



not Authorized
 LLL
 Meray
 HP 90096608
 SYUSS 91000
 25/10/22

AP AUTOMOTIVE SERVICES PTE LTD
 ROC / GST REG NO : 202022890H
 BLOCK 9006
 TAMPINES STREET 93 #01-202
 SINGAPORE 528840
 TEL: 6784 4465
 FAX: 6787 4886

ESTIMATION

DATE : 2/5/22
 VEHICLE : 5 days
 MAKE / MODEL : NISSAN SYLPHY 1.6 CVT
 SMH7887R

No.	Description	Unit	Unit Price	Amount
PART REPLACEMENT				
	FRONT BUMPER <i>Dij</i>	1	\$ 598.00	\$ 598.00
	FRONT BUMPER FOGLAMP <i>11</i>	2	\$ 258.00	\$ 516.00
	FRONT BUMPER FOGLAMP GARNISH <i>11</i>	2	\$ 124.00	\$ 248.00
	FRONT BUMPER TOW HOOK COVER <i>Cur</i>	1	\$ 29.00	\$ 29.00
	FRONT BUMPER LOWER GRILLE	1	\$ 290.00	\$ 290.00
	FRONT BUMPER SPONGE <i>70.00</i>	1	\$ 234.00	\$ 234.00
	FRONT BUMPER REINFORCEMENT <i>300</i>	1	\$ 572.00	\$ 572.00
	FRONT BUMPER ABSORB BRACKET LH	1	\$ 216.20	\$ 216.20
	FRONT BUMPER SIDE RETAINER <i>24</i>	2	\$ 24.10	\$ 48.20
	FRONT BUMPER UNDERCOVER GARNISH <i>11</i>	1	\$ 202.00	\$ 202.00
	HEADLAMP <i>bolteron</i>	2	\$ 815.00	\$ 1,630.00
	HEADLAMP INNER LOWER BRACKET <i>NS</i>	2	\$ 29.00	\$ 58.00
	HEADLAMP LOWER BRACKET <i>NS</i>	2	\$ 30.00	\$ 60.00
	CENTRAL GRILLE <i>320</i>	1	\$ 250.00	\$ 250.00
	CENTRAL GRILLE TOP SUPPORT BRACKET <i>200</i>	2	\$ 20.00	\$ 40.00
	CENTRAL GRILLE LOGO <i>500</i>	1	\$ 65.00	\$ 65.00
	CENTRAL GRILLE CHROME <i>320</i>	1	\$ 765.00	\$ 765.00
	BONNET <i>300</i>	1	\$ 911.40	\$ 911.40
	BONNET HINGE <i>300</i>	2	\$ 45.00	\$ 90.00
	BONNET INSULATOR <i>11</i>	1	\$ 168.00	\$ 168.00
	BONNET STOPPER <i>11</i>	2	\$ 19.00	\$ 38.00
	BONNET LOCK <i>200</i>	1	\$ 42.00	\$ 42.00
	FRONT SUPPORT PANEL (TOP CENTRE) <i>300</i>	1	\$ 155.00	\$ 155.00
	FRONT SUPPORT PANEL (LOWER CENTRE) <i>11</i>	1	\$ 435.00	\$ 435.00
	FRONT SUPPORT PANEL (SIDE)	2	\$ 83.00	\$ 166.00
	FRONT SUPPORT PANEL TOP GRANISH <i>Dij</i>	1	\$ 404.00	\$ 404.00
	FRONT SUPPORT BRACE PANEL <i>200</i>	1	\$ 87.00	\$ 87.00
	RADIATOR	1	\$ 970.00	\$ 970.00
	RADIATOR SPARE TANK <i>11</i>	1	\$ 254.00	\$ 254.00
	RADIATOR FAN COWLING <i>11</i>	1	\$ 232.00	\$ 232.00
	AIR CONDENSOR	1	\$ 823.00	\$ 823.00
	AIR CON CONDENSOR SIDE GARNISH	1	\$ 196.00	\$ 196.00
	HORN <i>11</i>	2	\$ 101.00	\$ 202.00

Handwritten notes on the right side of the table, including 'X', '?', and checkmarks, likely indicating the status of each item.

TEMPERATURE SENSOR	17	1	\$ 138.00	\$ 138.00	X
FRONT FUSE BOX	17	1	\$ 150.00	\$ 150.00	X
FRONT FENDER	ntsr obsul	2	\$ 722.00	\$ 1,444.00	1pc
FRONT FENDER INNER COWLING	17	2	\$ 115.00	\$ 230.00	X
Total				\$ 12,956.80	
Less 10%				\$ 1,295.68	
Sub Total				\$ 11,661.12	

S/NETT ITEMS					
FRONT NUMBER PLATE	sent	1	\$ 120.00	\$ 120.00	40
FRONT BUMPER CLIP (SET)	rec	1	\$ 80.00	\$ 80.00	30
FRONT BUMPER UNDERCOVER GARNISH CLIP (SET)	17	1	\$ 80.00	\$ 80.00	X
CENTRAL GRILLE CLIP (SET)	17	1	\$ 60.00	\$ 60.00	X
BONNET INSULATOR CLIP (SET)	17	1	\$ 60.00	\$ 60.00	X
FRONT SUPPORT PANEL TOP GRANISH CLIP (SET)	rec	1	\$ 60.00	\$ 60.00	30
AIR CON CONDENSOR SIDE GARNISH CLIP (SET)	17	1	\$ 60.00	\$ 60.00	X
FRONT FENDER COWLING CLIP (SET)	17	2	\$ 80.00	\$ 160.00	X
RADIATOR COOLANT	rec	1	\$ 120.00	\$ 120.00	20
Total				\$ 120.00	

