

# 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

GST:201119451E RCB NO:201119451E

M/S : United Overseas Insurance Limited  
3 Anson Road #28-01  
Singapore 079909

Claim No :

No :

Date : 04/05/2022

Policy No : DHOM110159481704

Veh Reg No : SLR9750Y

Make / Model : Honda Jade

Chasis No :

Engine No:

Reg. No :

TEL: FAX:  
ATTN: Motor Claim Department  
Your Ref No : 22/UOI/OD-214 (04)  
Claim Type : OD CLAIM  
Accident Date : 29/04/2022

## ESTIMATE FOR VEHICLE NO: SLR9750Y

	Discription	Quantity	List Price	Amount
	<b>Cost Price</b>		S\$	S\$
1	FRT LH SHOCK ABSORBER	1 PC	\$280.00	
2	FRT LH LOWER ARM (NO STOCK)	1 PC	\$595.00	
3	FRT LH LOWER ARM BALL JOINT	1 PC	\$105.00	
4	FRT LH KNUCKLE ARM	1 PC	\$295.00	
5	FRT LH KNUCKLE BEARING (NO STOCK)	1 PC	\$220.00	
6	FRT LH SPORTS RIM	1 PC	\$800.00	
			\$2,295.00	
	Add 10%		\$229.50	\$2,524.50

### Labour

1	WIRE CHECKING	\$30.00
2	REMOVE & REFIX FRT UNDERCARRIAGE	\$200.00
3	WHEEL BALANCING	\$30.00
4	4 WHEEL ALIGNMENT	\$80.00
5	LABOUR CHARGE	\$400.00
6	SPRAY PAINTING	\$650.00
		<b>\$1,390.00</b>

Amount Before Excess	\$3,914.50
Less Excess	\$0.00
Amount Before GST	\$3,914.50
Add GST @7%	\$274.01
Total Amount Payable	<b>\$4,188.50</b>

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.
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	29/04/2022 14:14 (SGT)
Date of Accident	29/04/2022 09:00 (SGT)
Exact Location of Accident	Jln Singa, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR9750Y
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	HUANG ZHENGJIE
NRIC No	SXXXX822I
Email Address	chelsiawang@gmail.com
Mobile Phone No	(Phone) +65-97993610
Alternative Phone No	+65-97993610

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Jade
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1496

#### INSURANCE COMPANY

Name of Insurance Company	United Overseas Insurance Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DHOM110159481704
Cover Note Number	-

#### DRIVER

Name of Driver	WANG QIUXIA,CHELSIA
NRIC No	SXXXX671F

Date Of Birth	05/09/1983
Occupation	Indoor
Date Of Driving Pass	19/01/2007
Driving experience	15 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97476573
Alt. Phone Number	-
Email Address	chelsiawang@gmail.com
Address	6B JALAN RIMAU
Address complement	-
Postcode	418696
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Side Swipe
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	DAUGHTER
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

VEH B SLOWED DOWN AND STOPPED WITHOUT SIGNAL.I PROCEED TO OVERTAKE ON RIGHT.VEH B MADE A TURN AND HIT MY FRT LEFT WHEEL OF MY VEH.

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJV3308J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-



Vehicle Category	Private car
Name of Driver	FOONG KHAI WENG
NRIC No	SXXXX798J
Contact Number	(Phone) +65-98007338
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

# SKETCH PLAN

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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)  
I understand, acknowledge, agree and consent that:  
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be 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 claim;  
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;  
(iv) administering my claims (including the issuing 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 be 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 also be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Sketch Plan

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

Witness by Reporting Centre Personnel

A-51897507

B-51897507

A

B

**Describe Circumstances of the Accident**

Driver slowed down and stopped without signals. Proceed to  
 evaluate on right. Driver made a turn and hit wheel (from left wheel)  
 of my vehicle.

