



CITY AUTO PTE LTD

One Stop Automotive Solution

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643
TEL: 6453 1235, 6452 0850 FAX: 6453 7944
24hrs Towing Services Tel 9823 9898
Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

CHINA TAIPING INSURANCE (S) PTE LTD

NO. 3
ANSON RD
SPRINGLEAF TOWER
SINGAPORE 079909

Contact : -

Not written
Return by 6 days
Fax No. : 62247175

Estimate : QUOT202210-001143(00)

Date : 28/10/2022

Vehicle No. : SNG2655U

Make/Model : HYUNDAI CN7 AVANTE 1.6 DOHC
CVT S

Mileage (km) : 0

Chassis No. : KMHLN41ETNU334130

Accident Date : 17/10/2022 00:00:00

Claim No. : GBL7181C

Reference : JO202210-1441

Policy No. : 22-MN000659-R00

S/No	Particular	Quantity	Unit Price	Amount S\$
LIST ITEMS :				
1	Rear RH door	1.0	2,148.00	<i>B</i> 2,148.00 ✓
2	Rear RH fender	1.0	1,892.00	<i>B</i> 1,892.00 ✓
List Total :				4,040.00
20% Discount S\$				808.00
				<hr/> 3,232.00
SPECIAL NET :				
1	Glass sealant	1.0	40.00	<i>Mc</i> 40.00 ✓
2	Company sticker	1.0	300.00	<i>Mc</i> 300.00 <i>100%</i>
SPECIAL NET Total S\$:				<hr/> 340.00
LABOUR :				
* To remove and refit rear windscreen glass		1.0	150.00	150.00 <i>120%</i>
- To remove and install rear seat, trims and upholstery		1.0	120.00	120.00 <i>100%</i>
- To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts		1.0	1,000.00	1,000.00 <i>700%</i>
- Spray painting on affected & replace parts		1.0	800.00	800.00 <i>600%</i>
				<hr/> 2,070.00

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

E. & O.E.	Total S\$:	5,642.00
Acknowledged by Repairer	GST 7% S\$:	394.94
Signature:	Amount Due S\$:	<hr/> 6,036.94
Date:		

AA
CITY AUTO PTE LTD

2,809.43

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 28/10/2022 10:02 (SGT)
Reported by Both
Date of Accident 17/10/2022 15:45 (SGT)
Exact Location of Accident Singapore
Additional Location Information CTE X TIONG BAHRU ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNG2655U
INSURED/POLICYHOLDER
Is company? Yes
Name Of Registered Owner TOH MOTORS PTE LTD
Company Reg No 2XXXXX978G
Email Address sharon@tohcapital.sg
Mobile Phone No (Phone) +65-96330910
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Avante
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 car
Transmission Auto
CC 1598

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number 22-MN000659-R00

DRIVER

Name of Driver HECTOR ZHUO SHIJIE
NRIC No SXXXX723B
Date Of Birth 08/01/1973
Occupation Outdoor

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 **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. 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;

(a) investigating the accident and/or my claims;

(ii) 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.

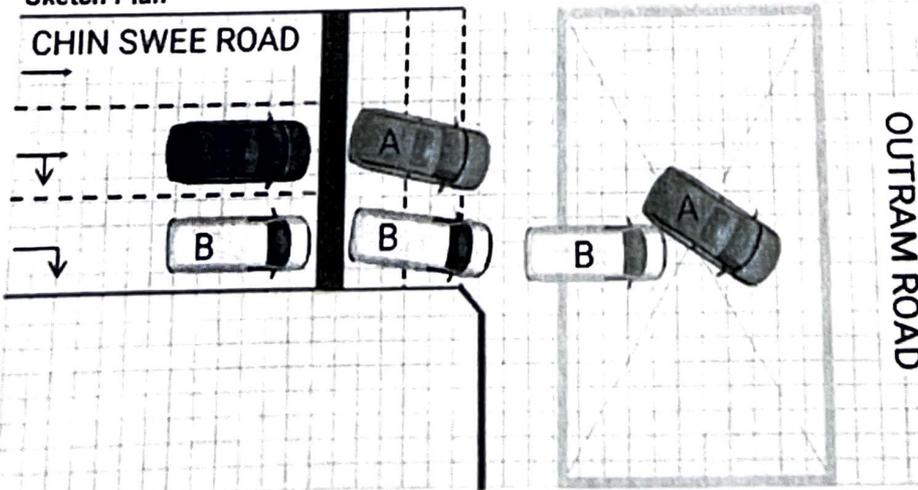
CITY AUTO PTE LTD
 Blk 8 Sin Ming Road
 #01-58/60/62 Sin Ming Ind Est
 Singapore 575643
 Tel: 6453 1235 Fax: 6453 7944
 Witnessed (Claims Centre Personnel)

Policyholder's Signature / Date & Time

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

17/10/2022 2320HRS

Sketch Plan



A - SNG2655U
B - GBL7181C