



簡福星嘜嘜工廠 KAN FOOK SING MOTOR WORKSHOP

61 Defu Lane 12, Singapore 539147

Tel : (65) 6747 9560, 6858 2126, 6858 4361

Fax : (65) 6748 1006, 6281 8428

E-mail: kanfs@pacific.net.sg • Website: www.carparts.com.sg

Business Reg. No. 221466-006
GST Reg. No. M9-000533-E

TP INSURER: EQ Insurance Company Ltd (HQ)
CHENG KOI HEE

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	14/01/2022
Vehicle Reg. No.:	SJJ741Z	Driveable?	
Party At Fault:	UNKNOWN		
Make/Model:	HONDA FIT, 1.3 G (A)	Vehicle Reg. Date:	01/09/2008
Vehicle Colour:	METALLIC BLACK		
Engine No:	L13A4096578	Chassis No:	GE61086749
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	8		
Present Location:	KAN FOOK SING MOTOR WORKSHOP (DEFU)		

COST OF CLAIMS

	Amount
Parts	2,485.15
Miscellaneous Items	40.00
Labour	1,430.00
Paintwork Labour	820.00
Towing	0.00
Gross Total (S\$)	4,775.15
+ GST 7.00% (S\$)	334.26
Nett Amount (S\$)	5,109.41

This claim is handled by: MT TAN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS**Reference****Part Source:** MRM-SG

Version: 1.0 (Last Synchronised: 14 Jan 2022)

Parts: 144

HONDA FIT 1.3 G (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's

(Price-denominated Standard List)

Print Code: Kan Fook Sing Motor Workshop/SJJ741Z/14/01/2022 16:33**Validity:** These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page**Further Info:** Items/values not in reference catalogue are prefixed with an asterisk *.**Estimates on Parts**

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*FRONT WINDSCREEN PILLAR RH	0.00	0.00	Bp *280.00 F
2	1		*FRONT WINDSCREEN MOULDING	0.00	0.00	X *45.00 F
3	1		*FRONT FENDER RH	0.00	0.00	bt *95.00 F
4	1		*FRONT FENDER SHIELD RH	0.00	0.00	de *38.00 F
5	10		*FRONT FENDER SHIELD CLIP	0.00	0.00	rec *20.00 F
6	1		*FRONT DOOR RH	0.00	0.00	bt *340.00 F
7	1		*FRONT DOOR HINGE TOP RH	0.00	0.00	bt *30.00 F
8	1		*FRONT DOOR HINGE LOWER RH	0.00	0.00	bt *30.00 F
9	1		*FRONT DOOR CHECKER RH	0.00	0.00	? *40.00 F
10	1		*FRONT DOOR RUBBER RH	0.00	0.00	rec *45.00 F
11	1		*FRONT DOOR LOCK RH	0.00	0.00	? *180.00 F
12	1		*FRONT DOOR REGULATOR RH	0.00	0.00	? *95.00 F
13	1		*FRONT DOOR OUTER MOULING RH	0.00	0.00	de *58.00 F
14	1		*FRONT DOOR FAME STICKER RH	0.00	0.00	rec *30.00 F
15	1		*FRONT DOOR SIDE MIRROR RH	0.00	0.00	? *220.00 F
16	1		*FRONT SIDE MIRROR RH	0.00	0.00	rec *35.00 F
17	1		*REAR DOOR RH	0.00	0.00	bt *420.00 F
18	1		*REAR DOOR FAME STICKER RH	0.00	0.00	rec *20.00 F
19	1		*REAR DOOR HINGE TOP RH	0.00	0.00	Ry *30.00 F
20	1		*REAR DOOR HINGE LOWER RH	0.00	0.00	Ry *30.00 F
21	1		*FRONT DOOR OUTER HANDLE RH	0.00	0.00	dis *80.00 F

F=Franchise part.

Sub Total (S\$) 2,161.00

+ Margin on L,N Items 15.00% (S\$) 324.15

Total Parts (S\$) 2,485.15

Kan Fook Sing Motor Workshop/SJJ741Z/14/01/2022 16:33. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
<u>Miscellaneous Items</u>			
1	1	FRONT WINDSCREEN GUM	40.00
Sub Total (S\$)			40.00 40.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Paintwork Labour</u>			
1	SPRAYPAINTING CHARGES	New	750 820.00
<u>Labour Items</u>			
2	TO CHECK WIRING SYSTEM	New	✓ 30.00
3	TO CHECK ALIGNMENT	New	✓ 80.00
4	TO TRANSFER DOOR MECHANICISM TO NEW DOOR	New	✓ 80.00
5	TO REMOVE/REFIT FRONT WINDSCREEN GLASS	New	✗ 100.00
6	TO REMOVE/REFIT CUSHION, CARPET AND ETC	New	plnt ? 150.00 60
7	TO REMOVE/REFIT DASHBOARD	New	✗ 240.00
8	TO REMOVE ALL NECESSARY AFEFCTED PARTS WELD CUT PANEL BEAT AND FITTING NEW PARTS	New	600 750.00
Gross Labour Cost (S\$)			2,250.00

Kan Fook Sing Motor Workshop/SJJ741Z/14/01/2022 16:33. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Taufik 9747549/62563561
 'WP' 17/1/21 @ 3pm
 taufik @kkanto.com
 6 days
 Reming before / after paint
 To check repair 4/500 p/p.