LABOUR

PANEL BEATING ON AFFECTED AREAS		1	\$ 1,600.00	\$ 1,600.00	600
SPRAY PAINTING ON AFFECTED AREAS		1	\$ 1,400.00	\$ 800.00	750
CHECK WIRING AND HEAD LAMP FUNCTIONS		1	\$ 120.00	\$ 120.00	20
REMOVE AND REFIT A/C CONDESER AND REFILL A/C GAS		1	\$ 120.00	\$ 120.00	100
REMOVE AND REFIT REVERSE SENSOR AND CHECK FUNCTIONS		1	\$ 260.00	\$ 260.00	17X
REMOVE AND REFIT RADIATOR AND CONDUCT PRESSURE TEST		1	\$ 350.00	\$ 350.00	17X
COMPUTERISED DIAGNOSTIC TEST AND CLEAR FAULT CODES		1	\$ 300.00	\$ 300.00	17X
TO APPLY RUST PROOFING		1	\$ 240.00	\$ 240.00	17X
Part Replacement Amount				\$ 11,781.12	
Total Amount For Labour				\$ 3,790.00	
Total Amount				\$ 15,571.12	

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 willful 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 04/10/2022 18:41 (SGT)
Reported by Driver
Date of Accident 03/10/2022 19:10 (SGT)
Exact Location of Accident Lentor Ave, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMH7887R

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TEO SWEE HIANG
NRIC No SXXXX149E
Email Address AGNES.TSH5@GMAIL.COM
Mobile Phone No (Phone) +65-90024651
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Nissan
Model Sylphy
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1598

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number DMPCSNW00009672201

DRIVER

Name of Driver TEY ZHI HUI EDWIN
NRIC No SXXXX955C
Date Of Birth 28/07/1964
Occupation Indoor

Date Of Driving Pass	14/04/2015
Driving experience	7 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91165701
Alt. Phone Number	-
Email Address	TZHEDWIN@GMAIL.COM
Address	BLK 130 ANG MO KIO AVENUE 3
Address complement	#09-1567
Postcode	560130
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
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
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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	SKG3480K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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 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 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:

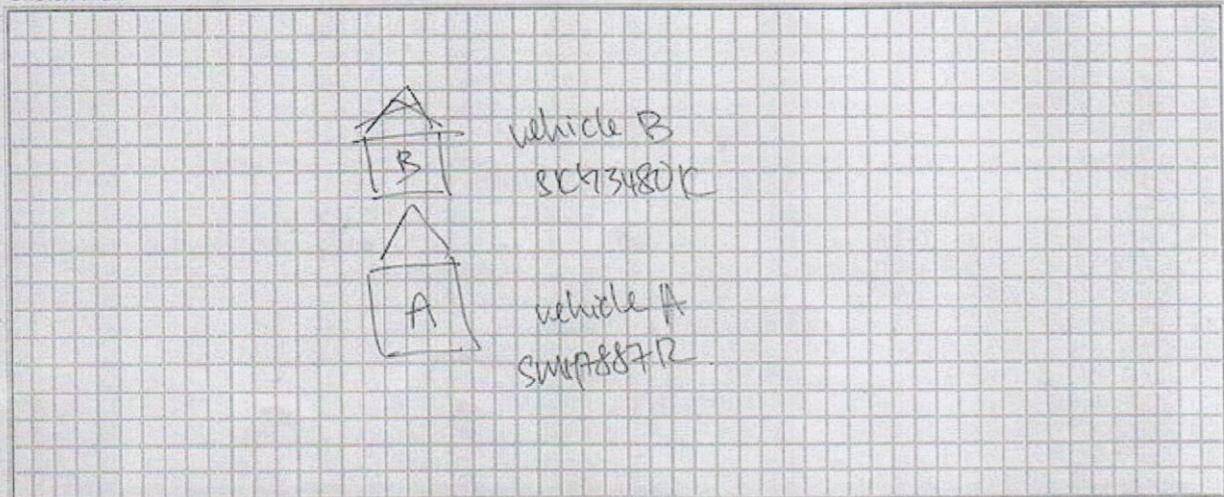
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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] 04/10/22 1730
Driver's Signature (if driver is not the policyholder) / Date & Time

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

Sketch Plan



Describe Circumstance of the Accident

The car in front of me stopped and I was not able to brake in time and hit the rear of the car in front of me.

I (Owner/In-charge/Driver) TEY ZHI HUI EDWIN , NRIC NO: S9411955C Vehicle No: SMAF887R
will be sending my above stated damaged vehicle to Company name: Auto Insure Pte Ltd.
for my vehicle damaged repairs and insurance claims.
GBE had clearly informed me on new GIA rules. I accepted all liabilities and discharge Goldbell Engineering Pte Ltd.

Declaration

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

[Signature]
Policyholder's Signature / Date & Time

[Signature] 21/10/22 17:27
Driver's Signature (if driver is not the policyholder) / Date & Time



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