

HOCK WAH MOTOR WORKSHOP PTE LTD

BLK 3011 BEDOK INDUSTRIAL PARK E
BEDOK NORTH AVE 4,
#01-2008/10/12 SINGAPORE 489977
TEL : 6441 5655 FAX : 6441 5355/6243 8121
R.O.C No : 200104141D GST Reg. No. 20-0104141-D

TO : 81333412
CHEONG WING HUNG, JOEL
BLK 7 COMMONWEALTH AVENUE
12-654
SINGAPORE 140007
TEL : FAX :
PH : 81333412
ATTN :

ESTIMATE BILL

Number : EB00005988
Date : 06/06/2022
Case No : AD00012726
Vehicle No : SKZ825U
Chassis: RU11104869
Year of Mfr 2015
Policy No
Model : HONDA VEZEL 1.5X
A

Term:

Sn	DESCRIPTION	QTY	U PRICE	DISC	AMOUNT
1	BONNET	1.0	854.10	20	683.28
2	FRONT GRILLE ASSEMBLY	1.0	653.60	20	522.88
3	FRONT GRILLE EMBLEM	1.0	24.70	20	19.76
List Price - Parts Sub Total					1,225.92
4	FRONT BUMPER - REPAIR	1.0			
5	SUPPORT PANEL - REPAIR	1.0			
6	FRONT NUMBER PLATE	1.0	30.00	0	30.00
7	FRONT NUMBER PLATE HOLDER	1.0	30.00	0	30.00
Special Nett Price - Parts Sub Total					60.00
Parts Total					1,285.92
8	LABOUR TO REMOVE & REFIT NECESSARY PARTS	1.0	700.00	0	700.00
9	SPRAY PAINT ON THE AFFECTED AREAS	1.0	800.00	0	800.00
10	ANTI-RUST COATING	1.0	100.00	0	100.00
Labour 1 Sub Total					1,600.00
SINGAPORE DOLLARS : THREE THOUSAND EIGHTY-SEVEN AND CENTS NINETY-THREE ONLY			Less Excess		0.00
			SUBTOTAL		2,885.92
			GST 7.00%		202.01
			TOTAL		3,087.93

Date of accident : 03/06/2022 01:00 PM. Place : OPEN SPACE CARPARK OF TANJONG KATONG

E. & O. E.

HOCK WAH MOTOR WORKSHOP PTE LTD

CUSTOMER SIGNATURE

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	04/06/2022 11:36 (SGT)
Date of Accident	03/06/2022 13:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	OPEN SPACE CARPARK OF TANJONG KATONG
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ825U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHEONG WING HUNG, JOEL
NRIC No	S8613889A
Email Address	leojc2@gmail.com
Mobile Phone No	(Phone) +65-81333412
Alternative Phone No	+65-81333412

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1500

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5124022961
Cover Note Number	07/10/2021 - 06/10/2022

DRIVER

Name of Driver	CHEONG WING HUNG, JOEL
NRIC No	S8613889A



Date Of Birth	11/05/1986
Occupation	Indoor
Date Of Driving Pass	17/12/2007
Driving experience	14 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81333412
Alt. Phone Number	+65-81333412
Email Address	leoic2@gmail.com
Address	BLK 7 COMMONWEALTH AVENUE #12-654
Address complement	-
Postcode	140007
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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
Reasons for not uploading a video of the accident	VIDEO WILL BE SEND TO INSURANCE COMPANY.
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP8248U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-62616120
Address	-

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

SKETCH PLAN

NRIC Inquiring Motor Service Centre

Report No. MI

DOA

Vehicle No.

Make Model

Report Date: 4/6/2022 Start Time: 11:25 AM

Reporting Type

End Time

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:

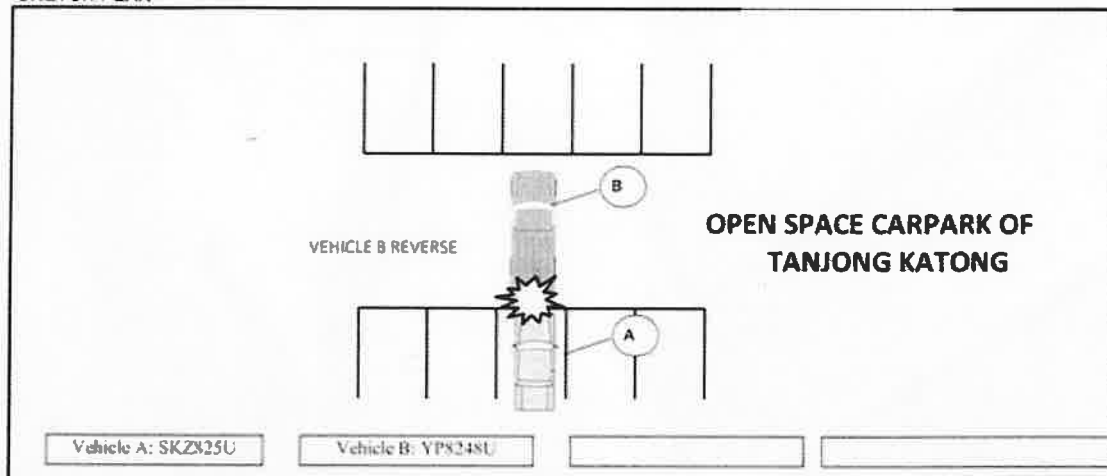
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 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/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.
- (d) my Personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonable required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, law or court orders.

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: Chen JunLiang
NRIC/ Fin No: S990765

SKETCH PLAN




MY VEHICLE WAS PARKED INSIDE ONE CARPARK LOT WITHIN TANJONG KATONG OSCP. I LOCKED AND LEFT MY VEHICLE. EVERYTHING WAS FINE AND INTACT.

WHEN I RETURN TO MY VEHICLE, I SAW A DENT ON MY FRONT VEHICLE BONNET. I SAW A NOTE ON MY FRONT WINDSCREEN. I CALLED THE NUMBER PROVIDED AND THEY INFORMED TO REPORT TO INSURANCE COMPANY. I ALSO MANAGED TO RETRIEVE MY IN-CAR CAMERA FOOTAGE.

DECLARATION

We declare the foregoing particulars are true in every respect.


 4/6/2022 11:25
 Policyholder's Signature
 Date & Time:

4/6/2022 11:25
 Driver's Signature (If driver is not the policyholder)
 Date & Time:


 Reporting Centre Personnel's Signature
 Name: Chen JunLiang
 NRIC/ Pin No: S980765