

Enquire Vehicle's Insurance Particulars (As At 05 Jun 2022 / 14:00:00)

Vehicle No.:

SJG3827G

Make Description/Model:

HONDA / FIT 1.3G F A/T

Insurance Company Name:

**AUTO & GENERAL INSURANCE
(SINGAPORE) PTE. LIMITED**

Business Transaction Reference No.:

20220607130554725257

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

EROFIA MOTOR TRADING PTE LTD (201202259N)

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

Tel : 67527740 Fax : 67528669

E-mail: erofia@singnet.com.sg

Name : Noor Alif Bin Jumain
(83664415)

Accident Date : 05-Jun-22

Vehicle No : FBP9084R (COE170925)

Vehicle Model : KTM 200 DUKE

Estimated Repair Costs

<u>Qty</u>	<u>Description</u> <u>List Items</u>	<u>Amount S(\$)</u>
1	Front signal - R/H	\$ 170.00
2	Side mirrors	\$ 640.00
2	Handle-bars	\$ 636.00
1	Hand grip (1 set)	\$ 120.00
1	Brake lever (1 set)	\$ 220.00
2	Front footrests	\$ 156.00
2	Front footrest brackets	\$ 250.00
1	Brake pedal	\$ 143.00
2	Rear footrest	\$ 150.00
2	Rear footrest brackets	\$ 514.00
1	Exhaust assy	\$ 2,050.00
1	Rear fender	\$ 130.00
1	Rear swing arm	\$ 450.00
2	Rear brake disc	\$ 250.00
1	Rear rim shaft	\$ 45.00
3	Rear rim bearing	\$ 90.00
1	Rear rim	\$ 320.00
1	Rear brake pump tank	\$ 120.00
1	Rear brake pump assy	\$ 260.00
		<u>\$ 6,714.00</u>
		Less 10% \$ 671.40
		<u>\$ 6,042.60</u>
 <u>Special Nett Items</u>		
1	Number plate (1 set)	\$ 38.00
1	Crash bar	\$ 480.00
1	Slider	\$ 168.00
		<u>\$ 686.00</u>

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Estimated Repair Costs

<u>S/No.</u>	<u>Labour</u>	
1	To provide towing service (LOD) S\$30.00	\$ -
2	To check wiring and reset headlamp focusing	\$ 80.00
3	To provide labour	\$ 480.00
		<u>\$ 560.00</u>
Grand Total		<u>\$ 7,288.60</u>

Singapore Dollars: Seven Thousand Two Hundred Eighty-Eight and Cents: Sixty only




EROFIA MOTOR TRADING PTE LTD


SKETCH PLAN


IMPORTANT NOTICE

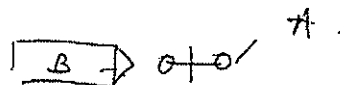
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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. 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 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 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time

Sketch Plan

 6/6/22 4:07pm
Driver's Signature (if driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel

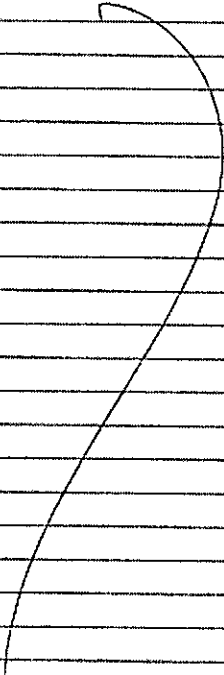


A, FBP 9084R

B, SJG 3827G

Describe Circumstances of the Accident


Please refer to attached police report




Declaration

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


 Policyholder's Signature / Date & Time

 6/6/22 4:07pm
 Driver's Signature (If driver is not the policyholder) / Date & Time


 Witnessed by Reporting Centre Personnel