

ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.

Tel: 6453 8686 (3 Lines) Fax: 6459 6550

Company Reg. No.: 201113667N

GST Reg. No.: 201113667N

Vehicle Insured : SGF6665C
Accident Date : 08-Nov-2022

No. : 06695

Date : 08-Nov-2022

Our Ref : 022188 (AIG) / CHAN

PAGE : 1

YORK HOTEL (PRIVATE) LIMITED
21 MOUNT ELIZABETH
YORK HOTEL
Singapore 228516

NOT Authorized
Murray Bepain
3 days

ESTIMATED COST OF REPAIR FOR HONDA ODYSSEY SMF2187X

- 1 pc Rear bumper fascia
- 1 pc Rear o/s bumper side retainer
- 1 pc Rear o/s bumper lower chrome
- 1 pc O/s taillamp lower garnish

mjcm 606.00 ✓
sn 23.50 X
sn 119.60 ✓
n 99.80 X

848.90
Less 20% : 169.78

679.12
500.00 *450*

To putty and spray replaced parts

To remove, cut-out damaged parts,
panel beating, welding, align,
refix and to renew above parts

400.00 *300*

Total : S\$ 1,579.12

Singapore Dollars One Thousand Five Hundred and
Seventy Nine and Cents Twelve Only

**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 08/11/2022 13:53 (SGT)
Reported by Driver
Date of Accident 08/11/2022 10:30 (SGT)
Exact Location of Accident Seng Poh Rd, Singapore
Additional Location Information CAR PARK LOT 18
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMF2187X

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner YORK HOTEL (PRIVATE) LIMITED
Company Reg No 1XXXXX074M
Email Address JEFFREY.CHONG@YORKHOTEL.COM.SG
Mobile Phone No (Phone) +65-97770605
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Honda
Model Odyssey
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Auto
CC 2356

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number 22-MT108897-R03

DRIVER

Name of Driver LEE CHONG MENG, RANDY
NRIC No SXXXX376I
Date Of Birth 13/10/1975
Occupation Indoor

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

23/04/1996
 26 YEARS AND 7 MONTHS
 Male
 (Phone) +65-87517875
 -
 JEFFREY.CHONG@YORKHOTEL.COM.SG
 BLK 195 KIM KEAT AVE #11-360
 -
 310195
 No
 Employee
 No
 -
 -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Hit and run / Vandalism / Damaged whilst parked
 Clear
 Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
 Number of vehicles involved in the accident
 Was anybody injured in the Accident?
 Was any injured conveyed to hospital by ambulance?
 Was any other vehicle or property damaged?
 Number of Passengers (Including Driver)
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?
 Translator's name
 Translator's ID
 Translator's phone number
 Translator's email
 Original language used in the statement

No
 2
 No
 -
 Yes
 0
 No
 -
 -
 -
 -
 -

DETAILS OF POLICE ACTION

Was the accident reported to the police?
 Was notice of intended Prosecution given?
 yes, against whom?

No
 No
 -

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category
 Name of Driver
 NRIC No

SGF6665C
 -
 -
 -
 -
 Private car
 CHEN TING
 SXXXX465I

SKETCH PLAN

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B. 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.

YORK HOTEL PTE LTD
21 MT ELIZABETH
SINGAPORE 228516

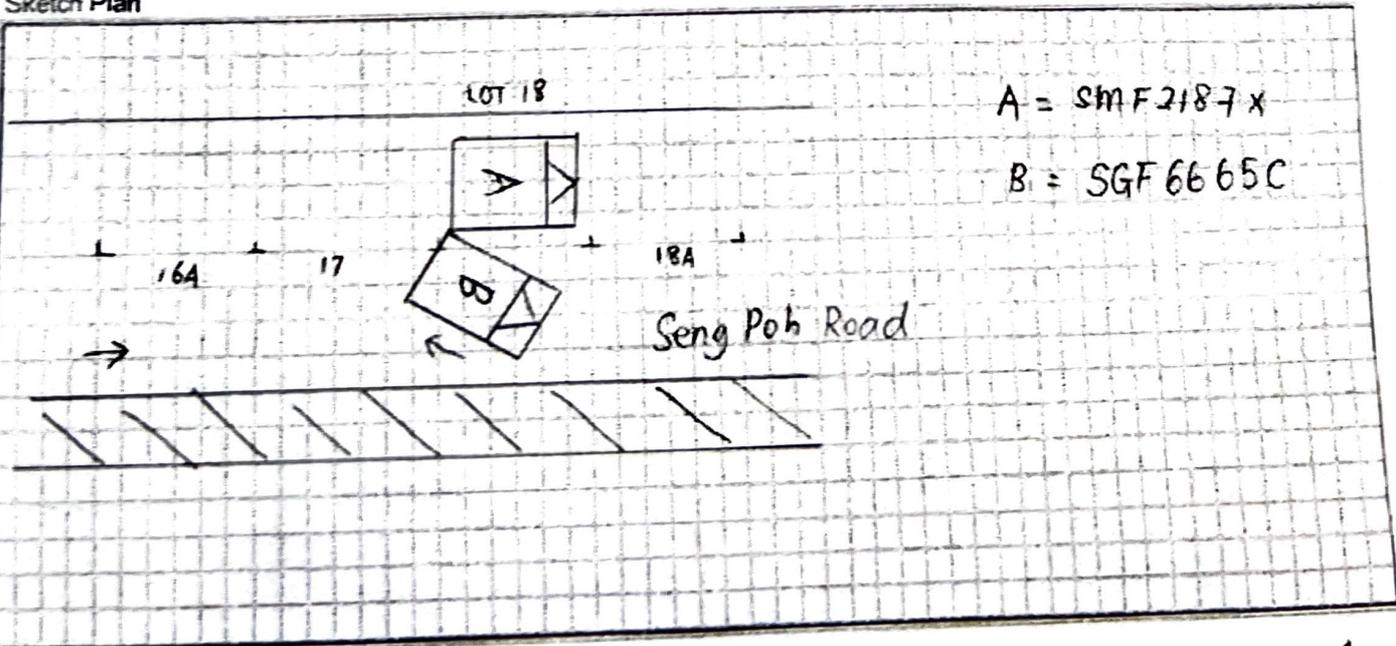
Policyholder's Signature / Date & Time

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

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



Sketch Plan



A = SMF 2187 X

B = SGF 6665 C

Describe Circumstance of the Accident

On 08.11.2022 at about 1030hrs my vehicle was parked at Seng Poh Road Lot 18.

When I returned to my vehicle, I saw two ladies taking photos of my vehicle. They approached me and informed me that while they were trying to park their vehicle, they accidentally collided onto my vehicle's rear right corner.

I declare the foregoing particulars are true in every respect.

YORK HOTEL PTE LTD
21 MT ELIZABETH
SINGAPORE 222516


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


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



Ver
07.11.22

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