SME MOTOR PTE LTD

1 Kaki Bukit Ave 6, #02-15@ Kaki Bukit, Singapore 417883 TEL: 6747 6106 (6 lines) Fax: 6744 2368

Email: service@smemotor.com.sg Website: www.smemotor.com.sg Co. & GST Reg. No: 201119451E

M/S

CHINA TAIPING INSURANCE (SINGAPORE) PTE

3 ANSON ROAD #16-00

SPRINGLEAF TOWER

SINGAPORE 079909

63896111 TEL: ATTN:

FAX: 62247478 Motor Claim Department

ESTIMATE

No:

22032802

Date:

28/03/2022

Policy No:

DMPPHQ21-002506

Veh Reg No: SLZ480T Make / Model: HONDA SHUTTLE

Your Ref No: 22/CN/TP-064(03)

Claim Type : THIRT PARTY

| | e: 26/03/2022 No:SLV3706U |
|---|------------------------------|
| 0 | Hadis Pada a |

| | Discription | Quantity | Unit Price | Amount |
|----|------------------------------|----------|-----------------------|---------------|
| | LIST PRICE: | A-MADAMA | S\$ | S\$ |
| 1 | FRT BONNET | 1 PC | | \$711.00 |
| 2 | FRT BONNET LOCK | 1 PC | | \$128.00 |
| 3 | FRT GRILLE | 1 PC | | \$285.00 |
| 4 | GRILLE OUTER MOULDING | 1 PC | | \$353.00 |
| 5 | GRILLE CENTRE LOGO | 1 PC | | \$38.00 |
| 6 | GRILLE CLIPS | 4 PCS | \$5.50 | \$22.00 |
| 7 | GRILLE CHROME | 1 PC | | \$195.00 |
| 8 | FRT BUMPER | 1 PC | | \$988.00 |
| 9 | FRT BUMPER RETAINER | 2 PCS | \$25.00 | \$50.00 |
| 10 | FRT BUMPER CLIPS | 10 PCS | \$5.50 | \$55.00 |
| 11 | FRT BUMPER REINFORCEMENT | 1 PC | * | \$328.00 |
| 12 | FRT BUMPER LOWER GARNISH | 1 PC | | \$158.00 |
| 13 | HEADLAMP | 2 PCS | \$2,237.00 | \$4,474.00 |
| 14 | HEADLAMP SUPPORT TOP GARNISH | 1 PC | 4 2,207.00 | \$79.00 |
| 15 | SUPPORT TOP GARNISH CLIPS | 8 PCS | \$5.50 | \$44.00 |
| 16 | HEADLAMP LOWER BRACKET | 2 PCS | \$55.00 | \$110.00 |
| | | 2.00 | Ψ00.00 | Ψ110.00 |
| | | TO | TAL | \$8,018.00 |
| | | -20.0 | | \$1,603.60 |
| | | 20.0 | 3070 | \$6,414.40 |
| | | | | , -, |
| 1 | SPECIAL NET | | | #40.00 |
| 1 | NUMBER PLATE | | | \$40.00 |
| | | то | TAL | \$40.00 |
| | Labour | | | |
| 1 | WIRE CHECKING | | | \$30.00 |
| 2 | LABOUR CHARGE | | | \$500.00 |
| 3 | SPRAY PAINTING | | | \$600.00 |
| | | TO | TAL | \$1,130.00 |
| | | An | nount Before Excess | \$7,584.40 |
| | | | Add GST @7% | \$530.91 |
| | | | | |

For SME MOTOR PTE LTD

AUTHORISED SIGNATURE

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. 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 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 28/03/2022 11:03 (SGT) Date of Accident 26/03/2022 11:50 (SGT) **Exact Location of Accident** Tampines Rd, Singapore Additional Location Information

Singapore

DETAILS OF OWN VEHICLE

+65-91013074

Vehicle Registration Number SLZ480T

INSURED/POLICYHOLDER

Country/State of Loss

Is company? No Name Of Registered Owner TAN CHIN BOON NRIC No SXXXX688H **Email Address** ONEGAIA11@GMAIL.COM Mobile Phone No (Phone) +65-91013074

VEHICLE PARTICULARS

Alternative Phone No

Manufacturer Honda Model Shuttle 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? No - Claiming third party

