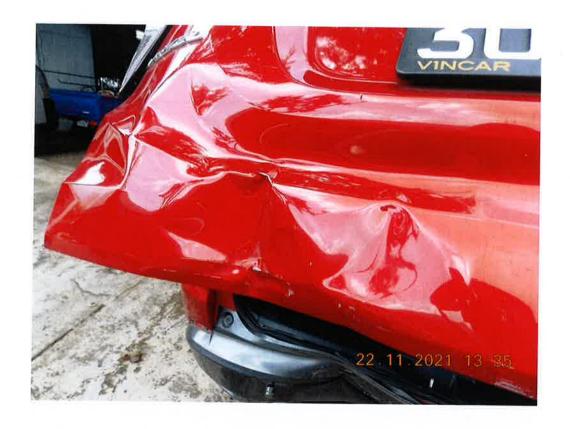


























Our Ref: 21/0059/TP Vehicle No: SMF 3084 C







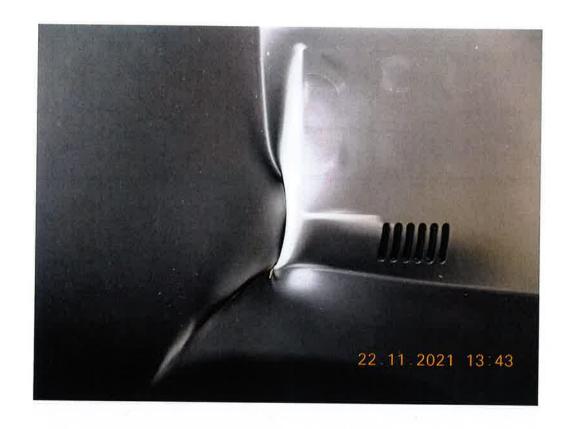
































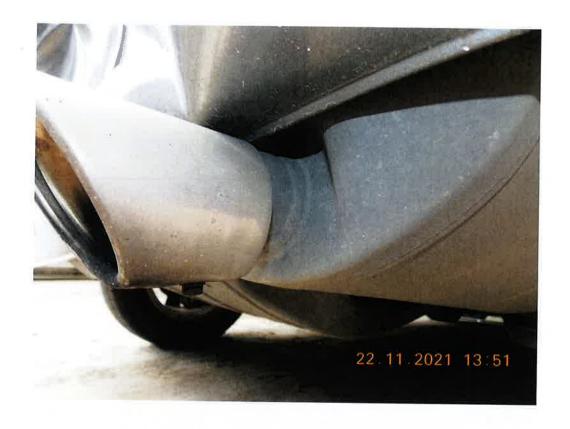


























## RESURVEY (25/11/2021)































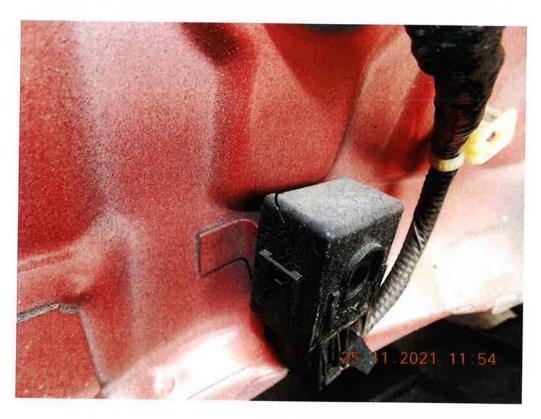












































## AFTER REPAIR (04/12/2021)















