



# NPH AUTO SERVICE

Block 9005 Tampines Street 93 #01-246/254 Singapore 528839 Tel: 67840663 (8 Lines) Fax: 67840692  
 GST Reg No: MX-0869103-NO Business Reg No: 394773/00D  
 E-mail: nphauto@pacific.net.sg



Registration No: QAV SG

Your Ref : Page : 1/2  
 Our Ref : TP0022/05/22 Date : 10/05/2022

## THIRD PARTY CLAIM

M/S : YI LENG ELECTRONICS SERVICES  
 BLK 178 EDGEFIELD PLAINS  
 #12-230  
 SINGAPORE 820178

Attn :

Dear Sir/Madam

RE: ACCIDENT REPAIR ON : GBH9764D - TOYOTA PROACE  
 INSURED : YI LENG ELECTRONICS SERVICES  
 DATE OF ACCIDENT : 07/05/2022  
 POLICY NO : DMCVSNW00142022103

ENGINE# :  
 CHASSIS# :

APPENDED BELOW ARE THE ESTIMATED COST OF REPAIR & TO BE REPLACED:

	Qty	U/Cost	U/Price	Total
		\$	\$	\$
<b><u>Replacement of Parts</u></b>				
1 rear door RH	1@	1955.80	1955.80	1,955.80
2 rear door hinge bottom	1@	218.50	218.50	218.50
3 rear door hinge top	1@	218.50	218.50	218.50
4 rear door inner wood board	1@	325.60	325.60	325.60
5 rear door inner wood board clips	9@	5.00	5.00	45.00
6 rear boot emblem	1@	145.80	145.80	145.80
7 rear boot lock lower	1@	182.90	182.90	182.90
8 rear lamp assy RH	1@	385.50	385.50	385.50
9 rear boot rubber	1@	295.30	295.30	295.30
10 rear bumper	1@	792.20	792.20	792.20
11 rear bumper side retainer RH	1@	155.50	155.50	155.50
12 rear bumper reflector lamp RH	1@	142.30	142.30	142.30
13 rear bumper reinforcement	1@	688.40	688.40	688.40
14 rear lamp rocker panel outer RH	1@	385.20	385.20	385.20
15 rear bumper inner end panel	1@	582.70	582.70	582.70
16 rear fender RH	1@	1958.50	1958.50	1,958.50
17 rear fender air scoop grille	1@	195.40	195.40	195.40
18 rear fender inner cowlmg RH	1@	238.60	238.60	238.60
19 rear fender inner cowlmg clips	8@	5.00	5.00	40.00
20 rear bumper lower cowlmg joint RH	1@	128.80	128.80	128.80
21 rear lamp rocker panel	1@	488.90	488.90	488.90
				9,569.40
Less 25%				-2,392.35
<b>Total Material</b>				<b>\$7,177.05</b>
<b><u>Special Nett Items</u></b>				
22 rear windscreen sealant	1@	45.00	45.00	45.00



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## THIRD PARTY CLAIM

APPENDED BELOW ARE THE ESTIMATED COST OF REPAIR & TO BE REPLACED:

	Qty	U/Cost	U/Price	Total
		\$	\$	\$
33 rear bumper parking sensor	1@	200.00	200.00	200.00
				245.00

**Total S/Nett**

**\$245.00**

**Labour & Misc**

1	Remove & install rear windscreen.	100.00
2	Remove & install r/lamp, r/door, r/bumper, bumper reinforcement, cut out & renew r/lamp panel, bumper lower rocker panel, r/fender RH, knock r/fender inner panel, floorboard panel and restrain body & chassis.	1,800.00
3	Car-O-Liner.	350.00
4	Check wiring system.	25.00
5	Renew parking sensor.	80.00
6	Spray painting.	1,300.00
7	Remove & install r/finisher and board.	150.00
8	Towing fee with ramp.	120.00
		3,925.00

**Total Labour**

**\$3,925.00**

**Nett Total Before Gst**

**\$11,347.05**

Your faithfully

**NPH AUTO SERVICE**  
**(Manager)**

## 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	09/05/2022 14:49 (SGT)
Date of Accident	07/05/2022 13:30 (SGT)
Exact Location of Accident	Chai Chee St, Singapore
Additional Location Information	ALONG CHEE CHAI STREET TOWARDS PIE TUAS
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH9764D
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	YI LENG ELECTRONICS SERVICES
Company Reg No	52816664J
Email Address	YILENG.SG@GMAIL.COM
Mobile Phone No	(Phone) +65-94592886
Alternative Phone No	+65-94592886

