

輝陽汽車有限公司 HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721
Tel: 64515752 (2 Lines) . Fax: 64514658
GST & Reg No. 201629438M

*AKG
Kenneth
17/10/22
Monday*

*Not Authorize
Lily &
Presurvey After Paint
3day*

13/10/2022

Owner: TAN YONG HENG

ESTIMATE TO REPAIR HONDA SHUTTLE HYBRID - SML6902R

1pc	front LH headlamp	\$	2,550.00	?
1pc	front LH headlamp lower bracket	\$	68.00	X
1pc	front centre grille base	<i>ln</i>	495.00	X
1pc	front centre grille outer garnish	<i>ln</i>	325.50	X
1pc	front centre grille "H" logo	<i>nn</i>	58.50	X
1pc	front centre grille lower chrome	<i>ln</i>	215.00	X
1pc	front bumper	<i>Brwl</i>	1,150.50	✓
20pcs	front bumper clip @\$5.00	<i>nc</i>	100.00	✓
1pc	front bumper LH side retainer	<i>OT</i>	55.00	✓
1pc	front bumper LH fog lamp	<i>ln</i>	385.50	X
1pc	front bumper LH fog lamp garnish		185.50	?
1pc	front bumper LH fog lamp garnish top cover	<i>ln</i>	78.50	X
1pc	front LH fender	<i>R</i>	598.50	X
1pc	front LH fender inner shield	<i>ln</i>	235.20	X
10pcs	front LH fender inner shield clip @\$5.00	<i>nn</i>	50.00	X

	\$	6,550.70	
less 20%	\$	1,310.14	
	\$	5,240.56	

wiring		\$	60.00	<i>152</i>
tuffkote		<i>nn</i>	60.00	X
spray painting		\$	1,000.00	<i>400</i>
labour charges		\$	1,000.00	<i>300</i>
Total		\$	7,360.56	



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 Actual 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 13/10/2022 12:11 (SGT)
Reported by Both
Date of Accident 13/10/2022 08:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information NORTH BRIDGE ROAD AND RAFFLES HOTEL DROP OFF/PICKUP POINT EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SML6902R
INSURED/POLICYHOLDER
Is company? No
Name Of Registered Owner TAN YONG HENG
NRIC No SXXXX051D
Email Address henrytan654321@gmail.com
Mobile Phone No (Phone) +65-96911339
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Honda
Model SHUTTLE HYBRID 1.5 AUTO
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 hire
Transmission Auto
CC 1496

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number SP2000832940-01

DRIVER

Name of Driver TAN YONG HENG
NRIC No SXXXX051D
Date Of Birth 09/06/1961

Occupation
 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

Outdoor
 28/10/2009
 13 YEARS
 Male
 (Phone) +65-96911339
 -
 henrytan654321@gmail.com
 BLK 182 RIVERVALE CRESCENT #17-291

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Collision - Major/Minor Rd
 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
 Translator's name -
 Translator's ID -
 Translator's phone number -
 Translator's email -
 Original language used in the statement -

PASSENGER 1

Name GOJEK PASSENGER
 Gender 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

REFER TO SKETCH PLAN.

NOTE: VEHICLE REPAIR AT OWNER W/SHOP - HUI YANG MOTOR

ATTACHMENT(S)

Are accident photos available for attachment? Yes
 Was there any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLX7011D

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.

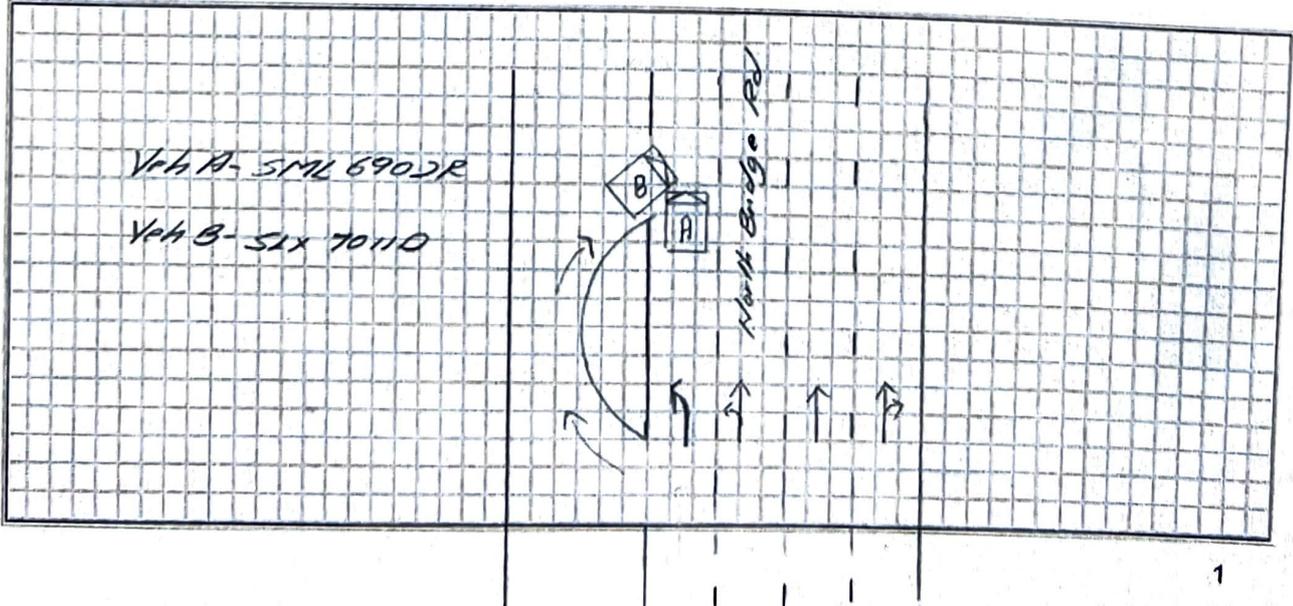
[Signature]
 Policyholder's Signature / Date & Time

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

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



Sketch Plan



Describe Circumstance of the Accident

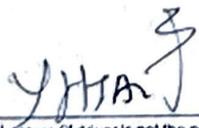
On 13/10/22 @ 8:30am my vehicle A (SM16902K)
was travelling along North Bridge Road. Vehicle B
(SIX 7011D) turn out & hit onto the front ^{left} portion
of my vehicle A.

Declaration

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

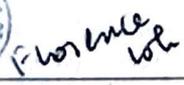


Policyholder's Signature / Date & Time



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





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