Vehicle Category Private car Transmission Auto CC 1500

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd Type of Coverage Comprehensive Fleet Policy Policy Number DMPPHQ21-002506 Cover Note Number

DRIVER

Name of Driver NRIC No

Accident report SS1Y223S0001

TAN CHIN BOON SXXXX688H

Date Of Birth 14/10/1977
Occupation Indoor
Date Of Driving Pass 24/10/2000

Date Of Driving Pass 24/10/2000
Driving experience 21 YEARS AND 5 MONTHS

Gender

Mobile Number (Phone) +65-91013074

Alt. Phone Number +65-91013074

Email Address ONEGAIA11@GMAIL.COM

Address BLK 270B PUNGGOL FIELD @=#12-227

Address complement ______

Postcode 822270
Is the driver the policyholder? Yes
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 Collision - Change/cross lane

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 injured conveyed to nospital by ambulance?

Was any other vehicle or property damaged?

Yes

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

PASSENGER 1

Name CHAN LYE WAN

Gender Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

MY VEHICLE IS STATIONARY BEHIND VEHICLE B WHEN SUDDENLY VEHICLE B REVERSED AND COLLIDED INTO MY VEHICLE'S FRONT PORTION.

No

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLV3706U
Vehicle Manufacturer

Vehicle Colour

| Vehicle Category | | Private car |
|---|--|-------------|
| Name of Driver | | æ |
| Contact Number | | = |
| Address | | = |
| Address complement | | = |
| Postcode | | |
| Insurance Company Name | | |
| Nature Of Damage | | 5 |
| Details of property damaged in accident | | |
| No. Of Passenger (Including Driver) | | |
| , , , | | |

SKETCH PLAN

IMPORTANT NOTICE

- ! Please report correctly the details of the accident to speed up the claims process
- 2. This Form most be completed by the Policyholder and/or the Authorised Driver
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- 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)

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 "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 taw 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 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 pursonal 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 (activities have yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Pena

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

Witnessed by Reporting Contre Personnel

Sketch Plan

B V LO MAISE

A.

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Describe Circumstances of the Accident

| May | valida is | July Ch | belief , | erit P | parties, | gudddag | rob. L. B | mund |
|----------------------|----------------------|----------------------|-------------------|------------------|-----------------|---------|-----------------------------|-----------|
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| Declaratio | | | | | | | | |
| We declare t | he foregoing partice | dars are kue ir | Nevery respect | | | | | |
| Mi | D.Com | | | | | | | |
| olicyholders irre | Signature / Date & | Driver's S & Tanc | Signature (Fidriy | er is not the pr | ohcyholder) / D | | nessed by Reporti Sonnel | ng Centre |

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg no, 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION(REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

PRIVATE CAR Comprehensive Classic

Certificate No.: DMPPHQ21-002506

1. Index Mark and Registration Number of Vehicles

Classic Plan - EQ Authorised Workshop Only

Form: MX2 Excess:

Insured/Named Driver:

S\$500.00 S\$1.000.00

Unnamed Drivers: YEID Additional:

S\$1,000.00 S\$3,000.00

SLZ480T

2. Name of Policyholder

TAN CHIN BOON

3. Effective Date of the Commencement of insurance for the purpose of the Act 20/04/2021

4. Date of Expiry of Insurance 19/04/2022

5. Person or Classes of persons entitled to drive*

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his permission.

EQI Motor Accident Hotline

6311 3211



* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or 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.

INWE 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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase: Maybank

f000014/Professional Investment Advisory Services Pte Ltd

Date of Issue: 24/03/2021 17:26

Authorised Signatory
EQ Insurance Company Limited

Exp No.: DMPPHQ20-001863

A Monter of City the

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLV3706U

Date of Accident

26/03/2022

Reset

% RESULT & RECEIPT

| TP Insurer Enquiry | |
|---------------------|-------------------------------|
| Insurance | China Taiping Insurance (Sing |
| Period of Insurance | 09/01/2022 - 08/01/2023 |
| Requested By | Gary Seah (SME MOTOR PTE L |
| Requested Date | 28/03/2022 09:06 |

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): **\$\$2**

General Insurance Association

Records Management Centre GST Registration No: **M400017735**