



SC AUTO INDUSTRIES (S) PTE LTD

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Co. Reg. No. 199800107D

M/S KW BUS SERVICE
Blk 764a, Woodlands Circle, #10-304,
SINGAPORE 731764
Insured KW BUS SERVICE
Policy DMB1SNW00012602004

ESTIMATE Bill

GST Reg. No: 19-9800107D
Date: 7/7/2022
Our Case Ref. SC22/07/086/4KB-TP
Accident Date 7/7/2022

Damaged Vehicle No: CB7053E

S/no	Description	QTY	Price	Disc	Amount
Replaced Parts					
1	SIDE MIRROR ASSY LH <i>repair</i>	1 PC	\$1,980.00	-	\$1,980.00
Labour Charges					
1	LABOUR TO CHECK WIRENESS.	1	\$650.00	- <i>300</i>	\$650.00
2	LABOUR TO REMOVE, REPAIR AND REINSTALL SIDE MIRROR ASSY LH, FRT FIBER CAP ASSY AND FRT BUMPER.	1	\$3,000.00	- <i>1280</i>	\$3,000.00
3	LABOUR TO RESPRAY SIDE MIRROR ASSY LH, FRT FIBER CAP ASSY, FRT BUMPER.	1	\$2,500.00	- <i>960</i>	\$2,500.00
4	LABOUR TO CARRY OUT DIAGNOSTIC CHECK	1	\$250.00	- <i>X</i>	\$250.00

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:

Ram
Hp 90010068
3 days
7/8
12/01/22 @ 1420
Resy after rep

Sub Total \$ 8,380.00

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	04/07/2022 11:07 (SGT)
Reported by	Driver
Date of Accident	28/06/2022 18:50 (SGT)
Exact Location of Accident	7 Elias Green, Singapore 519962
Additional Location Information	ALONG TPE AFTER EXIT 3B
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	CB7053E
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	K W BUS SERVICE
Company Reg No	5XXXXX907W
Email Address	OHSIAK71@GMAIL.COM
Mobile Phone No	(Phone) +65-93861674
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	King Long
Model	XMQ6900K
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Bus
Transmission	Manual
CC	6693

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMB1SNW00016772105

DRIVER

Name of Driver	ANDIN KHAIRULLAN ACHMAD
NRIC No	SXXXX234I
Date Of Birth	07/08/1973
Occupation	Outdoor

Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

05/05/2021
1 YEAR AND 1 MONTH
Male
(Phone) +65-87494631
-
OHSIAK71@GMAIL.COM
BLK 683A EDGEDALE PLAINS
#09-715
821683
No
Employee
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Major/Minor Rd
Clear
Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?
Translator's name
Translator's ID
Translator's phone number
Translator's email
Original language used in the statement

No
2
No
-
Yes
41
No
-
-
-
-
-

PASSENGER 1

Name
Gender

UNKNOWN
Male

PASSENGER 2

Name
Gender

UNKNOWN
Male

PASSENGER 3

Name
Gender

UNKNOWN
Male

PASSENGER 4

Name
Gender

UNKNOWN
Male

PASSENGER 5

Name
Gender

UNKNOWN
Female

PASSENGER 6

Name
Gender

UNKNOWN
Male

PASSENGER 7

Name
Gender

UNKNOWN
Male

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 DRIVING ALONG TPE TOWARDS SLE. AFTER EXIT 3B, A LORRY 14FT YP5670C CUT INTO MY LANE . THE LORRY SIDE SWIPE MY BUS.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

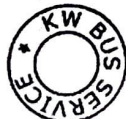
Vehicle Registration Number YP5670C
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Commercial vehicle
 Name of Driver -
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

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 willful misrepresentation or withholding of material facts may allow insurance companies to renew 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.



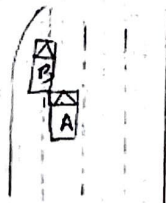
Policyholder's Signature / Date & Time




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



Witnessed by Reporting Centre Personnel

Sketch Plan

A: CB7053E

B: YP5670C

Describe Circumstances of the Accident

I was driving along TPE towards ~~PHILIPPA~~ SLE. After Exit 3B, a Lorry left YP 5670 C cut ~~my~~ into my lane. ~~It~~ The lorry side swipe my bus.

Declaration

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

80/200
1 PC
BACK SAME
TYRE COVER

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Business
Owner ID:	907W
Vehicle No.:	CB7053E
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Jul 2022
Vehicle Make:	KING LONG
Vehicle Model:	XMQ6900K
Primary Colour:	White
Manufacturing Year:	2011
Engine No.:	IS8E420522002096
Chassis No.:	LA6R1DSB3BB204041
Maximum Power Output:	-
Open Market Value:	\$99,406.00
Original Registration Date:	12 Dec 2012
First Registration Date:	12 Dec 2012
Transfer Count: -	0
Actual ARF Paid:	\$4,971.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Rebate Amount:	\$0.00
Total Rebate Amount:	\$0.00

The information contained herein is correct as at 13 Jul 2022

OK