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Proace
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	Goods vehicle
Transmission	Manual
CC	1997

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00142022103
Cover Note Number	

### DRIVER

Name of Driver	LIM GEE AN
NRIC No	S7074982C

Date Of Birth	23/07/1970
Occupation	Outdoor
Date Of Driving Pass	17/06/1989
Driving experience	32 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94592886
Alt. Phone Number	-
Email Address	YILENG.SG@GMAIL.COM
Address	BLK 178 EDGEFIELD PLAINS #12-230
Address complement	-
Postcode	820178
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
Does Driver Own Other Vehicles?	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver	GBD7964C
Insurance Company of Other Vehicle Owned by Driver	China Taiping Insurance (Singapore) Pte. Ltd.

#### 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?	<input type="checkbox"/>
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?	<input type="checkbox"/>

#### CIRCUMSTANCES OF ACCIDENT

AS PER SKETCH PLAN 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	SMP6059D
Vehicle Manufacturer	Kia
Vehicle Model	Cerato
Vehicle Variant	<input type="checkbox"/>
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	MR QUEK
Contact Number	(Phone) +65-92250501
Address	-
Address complement	<input type="checkbox"/>

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


FRONT

3


**SKETCH PLAN**

**IMPORTANT NOTICE**

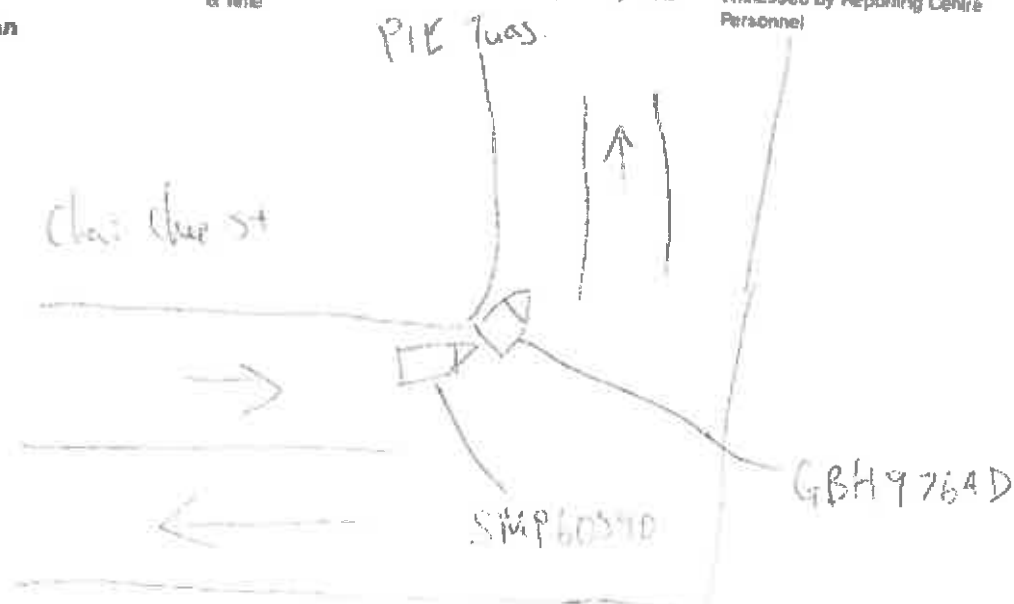
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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)**  
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/ma/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 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

  
Witnessed by Reporting Centre Personnel



**Particulars of the Accident**

On 7/5/22. Around 13.30hrs  
 Location Chai Chee St turning left into PIE TUNNEL.  
 Alone in my vehicle GDH 9764D.

I was driving my vehicle GDH 9764D along Chai Chee St  
 towards PIE TUNNEL.  
 After I turn left, checked mirror at traffic. I heard  
 a loud Bang to the rear of my van. I noticed  
 SMP6059D did not stopped & crashed at a  
 fast speed to my rear.

Driver of SMP6059D alighted & exchange particulars  
 & apologized & asked me to proceed claim  
 against his insurance company AIG.

Nobody was injured.  
 No Rain.

**Declaration**

I/we declare the foregoing particulars are true & every respect.



Police Station's Signature - Date & Time

*[Signature]*

Driver's Signature of driver is not in compliance? Date & Time

09/05/22  
14 15 pm

*[Signature]*

Witnessed by: Reporting Constable's Name