

KAH MOTOR CO. SDN. BHD.

(A Member of the Oriental Holdings Berhad)

Service and Body Repair

Tel: +65 6841 3838

Website: www.honda.com.sg

For 24-hours Roadside Assistance, Call 98203838

Document No.

: SQT22002035 : 18. Jul 2022

Page

Amount

incld GST

QUOTATION

Company Ref. No.: S60FC1380G

GST Reg No.: M200050223

8 SHENTON WAY

#27-01 AXA TOWER

: AXA INSURANCE PTE LTD

Customer No. Svc Advisor

: WA006

SINGAPORE 068811

: SUHELMI

Registration No Chassis No

: SKN8324J

Engine No

Qtv

Date

: L15Z11406965

Model

Customer

: MRHGM6660EP000053 : CITY 1.5SV CVT 2014 (EURO 4) Date | Time **Surveyor Name** : 18. Jul 2022 12:19:14 PM

Owner's Name

: SARITA KAUR BAJAJ

Amount

0% GST

Amount

Ins Policy No.

Survey Date

Authorisation Date

Unit Price Disc %

Item

Date of Accident

: 17/7/2022

Description

OWN DAMAGE CLAIMS-J/NO: 77445

POLICY/CLAIMS NO:

OWNER: SARITA KAUR BAJAJ

ACC DATE: 17/07/2022

SURVEYED BY:

DATE:

AUTHORIZED ON:

	REF NO:						
71101-T9A-T00ZZ	FACEFR.BUMPER	1	459.80	25	344.85	24.14	368.99
71102-T9A-T50	GARNISHR.FR.FOGLIGHT	1	23.60	25	17.70	1.24	18.94
71140-T9A-T00	BEAMR.FR.BUMPER UPPER	1	27.50	25	20.62	1.44	22.06
71193-T9A-T00	SPACERR.FR.BUMPER SIDE	1	10.40	25	7.80	0.55	8.35
91505-TM8-003	CLIP,BUMPER	20	2.30	25	34.50	2.42	36.92
60210-T9A-T50ZZ	PANEL COMP,R.FR.FENDER	1	343.80	25	257.85	18.05	275.90
91501-TR0-003	CLIP,INNER FENDER	6	2.80	25	12.60	0.88	13.48
42700-T9A-T91	DISKALUMINIUM WHEEL 16X6J	1	454.00	25	340.50	23.84	364.34
44600-T5B-J00	HUB ASSYFR.	1	138.30	25	103.72	7.26	110.98
44300-T9C-T61	BEARING ASSY,FR.HUB	1	131.10	25	98.32	6.88	105.20
51611-T9A-T52	ABSORBER UNITR.FR.SHOCK	1	144.90	25	108.67	7.61	116.28
51350-T5A-J02	ARM ASSY,R.FR.LOWER	1	178.50	25	133.87	9.37	143.24
51211-T9A-T02	KNUCKLER.FR.	1	107.60	25	80.70	5.65	86.35
51320-T5A-003	LINK COMPR.FR.STABILIZER	1	50.60	25	37.95	2.66	40.61
33100-T9A-T01	HEADLIGHT ASSY,R	1	324.10	25	243.07	17.01	260.08
57450-T5A-013	SENSOR ASSYR.FR.	1	158.60	25	118.95	8.33	127.28
				Sum Item	<u>1961.67</u>	<u>137.33</u>	2,099.00
BO-WHEEL ALIGN X	WHEEL ALIGNMENT X4	1	180.00		180.00	12.60	192.60
			Sum	Ext. Service	<u>180.00</u>	<u>12.60</u>	<u>192.60</u>

Printed on 18/7/2022 2:45:23 PM

This is a computer generated invoice. No signature is required.

Part prices are subjected to change without notice.

The above estimated cost of repair do not include any unforeseen damages.

GST Amount is calculated from individual line(s).

An amount of \$53.50 (incl GST) will be applicable for the request of the above quotation for estimates above \$2,000.00.

However, if the repairs are subsequently done at Kah Motor Co. Sdn. Bhd, it will be refunded.



