PRECISE AUTO SERVICE

NO 1 KAKI BUKIT AVE 6 #02-34/36 AUTOBAY SINGAPORE 417883

TEL: 6745 7367 FAX: 6841 3390

CO. REG. NO.: 35766600C GST REG. NO.: 35766600C

04-04-22

Accident Date : 25/07/2022 OUR REF : SLG 543X/0/22

M/s ERGO Insurance Pte. Ltd 5 Temasek Boulevard #04-01 Suntec Tower Five Singapore 038985

ATTN: MOTOR CLAIMS DEPARTMENT

INSURED: ZHENG WENHAO POLICY NO: DMPG21011572

VEHICLE NO : SLG 543X MODEL : HONDA CIVIC

CHASSIS NO: MRHFC5650GT000155

ESTIMATE BILL

COST PLUS

Bonnet		450.00
Bonnet Hindges	2pcs @ 45.00	90.00
Bonnet Lock		75.00
Bonnet Lock Cable		45.00
Front Grille Chrome		95.00
Front Grille Base		85.00
Front Grille Emblem		25.00
Front Grille Clips	5pcs @ 3.50	17.50
Head Lamp Assy	2pcs @ 480.00	960.00
Head Lamp Bracket	2pcs @ 35.00	70.00
Front Bumper Fascia		310.00
Front Bumper Clips	10pcs @ 3.50	35.00
Front Bumper Reforcement		260.00
Front Bumper Side Retainer	2pcs @ 15.00	30.00
Front Temp Sensor		65.00
Front Support Panel		420.00

Front Fender - LH & RH	2pcs @ 220.00	440.00
Air Cond Condensor		330.00
	Cost Plus 10% :	3,802.50 380.25 4,182.75
SPECIAL NETT ITEM		
Front Number Plate		30.00
Front Number Plate Casing		15.00
LABOUR CHARGE		
To Renew Bonnet, LH & RH Fender, Front Bumper, Coand Aligned All Parts.	ut & Weld Support Panel,	850.00
To Check Electrical Wiring Harness.		150.00
To Replace Air Cond Condensor, Vacuum & Top Up G	as.	180.00
To Respray Bonnet, Fenders, Front Bumper and Supp	oort Panel.	950.00
	-	6,357.75
	GST 7%:	445.04
	TOTAL AMOUNT:	6,802.79

SS2X227P0004 / SME MOTOR PTE LTD ENTRY DATE & TIME: 25/07/2022 12:39 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (25/07/2022 12:39 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
- This Form must be completed by the Policyholder and/or the Authorised Driver
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.

- A. 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 25/07/2022 12:39 (SGT) Reported by Date of Accident 25/07/2022 08:30 (SGT) **Exact Location of Accident** ECP, Singapore Additional Location Information TWDS MCE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Vehicle Registration Number SLG543X

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner ZHENG WEN HAO NRIC No S8205300Z **Email Address**

fallenwan_97@yahoo.com Mobile Phone No (Phone) +65-97486709 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Civic Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to your vehicle?

Yes Vehicle Category Private car Transmission Auto CC 1597

INSURANCE COMPANY

Name of Insurance Company ERGO Insurance Pte. Ltd. Policy Number / Cover Note Number DMPG21011572

DRIVER

Name of Driver ZHENG WEN HAO NRIC No S8205300Z Date Of Birth 15/02/1982 Occupation Indoor

Date Of Driving Pass 14/02/2002

Driving experience 20 YEARS AND 5 MONTHS

Gender

Mobile Number (Phone) +65-97486709

Alt. Phone Number

Email Address fallenwan 97@yahoo.com

Address BLK 182 BEDOK NORTH ROAD #03-48

Male

Address complement - 460182

Is the driver the policyholder?

Yes

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

rearance company of other vehicle owned by briver

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

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?

No
Translator's name

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?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

ON 25/07/2022 AT ABOUT 0830HRS, I WAS DRIVING MY CAR (SLG543X) ALONG ECP TOWARDS ME IN THE RIGHT LANE. SUDDENLY, THE CAR IN FRONT OF ME (SLS225B) APPLIED E-BRAKE. I HAD TRIED TO STEP ON MY BRAKE TO STOP AND AVOID COLLISION WITH VEHICLE B (SLS225B). UNFORTUNATELY, MY CAR STILL COLLIDED ONTO REAR PORTION OF VEHICLE B (SLS225B). HENCE, I HERETO LODGE THIS REPORT FOR MY INSURANCE CLAIM PURPOSE.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLS225B Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour

Vehicle Category Private car

Name of Driver Contact Number	- (Phone) +65-98000522
Address	-
Address complement	_
Postcode	_
Insurance Company Name	-
Nature Of Damage	
Details of property damaged in accident	- VEHICLE B
No. Of Passenger (Including Driver)	VEHICLE B
(Helding Diffel)	-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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 Formby insurance companies is not an admission of policy liability on the part of the insurance
- 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.
- Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that

- (a) My insurer , my w orkshop 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' law yers/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
- (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
- (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date Time	e & Driver's & Time	Signature (If dri	ver is not the policyhold	der) / Date	Witnessed by Reporting Centre Personnel
Sketch Plan		20/11/20	Co (Con Cons		1 Gradinel
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				(P) SES 225 B.
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Describe Circumstances of t	he Accident				
On 25/7/22 @ abou	+ 030 hrs, 1	was a	rivily my	Cor (316	543X) along
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Stop and avoid 11	I collision with	Veh.	8 (CLS 2)	(SK) unlang	runally
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claration				, , , , , , , , , , , , , , , , , , ,	
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le declare the foregoing particula	rs are true in every respe-	ct.			
rou wish to claim against your ow ust be made within the stipulated	n policy please he advise	of that your inci	irer may have a t	fourteen (14) days cl	ause whereby the cla
IN THE	1.0.			, ,	
olicyholder's Signature / Date &	Driver's Signature (if dr	hear is not the	of substant and	100	5 4 5
me	& Time 25/3/22	C pook.	oiicynoider) / Dat	e Witnessed by Personnel	Reporting Centre

ERGO

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

Certificate/Policy Number

DMPG21011572

Vehicle Registration Number

SLG543X

Cover Type

Superior Comprehensive

Policy Type

Private Car

Name of Policyholder/Insured

ZHENG WENHAO

Commencement Date of Insurance

20/09/2021

Expiry Date of Insurance

19/09/2022

cess

24-Hour Helpline: 6100 1620

Finance Company/Hire Purchase Owner:

SSL HOLDINGS PTE. LTD.

*Persons or Classes of Persons entitled to drive:

- 1. The Policyholder
- 2. Any Person who is driving on the Policyholder's order or permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

* Limitations as to Use:

- 1) Use only for social domestic and pleasure purposes
- 2) Use for Policyholder's business

This Policy does not cover

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing and on race track
- 2) Use for the carriage of goods other than samples in connection with any trade or business

Use for any purpose in connection with the Motor Trade

__nitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings (*).

WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of ERGO Insurance Pte. Ltd.
Approved Insurer

Lackl - Weint ()

Authorized Signature

A000361	SUNMEX ENTERPRISE	
Vehicle Chassis Numb	er : MRHFC5650GT000155, Vehicle Engine Number : R16B21600259	PC1, 16/09/2021 16:41



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8205300Z



ZHENG WENHAO

文

CHINESE Date of birth

15-02-1982 Country of birth

S8205300Z

4737770

SINGAPORE

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

NP 428A

07-06-2011

APT BLK 182 BEDOK NORTH ROAD #03-48 SINGAPORE 460182