

JIN HUAT & CO

176 Sin Ming Drive, #05-01

Sin Ming Autocare

Singapore 575721

Tel : 6453 2151; Fax : 6456 3060

email: jinhuat1951@gmail.com

Co. Reg. No: 020403/00C

Quotation

To: Loy Li Ying, Linda
Loy Hwee Kwang

Date : 29 June 2022

Contact: 8216 0015

Pages : 1 of 1

Vehicle No: SMX 9816 Z

Model: Honda Vezel

Insurer: AXA Insurance

*Not Noted
Repairing
3 days*

Items	Description	Qty	Unit	Unit Price	Total Price
Accident Details:					
	Date of Accident: 28/06/2022				
	T/P claim against GBL 1397 L insured with				
	AIG Insurance				
1	Tailgate	1	pc	R \$	1,552.60 X
2	Tailgate emblem logo	1	pc	na \$	75.60 X
3	RH T/lamp	1	pc		\$ 540.15 7
4	Rear body panel	1	pc	R \$	972.15 X
5	Rear bumper side retainer	1	pc	DIT \$	68.00 L
6	Rear bumper	1	pc	na/na \$	553.10 L
7	Rear bumper reflector	1	pc		\$ 38.00 X
8	RH bumper side garnish	1	pc	na/DIT \$	182.00 L
9	RH T/gate reflector	1	pc		\$ 320.80 7
10	RH wheel arch covering	1	pc	DIT \$	289.00 L
11	Clips	10	pc	\$ 2.80 na	\$ 28.00 L
12	Rear windscreen moulding top	1	pc	na \$	86.50 X
13	Rear windscreen moulding lower	1	pc	na \$	86.50 X
14	Rear windscreen moulding R/H	1	pc	na \$	65.15 X
15	Rear windscreen moulding L/H	1	pc	na \$	65.15 X
16	Labour to dismantle, repair or replace damaged parts where necessary			300l	\$ 950.00
17	To remove/refit rear windscreen			na	\$ 180.00 X
18	Spray painting			350l	\$ 900.00
19	To check wiring functions				\$ 60.00 15/
TOTAL PRICE					\$ 7,012.70

JIN HUAT & CO

Alice Tan



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:

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 29/06/2022 09:13 (SGT)
Reported by Driver
Date of Accident 28/06/2022 13:15 (SGT)
Exact Location of Accident Singapore
Additional Location Information ANG MO KIO INDUSTRIAL PARK 2 OPEN CAR PARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX9816Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LINDA LOY LI YING
NRIC No SXXXX150F
Email Address edwardloy@live.com
Mobile Phone No (Phone) +65-88680608
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Honda
Model Vezel
Variant -
Exact purpose for which vehicle was being used at time of accident -
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 AXA Insurance Pte Ltd
Policy Number / Cover Note Number GA610362

DRIVER

Name of Driver LOY HWEE KWANG
NRIC No SXXXX891Z
Date Of Birth 15/02/1957
Occupation Indoor

Date Of Driving Pass 21/03/1977
 Driving experience 45 YEARS AND 3 MONTHS
 Gender Male
 Mobile Number
 Alt. Phone Number (Phone) +65-81260015
 Email Address -
 Address edwardloy@live.com
 Address complement BLK 314A ANCHORVALE LINK #13-147
 Postcode -
 Is the driver the policyholder? 541314
 If No, Relationship of the Driver with the Insured No
 Does Driver Own Other Vehicles? Parent
 Vehicle Registration Number of Other Vehicle Owned by Driver No
 Insurance Company of Other Vehicle Owned by Driver -

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? -
 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
 Translator's name -
 Translator's ID -
 Translator's phone number -
 Translator's email -
 Original language used in the statement -

DETAILS OF POLICE ACTION

Was the accident reported to the police? No
 Was notice of intended Prosecution given? No
 F s, against whom? -

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN.

