

City Auto Pte Ltd (Co.Reg.No:199503435C)

160 Sin Ming Drive #05-01,, Sin Ming AutoCity,
Singapore 575722

Tel: 6453 1235 Fax: 6453 7944 Email: jason@cityauto.com.sg

TP INSURER: India International Insurance Pte Ltd (HQ)

Singapore

PARTICULARS OF CLAIM

Claim Type:	Third Party	Ref. No:	
Policy No:		Date of Loss:	03/06/2022
Vehicle Reg. No.:	SJL8583A	Driveable?	
Party At Fault:	UNKNOWN		
Driver (Insured):	Sivaraman S/O Arumugam		
Make/Model:	TOYOTA VIOS, 1.5 E (A)	Vehicle Reg. Date:	15/12/2008
Vehicle Colour:	Silver		
Engine No:	1NZX807609	Chassis No:	MR053HY9305082655
Odometer:	0 KM		
Paint Type:			<i>Not Withheld</i>
Total Loss?	NO		<i>1/1/2022</i>
Est. Duration of Repair (day):	<i>8 7 day</i>		<i>Mercury After Paint</i>
Present Location:	CITY AUTO PTE LTD (HQ)		

COST OF CLAIMS

	Amount
Parts	8,349.25
Miscellaneous Items	711.00
Labour	2,500.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	11,560.25
+ GST 7.00% (S\$)	809.22
Nett Amount (S\$)	12,369.47

This claim is handled by: VRONICA

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 06 Jun 2022)
Parts: 143 TOYOTA VIOS 1.5 E (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: City Auto Pte Ltd/SJL8583A/06/06/2022 16:41
Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*RH fender <i>637.70</i>	0.00	0.00	<i>R₁</i> *637.70 F ✓
2	1		*RH front door <i>896.70</i>	0.00	0.00	<i>R₁</i> *1,663.50 F ✓
3	1		*RH rear door <i>792.50</i>	0.00	0.00	<i>R₁</i> *905.20 F ✓
4	1		*RH side mirror <i>890.10</i>	0.00	0.00	<i>CR₁</i> *1,189.60 F ✓
5	2		*RH door protector <i>138.80</i>	0.00	0.00	<i>na</i> *374.80 F ✓
6	2		*Front RH door hinges	0.00	0.00	<i>R</i> *256.40 F X
7	2		*Rear RH door hinges	0.00	0.00	<i>R</i> *256.40 F X
8	1		*Rear RH fender	0.00	0.00	<i>R</i> *982.60 F X
9	1		*Wheel bearing	0.00	0.00	<i>na</i> *188.20 F X
10	1		*Lower arm	0.00	0.00	<i>R</i> *225.00 F X
Sub Total (S\$)						6,679.40
+ Margin on L,N Items 25.00% (S\$)						1,669.85
Total Parts (S\$)						8,349.25

F=Franchise part.

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LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	2	Sport rim	<i>Pr</i> 700.00 X
2	1	OD/TP Case (Insurer)	11.00
Sub Total (S\$)			711.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	- To remove and install door glass	New	160.00 <i>1201</i>
2	- To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts	New	900.00 <i>7001</i>
3	- Spray painting on affected and replace parts	New	1,200.00 <i>10001</i>
4	- To computerized wheel alignment	New	<i>rr</i> 60.00 X
5	- Labour charge to change wheel bearing and lower arm	New	<i>rr</i> 180.00 X
Gross Labour Cost (S\$)			2,500.00

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< END OF ESTIMATES >

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 03/06/2022 17:16 (SGT)
Date of Accident 03/06/2022 12:30 (SGT)
Exact Location of Accident Jalan Bukit Merah, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJL8583A
INSURED/POLICYHOLDER
Is company? No
Name Of Registered Owner LEE BENG KIAT
NRIC No SXXXX451I
Email Address roger_lee@canon.com.sg
Mobile Phone No (Phone) +65-91298351
Alternative Phone No +65-91298351

VEHICLE PARTICULARS

Manufacturer Toyota
Model Vios
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 1497

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D21MTPV01013780
Cover Note Number -

DRIVER

Name of Driver LEE JIA HAO
NRIC No SXXXX107C

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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/postal 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.

Benjiah 3/6/22 3.45 PM



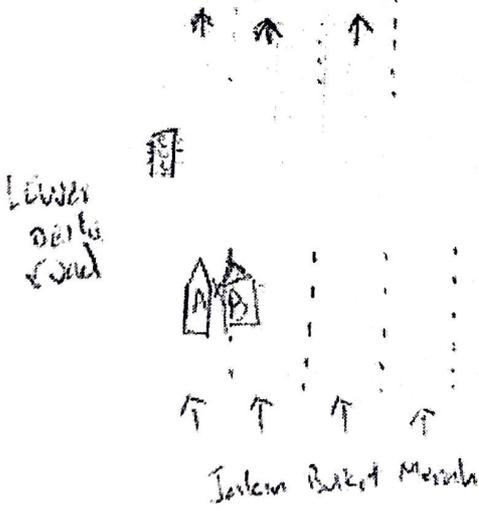
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

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Lower deck road