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GST Reg No.: M200050223 Company Ref. No.: S60FC1380G

8 SHENTON WAY

: 18. Jul 2022 : WA006

#27-01 AXA TOWER SINGAPORE 068811

: AXA INSURANCE PTE LTD

Customer No. Svc Advisor

Date

: SUHELMI

Registration No

: SKN8324J

Engine No

: L15Z11406965

Chassis No Model

Customer

: MRHGM6660EP000053 : CITY 1.5SV CVT 2014 (EURO 4) Date | Time

: 18. Jul 2022 12:19:14 PM

Owner's Name

: SARITA KAUR BAJAJ

Surveyor Name Survey Date

Ins Policy No.

Authorisation Date

Date of Accident

: 17/7/2022

Item	Description	Qty	Unit Price Disc %	Amount	0% GST Amount	Amount incld GST
BOSUN	SUNDRIES	1	50.00	50.00	3.50	53.50
BML01I	INSPECT FR LIGHTING MECHANISMS & FOCUS	1	180.00	180.00	12.60	192.60
BMU12R	REMOVE & REPLACE FR R UNDERCARRIAGE PARTS. (N)	1	1000.00	1000.00	70.00	1070.00
BMB01D	REMOVE & INSPECT ABS MODULAR BLEED BRAKE SYSTEM	1	650.00	650.00	45.50	695.50
BKFE12R	REMOVE & RENEW FR R FENDER INCLUDING	1	1500.00	1500.00	105.00	1605.00
BP03R	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS (3P)	^{3.} 1	1800.00	1800.00	126.00	1926.00
			Sum Labor	<u>5180.00</u>	362.60	5,542.60
Survey By						
Date & Time			Total Amount	7,321.67	512.53	7,834.20
Excess			Total (Inclusive of GST)			7,834.20
Status						
Signature						

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SK0K22710001 / KAH MOTOR CO SDN BHD [408610] ENTRY DATE & TIME: 18/07/2022 14:21 (SGT) SUBMITTED BY: SUHELMI BIN SUHARMAN VERSION: 1 (18/07/2022 14:21 (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
- 3. 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.
- 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.

- This report will be forwarded by the insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 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 18/07/2022 14:21 (SGT) Reported by Driver Date of Accident 17/07/2022 13:25 (SGT) **Exact Location of Accident** Near 11 Crescent Rd, Singapore 439299 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKN8324J

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SARITA KAUR BAJAJ NRIC No SXXXX379I **Email Address** saritakb07@gmail.com Mobile Phone No (Phone) +65-98584207 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model City Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to your vehicle? Yes Vehicle Category Private car Transmission Auto 1500

INSURANCE COMPANY

Name of Insurance Company **AXA Insurance Pte Ltd** Policy Number / Cover Note Number VPA/P1525412

DRIVER

Name of Driver HARMINDER KAUR D/O BHAGWANT SINGH NRIC No SXXXX227F Date Of Birth 10/03/1943 Occupation Indoor

Date Of Driving Pass Driving experience	11/09/1975 46 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-94555032
Alt. Phone Number	-
Email Address	saritakb07@gmail.com
Address	235 TEMBELING ROAD
Address complement	03-02
Postcode	423720
Is the driver the policyholder?	
If No, Relationship of the Driver with the Insured	No
	Parent
	No
Vehicle Registration Number of Other Vehicle Owned by Driver	<u>-</u>
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry
	5,
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)	NI-
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	-
PASSENGER 1	
Name	SAROJA
Gender	Female
DETAILS OF POLICE ACTION	
DETAILS OF FOLIGE 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? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHE	R VEHICLE PROPERTY 1
Vehicle Registration Number	SLV3736U
Vehicle Manufacturer	-
Vehicle Model	, -

Vehicle Variant

Vehicle Colour	<u> </u>
Vehicle Category	Private car
Name of Driver	XIU CHAO
Contact Number	(Phone) +65-92463166
Address	-
Address complement	-
Postcode	_
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	_

Vehicle

Number: SICH 83245

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.
- 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.
- 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.
- 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.
- 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) | Lunderstand, 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 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:
 - 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: Oriver's Signature (If driver is not the policyheider)
Date & Time:

Reporting Contac Personnel's Signature Name:

niriy/filia Ko,

Vehicle Number:	CKN 83541	SKETCH PLAN
Boundary	CRESCENT RO	Mountables 2.0
→		A: SEN 832 B; SLV3736
I was dy towards I felt an	Motintbatten Road or	Crescort Road 1 right side
of my I collided cenide.	vehicle, and It s	ide B' had
DECLARATION I/We declare the fermination of	eficulars are treade overvreener).	
ir We declare the to negoing pa	Hannimaler Kowr	ls d
Polityhokier's Signature Date & Time:	Driver's Signature (if driver is not the policyholder) Date & Time:	Reporting Certife Personnel's Signature Name: NRIC/f/N No.:

AXA INSURANCE PTE LTD 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Centre #01-21 Tel:1800 8804888 Fax:-Website:www.axa.com.sg GST Registration Number: 199903512M



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)

CERTIFICATE NO.