NOTE: VEHICLE REPAIR AT OWNER W/SHOP - JIN HUAT & CO

ATTACHMENT(S)

Are accident photos available for attachment? Yes
 Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBL1397L
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Commercial vehicle

IMPORTANT NOTICE

SKETCH PLAN

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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

[Handwritten Signature]

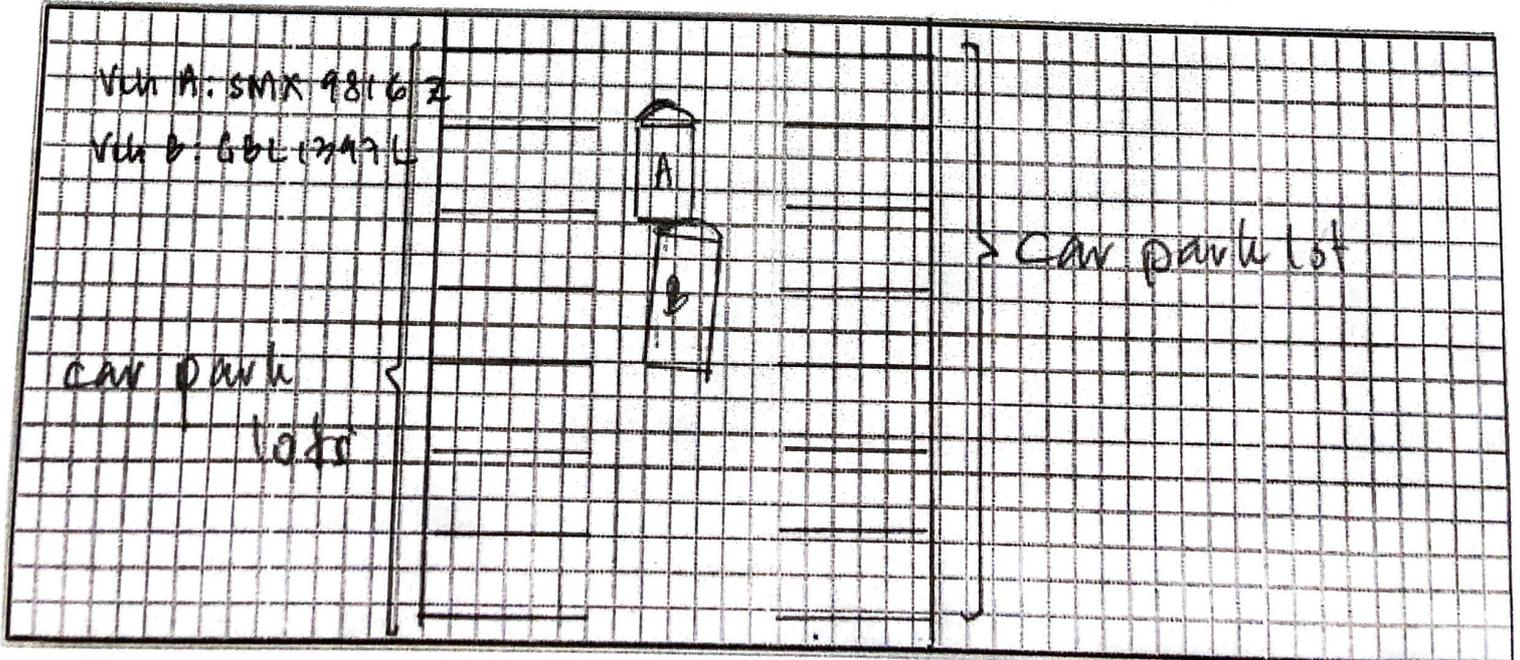
[Handwritten Signature]

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

28/6/22 1:15 pm

I was driving very slowly with hazard light on looking for a car park lot when suddenly a lorry hit the back of my car "

A - my car - SMX 98162
B - Lorry GBL 1397L

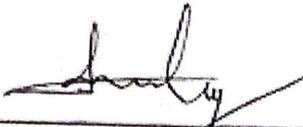
1/c 9379150F
8868 0608

edward loy @live.com
1 pax

Declaration

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

Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)