

HWA SENG SPRAY PAINTING PTE LD
 160 Sin Ming Drive
 #05-11 Sin Ming Autocity
 SINGAPORE 575722
 (COMPANY REGISTRATION NO.: 202017045G)
 TEL : 64533100
 FAX : 62669932

Date of Accident: 23/01/2022
 Your Insured
 Vehicle No. : SKR 44481

ESTIMATE REPAIR COSTS TO NISSAN LATIO REG. NO. : SJS 8644 X

		S\$
1pc	Bootlid	969.40
1pc	Bootlid Upper Lock	141.60
1pc	Bootlid Lower Lock	77.00
1pc	Bootlid Rubber	102.30
2pcs	Bootlid Hinges (\$61.30/pc)	122.60
1pc	Logo Emblem	60.60
1pc	Emblem 'Latio'	96.60
1pc	Bootlid Chrome	311.90
2pcs	Taillamp (\$328.80/pc)	657.60
1pc	End Panel	477.80
1pc	End Panel Garnish	109.60
1pc	Spare Tyre Panel	931.80
2pcs	Side Panel (\$199.90/pc)	399.80
1pc	Spare Tyre Panel Board	524.80
1pc	Right Rear Panel	1163.30
1pc	Right Taillamp Panel	164.50
1pc	Right Rear Panel Garnish	293.70
1pc	Rear Bumper	650.70
2pcs	Rear Bumper Retainer (\$45.00/pc)	90.00
2pcs	Rear Bumper Bracket (\$55.70/pc)	111.40
1pc	Bootlid Sensor	66.70
1pc	Right Rear Panel Air Duct	81.60
1pc	Right Rear Absorber	129.20
1pc	Rear Absorber Stopper	91.30
1pc	Rear Absorber Spring	227.90
1pc	Front RH Side Member	155.10
1pc	Rear Axle	1018.10
1pc	Rear Wheel Bearing Hub	346.60
1pc	Rear Fender Housing Outer	330.90
1pc	Rear Fender Inner Cowling	30.10
1pc	Rear Windscreen Moulding	200.40
		<hr/>
		10134.90
Less: 10%		1013.49
		<hr/>
		9121.41

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S\$

Bal c/f 9121.41

LABOUR & MISC CHARGES

Panel Knocking	2500.00
Spray Painting	1600.00
Wire Checking	80.00
Computerised Wheel Alignment	150.00
Labour to Remove & Install Rear Windscreen	180.00
Sealant & Clip	80.00
Inner Seal	80.00
Labour to Remove & Refix Petrol Tank	160.00
Labour to Remove & Install Exhaust Pipe	180.00
Labour to Refix & Repair Under Carriage	650.00
1 set Reverse Sensor	250.00

TOTAL 15031.41

HWA SENG SPRAY PAINTING PTE LTD



> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 04 Feb 2022 / 12:19:49

Receipt Date/Time : 04 Feb 2022 / 12:19:49

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220204-001365

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SKR4448R

As at 23 Jan 2022/20:40:00

Insurance Co: AUTO & GENERAL INSURANCE (SINGAPORE) PTE.
LIMITED

1	Insurance Enquiry - SKR4448R Enquiry Fee 20220204121732852521	7.00	0.49	7.49
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Sub-Total 7.00 0.49 7.49

Total Before Rounding 7.00 0.49 7.49

Rounding Difference 0.04

Total Amount Payable 7.45

Paid By
400682XXXXXX8782 eNETS Credit Card 7.45

Total 7.45

Cash Change 0.00

Tendered Amount 7.45

Excess Refundable Amount 0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any full misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.**
- This report will be forwarded by the insurers of the GIA Roadworks Management Centre established by the General Insurance Association of Singapore (GIA) for archiving purposes of this report only, or if fee, be made available upon application by interested parties.
- By the judgement 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 24/01/2022 15:24 (SGT)
Date of Accident 23/01/2022 20:40 (SGT)
Exact Location of Accident Ang Mo Kio Ave 5, Singapore
Additional Location Information Slip road towards Yio Chu Kang Road
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJS8644X

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Cubic Deco Pte Ltd
Company Reg No 200503189Z
Email Address ckang@cubicdeco.com
Mobile Phone No +65-97929192
Alternative Phone No +65-97929192

VEHICLE PARTICULARS

Manufacturer Nissan
Model Latio
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1498

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00029632101
Cover Note Number -

DRIVER

Name of Driver Pua Kok Lye
NRIC No S1628970A

Date Of Birth 10/12/1964
 Occupation Outdoor
 Date Of Driving Pass 20/12/1982
 Driving experience 39 YEARS AND 1 MONTH
 Gender Male
 Mobile Number (Phone) +65-98329984
 Alt. Phone Number
 Email Address cubiclec@singnet.com.sg
 Address Blk 210A Compassvale Lane #16-158
 Address complement
 Postcode 541210
 Is the driver the policyholder? No
 If No, Relationship of the Driver with the Insured Employee
 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

Please refer to the sketch plan.

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 SKR4448R
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category Private car
 Name of Driver
 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

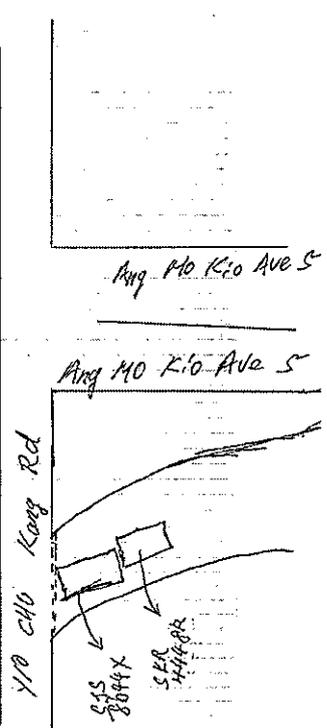
1. Please report accurately the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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)
 - 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 for such Personal Information to all insured(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 Insurer's lawyers/law firm, 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 making 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 insured(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firm, 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 situated outside of Singapore, for one or more of the above Purposes.



1145000
24/1/2022

Policyholder's Signature / Date & Time: _____
 Driver's Signature (if driver is not the policyholder) / Date & Time: _____
 Witnessed by Reporting Centre Personnel: **Angie Soh**

Sketch Plan



Describe Circumstances of the Accident

On 23/1/22 at about 8.40 pm, my vehicle no SIS 8644 X was stationary along the slip road of Ang Mo Kio Ave 5 towards Yio Chu Kang Road, waiting for the traffic to clear before turning out. Suddenly, a vehicle no SKR 4419 R hit onto the rear of my vehicle. Nobody was injured. ~~Scene~~

Declaration

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

Witnessed by Reporting Centre Personnel

[Signature]
24/1/2022
11.45 am

[Signature]
Angie Soh