: VPA/P1525412

Account No.: 03365

Coverage

customer.care@axa.com.sg

: Comprehensive

Sum Insured

: Market Value At The Time Of Loss

Name of Policy Holder

: SARITA KAUR BAJAJ

Vehicle Registration No. : SKN8324J

Period of Insurance

: From 22/07/2021 To 21/07/2022 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

(a) The Policyholder

The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner

(b) Any other person who is driving on the Policyholder's order or with his 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.

LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and for the Policyholder's business The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

(01)

Basic Own Damage Excess

: SGD 400.00

ADDITIONAL EXCESS APPLICABLE FOR ANY AUTHORISED DRIVERS					
ADDITIONAL EXCESS APPLICABLE FOR ANY AUTHORISED DRIVERS					
Age of Driver	Driving Experience Less than 1 year	Driving Experience More than 1 year			
Below 22	Own Damage Excess + S\$4,000	Own Damage Excess + S\$4,000			
22 to below 27	Own Damage Excess + S\$4,000	Own Damage Excess + S\$2,500			
27 to below 70	Own Damage Excess + S\$2,500	Own Damage Excess			
70 and above	Own Damage Excess + S\$2,500	Own Damage Excess + S\$2,500			

^{*} Limitations 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.

I/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) and Part IV of the Road Transport Act, 1987 (Malaysia).

Your authorised workshop is Kah Motor Co Sdn Bhd.

WINNEY INSURANCE AGENCIES PTE LTD Blk 147 Potong Pasir Avenue 1 #02-93

Singapore 350147 Tel: +65 6283 8611 Fax: +65 6283 7611 RCB/GST Registration Number: 200006391E AXA INSURANCE PTE LTD

Authorized Signature

Issued by - WINNERO1 on 28/06/2021

IMPORTANT :

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and

DRIVING LICENCE



Licence Number: S2536227F

HARMINDER KAUR D/O BHAGWANT SINGH

Birth Date: 10 Mar 1943 Issue Date: 14 Aug 2003



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$2536227F





HARMINDER KAUR D/O BHAGWANT SINGH

Race

SIKH Date of Birth

10-03-1943

INDIA

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES) PASS DATE Motor Cars and Motor Tractors the weight of 11 Sep 1975 which unladen does not exceed 2500 kilograms NP 428A

3325674 Date of issue 03-03-2003 235 TEMBELING ROAD #03-02 SINGAPORE 423720

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$15843791



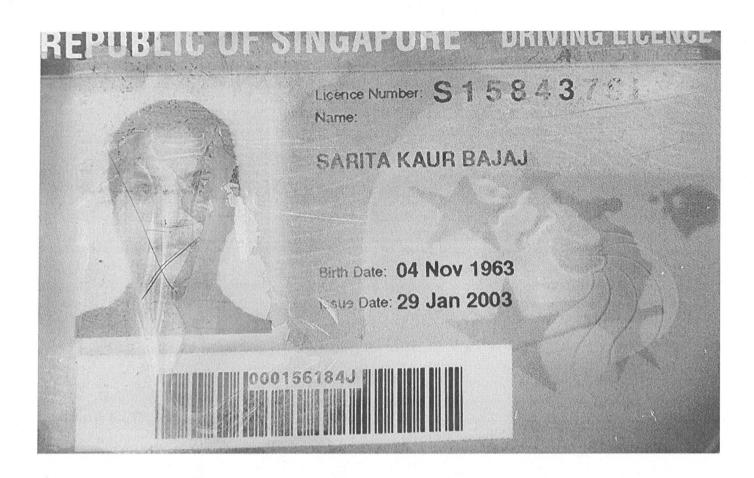
Name

SARITA KAUR BAJAJ





Rece
SIKH
Date of birth
Sex
04-11-1963
F
Country/Place of birth
SINGAPORE



DU ARE LICENSED TO DRIVE VEHICLES IN THE FULLOWING CLASSIES

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of 28 Jun 1982 which unladen does not exceed 2500 kilograms

NP 428A