14-32-C6Z5

源 摩 哆 廠 GUAN MOTOR WORKS

Not Notharies
Rehmy B& paint
4-5day

Business Regn. No. 081026001

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 Fax: 6453 8292 I-I/P: 9742 6003

REPAIR	ESTIMATE SMA8553J
	F3 I IIVIA I E SIVIA03331

N	o. Qty			
	<u>List Items</u>			
1		\$	768.40	7
2	1 Rear bumper centre black garnish	\$ \$	AU 332.40	
3 4	2 Rear bumper side black garnish	\$		۲
5	 Rear bumper corner retainer (Below taillamp) Rear bumper side retainer 	\$ \$ \$	138.70	,
6	2 Rear bumper side retainer 1 set Rear bumper clips		100.20	
7	1 Rear tailgate		~	7 ノ ·
8	Rear tailgate top "TOYOTA" logo	\$ \$	1,320.00 ha 74.20	•
9	1 Rear tailgate RH "HYBRID" emblem		Me 52.30	
10	1 Rear tailgate weatherstrip	\$ \$	47 329.10	
11	1 set Rear tailgate inner trim board clips	\$	<i>^</i> ~ 60.00	×
12	1 Rear tailgate top lock	\$	509.10	
13	1 Rear end panel	\$	682.30	
14	1 Rear end panel inner keyless sensor	\$	226.30	
	,	\$	4,927.20	,
	Less 259			
	Total :	\$		•
			3,033.40	•
	Special Nett Items			•
15	1 set Rear windscreen sealant	\$	Mar 80.00	800
16	1 set Rear end panel sealant	\$	80.00	2
17	1 set Reverse sensor		\$60.00	2
		\$	Fen 250.00	20052
	Total:	\$	410.00	-
	<u>Labour</u>			_
1	Labour Charges for remove/refit, cutting/welding and			-
	replacement of damages.	\$	1,000.00	7
2	To putty and spray Spray Paintings charges.			
3	To remove, refit roor windows an all as	\$ \$	1,000.00	400-60ch
4	To remove, refit rear windscreen glass.		140.00	1201
5	To check wirings and lightings.	\$.	40.00	151
6	To remove, refit rear tailgate fittings.		80.00	
	To remove, refix reverse sensors & reverse camera.	\$	150.00	801
7	To remove, refit rear upholstery and attachments	Ś	120.00	?
8	To supply and apply anti rust treatment			
	Total:	- 2	90.00	7
	Total;	\$	2,620.00	_
	Tatala	×	The state of the s	
	Total Parts and Labour	\$	6,725.40	
	1 1/1/ A A			

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
- This party survey is on a "Without Prejudice" basis
- No leg, modification(s) is allowed
- plementary item(s) must be resurveyed and tredt to tinal அது oval from Insurance Company

Acknowledged by Repairer

Sin, , ,

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

3. Information provided must be as truthful and accurate as possible. Any ulfful 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.

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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

08/11/2022 14:27 (SGT) Driver 07/11/2022 06:30 (SGT) 22 Senoko Loop, Singapore 758154 MIN LOCK EATING HOUSE CARPARK Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMA8553J

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address**

Mobile Phone No Alternative Phone No. No

CHUAH KIAN TAT SXXXX670E rt98427316@gmail.com (Phone) +65-98427316

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Toyota Sienta

Exact purpose for which vehicle was being used at time of

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

Vehicle Category

Transmission CC

Private use

No - Claiming third party

Private car Auto 1496

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

Income Insurance Limited 5122831837-01

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

TOH SWEE CHEW SXXXX952H 25/01/1956 Indoor

IMPORTANT NOTICE

SKETCH PLAN

- Please report correctly the details of the abordent to speed up the claims process.
- 2. This Form must be completed by the Potovholder and/or the Actual Driver.
- 3. Information provided must be as truthfield and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow
- 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 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 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
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (w) administering my claims (including the mailing of correspondence, stolements, 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' 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,

Policefiolder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel (Name as in NRICAD card)