**Declaration**

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

Policy holder's Signature / Date &  
 Time

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

Witnessed by Reporting Centre  
 Personnel

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8326671F

Name

WANG QIUXIA, CHELSIA

王秋霞

Race

CHINESE

Date of birth

05-09-1983

Sex

F

Country/Place of birth

SINGAPORE



299762



NRIC No. S8326671F



Date of issue

28-04-2014

6B JALAN RIMAU  
SINGAPORE 418698

NRIC No. S8326671F

Date: 01/11/2014

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

Class 3 Motor Cars < 3000kg with ≤ 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg

PASS 141

19 Jan 2007



Licence No. S8326671F

NP 4/8A



MEMBER OF THE UOB GROUP

**United Overseas Insurance Limited**

146 Robinson Road  
#02-01 UOI Building  
Singapore 068909

Tel (65) 6222 7733  
Fax (65) 6327 3869 / 6327 3870  
Fax (65) 6327 3872 (claims)  
Email: contactus@uoi.com.sg  
uoi.com.sg

Co. Reg. No. 197100152R

RENEWAL CERTIFICATE

**ORIGINAL**

Agency	D000136	Class of Policy	MOTOR	Policy Number	..... DHOM110159481704
Account	D000136	Issued on	..... 21/01/2022 in UOI	Replacing Policy no.	DHOM110159481703
Client	0245245	Acceptance Date	13/01/2022	Replacing Cover Note	19051

Period of Insurance from 01/03/2022 to 28/02/2023 , both dates inclusive

Insured's Name	...	HUANG ZHENGJIE
Mailing Address	...	6B JALAN RIMAU SINGAPORE 418696

Business/Occupn... CIVIL SERVICE  
Financial interest DBS BANK LTD

Premium	.....	ANNUAL PREMIUM	SGD940.36		
		SAFE DRIVE DISCOUNT	SGD54.83-		
		FREE NCD PROTECTOR	SGD0.00		
		LOSS OF USE - 10 DAYS	SGD0.00		
		Total Annual Premium	SGD885.53	Premium Due	SGD885.53
				Less Disc.	SGD132.83
				Premium GST	SGD52.69
				Total Due	SGD805.39

EXCESS FOR NAMED DRIVER

REFER TO DRIVER AGE MUST BE ABOVE 25 YEAR AND OR DRIVING EXPERIENCE MORE THAN THREE (3) YEARS.

Risk No.	001	PRIVATE (D)			
1. Registration	SLR9750Y	Make/Model	HONDA JADE 1.5RS A		
Type of Cover	COMPREHENSIVE	No. of seats	5	Body Type	..... STATION WAGON
Engine No.	L15B3162218	Capacity cc's	1496	Yr of Manuf/Regn	2015/2017
Chassis No.	FR51002204			NCB%	..... 50.00
				Certificate Ref.	PVI
INDEMNITY FOR TOTAL LOSS		MARKET VALUE			
NAMED DRIVERS		SGD500.00			
OTHERS		SGD1,000.00			
APPL TO <25 YRS & OR <3YRS EXP		SGD3,000.00			
WINDSCREEN DAMAGE CLAIM		SGD100.00			
Named Drivers (A) HUANG ZHENGJIE		(B) WANG QIUXIA CHELSIA			

THE FOLLOWING CLAUSES AND ENDORSEMENTS APPLY TO THIS POLICY

- 2 - EXCESS - DAMAGE CLAIMS
- AN EXCESS OF \$100 (BEFORE GST) APPLIES FOR EACH WINDSCREEN CLAIM
- TERRORISM EXCLUSION ENDORSEMENT
- CONTRACTS (RIGHT OF THIRD PARTIES) ACT 2001
- 25 - STRIKE RIOT AND CIVIL COMMOTION
- SECTION III - MEDICAL EXPENSES
- 2 E - YOUNG AND INEXPERIENCED DRIVERS
- 2 F - (A) THE INSURED
- 30 - REPLACEMENT PARTS