

Steve

CS/CT122 005949/y3

## ASSIGNMENT:

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: GBK 5292J

Policy No. DMCVSNW00107932101

Claims No. SNM22D204289/C02/TANKL

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SLP 35102 Yr Regn: 11/6/17

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or 1580

Make: KIA Niro c.c. 1580

Colour: Grey A/C: Insured / Std / Nil / NA

Sp. Reading 98885 T/Radio: Insured / Std / Nil / NA

Eng/No: \_\_\_\_\_

C/No: KNACC81CMH 5019189

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195/55R15

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or \_\_\_\_\_

Front Rear

R/Bal. 1/4 mm R/Bal. 1/4 mm

L/Bal. 1/4 mm L/Bal. 1/4 mm

D.O.A. 17/6/22 D.O.I. 24/6/22

Survey held at Cycle

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Front LH

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

MV-73

20/7/22 Steve informed final fig \$5561 (Red 2891, 34%)

Date/Time, File Pass to?

: Prel. Report

: Final Report

Date/Time, File Return to?

21/7/22-typist

Report Format:

Lump Sum / L.S.F. (%)

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee: : Site Insp (\$

: Interview (\$

: Tech. Insp (\$

: Weekend (\$

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL





CYCLE &amp; CARRIAGE

CYCLE & CARRIAGE KIA PTE LTD  
PANDAN GARDENS CUSTOMER SERVICE CENTRE  
209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240



Movement that inspires

## ESTIMATE

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Chua Hua Tong BLK 65 NEW UPPER CHANGI RD #09-1136 SINGAPORE 460065 Contact No Mobile: 91868777	Cust No/Name /Chua Hua Tong Reg No/Reg Date SLP3510Z / 01/06/201 Date In/Mileage / 98885 Chassis No KNACC81CVH5079489 Engine No G4LEHS212577 Make/Model KIA/NIRO 1.6 A Colour/Trim MST METAL STREAM / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00081	Cash	20/06/2022/ 15:21	TLE	261 / Edwin Caina	53008
Description of Goods / Services		Qty	Unit Price	Disc%	Amount
E PNT88000 RENEW FR BUMPER & LHF FENDER 640 x 2				1280	1920.00
E PNT98000 RESpray FR BUMPER & LHF FENDER 2 x 550				1100	1650.00
A 54900099 CHECK WIRING ELECTRICAL SYSTEM					80.00
M SUNDRY sundries				20	50.00
A 10028901 TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM					280.00
M SUNDRY APPLY ANTI CORROSION ON AFFECTED AREAS				40	120.00
M COVER-FR BUMPER UPR	1.00	632.00	00.00		632.00
M COVER ASSY-FR BUMPER LWR	1.00	346.00	00.00		346.00
M LOGO ASSY-KIA SUB	1.00	61.00	00.00		61.00
M STRIP ASSY-FR BUMPER UPR	1.00	38.00	00.00		38.00
M GRILLE ASSY-RADIATOR	1.00	441.00	00.00		441.00
M PIECE-FRT BUMPER GUARD LWR,LH	1.00	16.00	00.00		16.00
M PIECE-FRT BUMPER GUARD LWR,RH	1.00	16.00	00.00		16.00
M DUCT ASSY-AIR CURTAIN,LH	1.00	32.00	00.00		32.00
M AIR DUCT-FR BUMPER,LH	1.00	39.00	00.00		39.00
M ABSORBER-FRONT BUMPER ENERGY	1.00	68.00	00.00		68.00
M GRILLE-FRONT BUMPER	1.00	232.00	00.00		232.00
M BRACKET-FR BUMPER SIDE,LH	1.00	12.00	00.00		12.00
M LAMP ASSY-FRONT FOG & DRL,LH	1.00	638.00	00.00		638.00
M PANEL-FENDER,LH	1.00	435.00	00.00		435.00
M GUARD ASSY-FRONT WHEEL,LH	1.00	126.00	00.00		126.00
M GARNISH ASSY-FRNDR SIDE,LH	1.00	123.00	00.00		123.00
M LAMP ASSY-HEAD,LH	1.00	937.00	00.00		937.00

Confirm &amp; accepted by

SURVEYOR NAME:

Steve (CLKK) 24/6/22, 10.10a

SURVEYOR SIGNATURE:

M R

DATE:

P/P, My Rm y

4 dgs

7% GST on

Nett

8292.00

8,292.00

580.44

Total Payable

8,872.44

Authorized, signatory and company stamp

\* Validity of this estimate is valid from date of quote. This is a computer generated document, no signature is required.  
\* Estimated costs quoted are based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.  
Date:

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## 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	18/06/2022 11:19 (SGT)
Date of Accident	17/06/2022 16:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG JALAN TOA PAYOH
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP3510Z
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHUA HUA TONG
NRIC No	S0263448A
Email Address	JEREMYCHUA06@HOTMAIL.COM
Mobile Phone No	(Phone) +65-96709195
Alternative Phone No	+65-96709195

#### VEHICLE PARTICULARS

Manufacturer	Kia
Model	Niro
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	1600

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5127775610
Cover Note Number	-

#### DRIVER

Name of Driver	CHUA HUA TONG
NRIC No	S0263448A

Accident report SN072261000C

Date Of Birth 27/11/1940  
 Occupation Indoor  
 Date Of Driving Pass 03/09/1963  
 Driving experience 58 YEARS AND 9 MONTHS  
 Gender Male  
 Mobile Number (Phone) +65-96709195  
 Alt. Phone Number +65-96709195  
 Email Address JEREMYCHUA06@HOTMAIL.COM  
 Address BLK 65 NEW UPPER CHANGI ROAD #09-1136  
 Address complement \*  
 Postcode 460065  
 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 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 TAY SOO KIW  
 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

I WAS IN MY VEHICLE (SLP3510Z) ON A LANE WHICH ALLOW ME TO GO STRAIGHT AND TURN RIGHT, WHEN (GBK5292J) WHO WAS ON MY LEFT TRIED TO TURN RIGHT AND HIT ONTO MY FRONT LEFT.

#### 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 ADV TO UPLOAD ONTO MOTORVIDEO@INCOME.COM.SG  
 Was there any audio recorded? No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBK5292J  
 Vehicle Manufacturer -  
 Vehicle Model -  
 Vehicle Variant -

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	HUMA YUN SHAK NUAB S K
Passport No/FIN	G6947265L
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2



## 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 lodgment 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 reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature  
Date & Time: 18/06/2022 1230

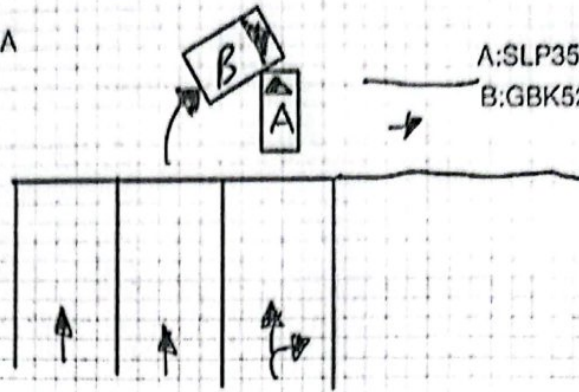
Driver's Signature  
(if driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name: HONG DA  
NRIC/FIN No.: S992334

### SKETCH PLAN

ALONG JALAN TOA  
PAYOH

A:SLP3510Z  
B:GBK5292J



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO GEARDS REPORT

## DECLARATION

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

Policyholder's Signature  
Date & Time: 18/06/2022 1230

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

Reporting Centre Personnel's Signature  
Name: HONG DA  
NRIC/FIN No.: S992334