ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.

Tel: 6453 8686 (3 Lines) Fax: 6459 6550

Company Reg. No.: 201113667N

GST Reg. No.: 201113667N

No.: 06567

Vehicle Insured : GBJ1510L

Accident Date : 08-Apr-2022

Date : 08-Apr-2022

Our Ref : 022059 (ALLIANZ) / CHAN PAGE : 1

JOEHAN TOHKINGKEO @ HAN TOHKINGKEO

glass and conduct water leak test.

To remove roof lining, front and rear seats, trim board and carpet

To putty and spray replaced parts

BLK 251 KIM KEAT LINK

#08-117

Singapore 310251

ESTIMATED COST OF REPAIR FOR BMW X4 2.0 SLL2512X

1 pc	Tail gate Tail gate glass inner seal N/s tail gate lamp O/s tail gate lamp		2,420.00 115.20 409.80 409.80	
1 pc 1 pc 1 pc	Rear bumper fascia Rear bumper lower spoiler Bumper lower spoiler garnish Bumper sensor holder (set) Rear bumper reinforcement		1,539.85 779.50 113.40 138.50	
2 pcs	Rear bumper top inner parts Rear bumper inner parts	@ S\$134.30	765.35 268.60 75.95	
		Less 5% :	7,035.95 351.80	6 604 45
1 pc	Rear bumper rivet (set) Rear w/s glass sealant			6,684.15 50.00 60.00
To rea	move & refix rear windscreen			

Con't Page 2 ...

sn sn

150.00

120.00

800.00

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Page: 2

To remove, cut-out damaged parts, panel beating, welding, align, refix and to renew above parts

700.00

Total :

S\$ 8,564.15

Singapore Dollars Eight Thousand Five Hundred and Sixty Four and Cents Fifteen Only

SC1R22480007 / City Auto Pte Ltd ENTRY DATE & TIME: 08/04/2022 17:14 (SGT) SUBMITTED BY: Jason Quak VERSION: 1 (08/04/2022 17:14 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed</u> 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
- 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 08/04/2022 17:14 (SGT) Date of Accident 08/04/2022 08:40 (SGT) **Exact Location of Accident** Singapore Additional Location Information PIE (CHANGI) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SLL2512X**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner JOEHAN TOHKINGKEO NRIC No SXXXX498B **Email Address** VOEHANTKK@YAHOO.COM Mobile Phone No (Phone) +65-96489548 Alternative Phone No +65-96489548

VEHICLE PARTICULARS

Manufacturer **BMW** Model **X4** 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? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1998

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number 5118853647 Cover Note Number

Name of Driver THORNG TOHKINGKEO **NRIC No** SXXXX838F

Date Of Birth 01/05/1996 Occupation Indoor **Date Of Driving Pass** 05/05/2015 Driving experience 6 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-96489548 Alt. Phone Number **Email Address** THORN6TKK@GMAIL.COM Address BLK251 KIM KEAT LINK, #08-117 Address complement Postcode 310251 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 REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number GBJ1510L Vehicle Manufacturer Vehicle Model

Commercial vehicle

MEYYAPPAN TAMILMANI

(Phone) +65-81984857

Vehicle Variant Vehicle Colour Vehicle Category

Name of Driver

Contact Number

Address complement

Address

Postcode	
Insurance Company Name	1.00
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	72

SKETCH PLAN

IMPORTANT NOTICE

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

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 law yers law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (ii) 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 maling 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' 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 (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Poscyholoef's Signature / Cote & Time

Oriver's Signature (# driver is not the policyholder) / Date & Time

CITY AUTO PTE LTD

Bik 8 Sin Ming Road #01-56/60/62 Sin Ming Ind Est Singapore 5756-3 Tel: 6453 1235 Fax: 6453 7944 /Claims Section

Witnessed by Reporting Centre Personnel

Sketch Plan

Services Strain Strain Strain Piz- (Cotangi)