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	1	FRONT RIM RH	300.00
Sub Total (S\$)			300.00

ent ✓

Estimates on Labour

There are no labour items selected.

Kan Fook Sing Motor Workshop/SJJ741Z/14/01/2022 16:50. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >



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	14/01/2022 12:56 (SGT)
Date of Accident	14/01/2022 08:43 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BEDOK CENTRAL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ741Z
-----------------------------	---------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHENG KOI HEE
NRIC No	SXXXX286J
Email Address	koihee@yahoo.com
Mobile Phone No	(Phone) +65-90097550
Alternative Phone No	+65-90097550

VEHICLE PARTICULARS

Manufacturer	Honda
Model	FIT 1.3G A
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1339

INSURANCE COMPANY

Name of Insurance Company	Etika Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	M0008329
Cover Note Number	01/09/2021 TO 31/08/2022

DRIVER

Name of Driver	CHENG KOI HEE
NRIC No	SXXXX286J



Date Of Birth	28/02/1974
Occupation	Indoor
Date Of Driving Pass	29/04/2005
Driving experience	16 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90097550
Alt. Phone Number	+65-90097550
Email Address	koihee@yahoo.com
Address	APT BLK 109 LENGKONG TIGA #07-277 (S) 410109
Address complement	-
Postcode	-
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 - Major/Minor Rd
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 person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	MOTHER
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

REFER WITH 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	SKD6181U
Vehicle Manufacturer	BMW
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	FOO SUAN KWOK
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

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. 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 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

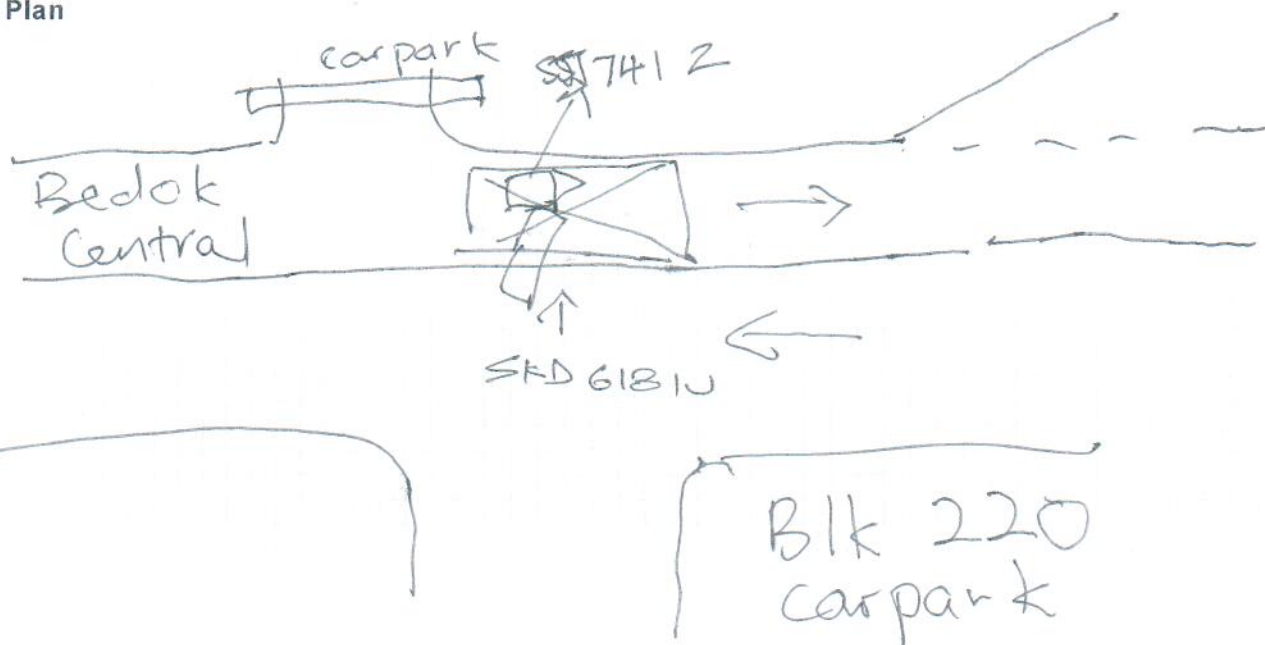
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

I was traveling straight on Bedok Central
At the yellow box my car SJJ741Z was
hit from the side.


The other car driver asked me to shift
the car because it was in the middle of the
road.

He apologised verbally. Show me his
video. He was turning out from carpark
Blk 220. He refused to give me the video.
I was moving to Bedok North Ave 3.


Note: Please note that your insurer may have 14 days time frame for you to submit an own damage claim under your own policy,
please check your policy for more information.

Declaration

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


Policyholder's Signature / Date &
Time

14/01/22


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


Witnessed by Reporting Centre
Personnel