Describe Circumstances of the Accident	
0N 08-04-2072 AT ABOUT OF. 40 Am.	2 WAS DRIVING ON THE
TOP IN TIME AND COLLICATED AND THE WARDEN TO PIT- MOREMONE MARN STOP VEHICLE GRO !! TOP IN TIME AND COLLICATED ONTO MOTOR THE ACCIDENT, BOTH BE US KIMPH ENTICULOUS FOR INSURANCE CLATM, NO	(WANT) MATTIC WAS
nonceant with I saw year vertice	+ SLOW DOWN TO STUP,
I FOLLOW AND STOP, VEHILLE GRS 13	SIUL BEHIND MZ CANNOT
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MEN THE ACCUSION, BOTH OF US ALWH	760 And Exatended
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	annagalakung kalang dalam sebendah dalam kalang dalam da Tanggan dalam d
eclaration	
######################################	
We declare the foregoing particulars are true in every respect.	
	CITY AUTO PTE LTD
V Look	THE STATE OF THE S
Chillips // Lynn '	#01-58/60/52 Sin Ming Ind Est Singapore 575643
The state of the s	W. H. MAKO 4936 FAX: 0603 10"
	(Claims Section)

Driver's Signature (if driver is not the policyholder) / Date

& Time

Policyholder Signature / Date & Time

Witnessed by Reporting Centre

Personnel



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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5118853647-01 Cover : drivo PREMIUM

1. Index mark and Registration Number of Vehicle : SMR6371R

Chassis Number : WBAUJ32060LK54868
2. Name of Policyholder : JOEHAN TOHKINGKEO

3. Effective Date of Insurance : 04 Sep 2021
4. Expiry Date of Insurance : 03 Sep 2022

5. Persons 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/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.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial 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 Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

 EXCESS (SECTION 1)
 : \$\$600

 EXCESS (SECTION 2)
 : N/A

 WINDSCREEN EXCESS
 : \$\$100

 ADDITIONAL EXCESS
 : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : YES
INSURE WITH COE : YES
NCD PROTECTION : NO
TRANSPORT ALLOWANCE : NO
EXCESS WAIVER : NO

PRIMARY DRIVER : JOEHAN TOHKINGKEO@HAN TOHKINGKEO

NAMED DRIVER (1) : JINDEE TOHKINGKEO
NAMED DRIVER (2) : THORNG TOHKINGKEO

HIRE PURCHASE COMPANY : N/A

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: ASSURE (SINGAPORE) PTE. LTD. (00000615327)

Date of Issue

: 15 Jul 2021 14:20 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Sun

Chief Executive

Enquire Vehicle Registration Details

Vehicle Registration Details

Registered Address:

Mailing Address:

Vehicle No. SLL2512X	<
Make/ Mode B.M.W./X	el 4 XDRIVE30I MSPT NAV
Vehicle Sche	me
Current Prop Petrol	pellant
Chassis No.	2060LK54868
Vehicle Type Passenge	r Station Wagon/Jeep/Land Rover
Owner's	Details
Owner Na	ame:
JOEHAN	N TOHKINGKEO @HAN TOHKINGKEO
Owner ID	Type:
Singapo	re NRIC
NRIC/Pas	sport/Company Cert No.:
S148349	98B

APT BLK 251 KIM KEAT LINK #08-117 SINGAPORE 310251

1720 kg				
Maximum Laden Weight:				
2400 kg				
Vehicle Attachment 1:				
No Attachment				
Vehicle Attachment 2:				
Vehicle Attachment 3:				
•				
Additional Registration Fee (ARF) and COE Information				
Open Market Value:				
\$57,843.00				
Additional Registration Fee Rate:				
First \$20,000.00 (100%), next \$30,000.00 (140%), next \$7,843.00 (180%)				
Actual ARF Paid:				
\$76,118.00				
Vehicle Lifespan Expiry Date:				
No Lifespan				
OPC Cash Rebate Eligibility:				
No				
QP during COE Bidding Exercise:				
\$40,009.00				
COE No.:				
2019120103000449K				
COE Expiry Date:				
15 Jan 2030				
COE Catagon a				
COE Category: B - Car above 1600cc or 97kW (130bhp)				
COE Registration Category:				
B - Car above 1600cc or 97kW (130bhp)				

Quota Premium (QP) / Prevailing Quota Premium

Max Unladen Weight: