Sum insured: Sum i	From: Date: Estimated Cost:	Veh No: SMR6297 Yr Regn: 01, 20
Searance Oster Searan	Estimated Cost:  OD / IP / WS / TP RES / OD RES / EVA / INV / MV	Veh No: JMR6297 Yr Regn: 01, 20 Type M.Carl M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
DOLITO WIS IT RESIDO RESIDON INVITATION TO INSpect Vehicle No.  Some involution only  Involution	OD / P / WS / TP RES / OD RES / EVA / INV / MV	Typer M.Car M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
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Sum Insured:  (Clen'ts Record) Make of Veh:  (Policy Condition)  Remark: The veh had commenced its repair at the time of Inspection.  Bal or Market Value:  (DAC Accident Rport:  Consistent?: Yes or No  Lum Sum:  Lum Sum:  Lum Sum:  Person Contacted:  Person Contacted:  Date:  Person Contacted:  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Interview (\$		Gen. Cond: Oncol Fals / Pars /
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IDAC Accident Root:  Consistent?: Yes or No  GIA / PR Seen:  Consistent?: Yes or No  Est. Repairs:  OS days Res.: Yes or No  Lum Sum:  Lum Sum:  CA / REV / REP. / 24 HRS  Date:  Person Contacted:  Vehicle: IN / OUT  Date / Time  Action / Instruction  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Add Fee:  Site Insp  (\$ ) Low Resurvey (\$ ) Low Re		TOYO / YOKO or
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Date: Person Contacted: Vehicle: IN / OUT  Date / Time   Action / Instruction   Days Of Repair:   Prell. Report   Plant Resurvey No. of Trip:   Survey Fee:   Add Fee:   Site Insp (\$   S - RS SI   Interview (\$   S   S - RS SI   Interview (\$   S   S - RS SI   Interview (\$   S   S - RS SI   S - RS SI   Interview (\$   S   S - RS SI   S - RS SI   S - RS SI   Interview (\$   S   S - RS SI   S -	ZO _ NO	Survey held at
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# E M Solution Pte Ltd

160 Sin Ming Drive #03-18/19, Sin Ming Autocity Singapore 575722
Tel: 64560226 Fax: 645

Fax: 64584500 GST Reg. No: 201016308K

NOT Northorise

**ESTIMATE** 

Permy After Pains

Date: 15th Dec. 2022

**SMR 6297Y** Veh No: **Honda Vezel** Make/Model: Chassis No: RU11325044 Date of Acc: 14.12.22

TP Veh No : GBF 7252M

				Limit Drice	Amount		
/No	Qty	Description	Part No. of Street	Unit Price	Alliount		
		<u>Materials</u>			s R 1,107.80		
1	1 pc	Rear Boot Lid			5 CM 260.60 2		
2	1 pc	Rear Boot Lid Garnish			4		
3	1 pc	Rear Boot Lid Logo		40.00	. 0		
4	2 pcs	Rear License Plate Lamp		\$ 43.90	7		
5	1 pc	Rear Boot Lid Vezel Emblem					
6	2 pcs	Rear Boot Lid Lamp L/R Alliex X	0157	\$ 317.80	·		
7	1 pc	Rear Boot Mechanism Lock			7		
8	1 pc	Rear Boot Lid Inner Trim Board			\$ 195.10 7		
9	1 pc	Rear Boot Lid Damper L/R		\$ 155.00	\$ 10.00 X		
10	1 pc	Rear Windscreen Moulding			\$ 145.00		
11	1 pc	Rear Boot Weatherstrip			\$ 135.20 7		
12	1 pc	Rear Bumper		nd	•		
	1 pc	Rear Bumper Side RH			\$ 192.80 X		
13 1 <b>4</b>		Rear Bumper Retainer L/R		\$ 22.00	\$ 1 44.00 X		
	2 pcs	Rear End Panel			\$ 429.80		
.5	1 pc	Rear End Panel Top Garnish			\$ 10 88.80		
6	1 pc				\$ In 168.10 X		
7	1 pc	Rear Boot Foam Tray			\$ 238.30 7		
8	1 pc	Rear Boot Tray Cover	dska	\$ 488.30	\$ 976.60		
	2 pcs	Rear Lamp L/R		\$ 488.50			
				. 2004			
				Less 20%	\$ 1,177.56		
				Parts Total	\$ 4,710.24		
		Special Nett			4		
	1 00	Windscreen Sealant			s Nex 50.00 4011		
	1 pc				5 Mar 45.00 -		
	1 set	Rear Bumper Clips					
	1 set	Top Garnish Clips					
	1 set	Reverse Sensor			\$ 230.00		
	1 set	Rear Boot Lid Trim Clips			\$ Ma 55.00 -		
		Rr License Plate		Special Nett	: \$ 435.00		
		<u>Labour</u>			\$ 80.00 20		
		rearrange electrical wirings, check lighti			\$ 80.00 20		
		replace upholstry, cushion seat & trim g	arnish <b>es.</b>		\$ 100.00 60		
	To remove, re	einstal rear windscreen.			\$ 80.00 20 \$ 100.00 60 \$ 150.00 12 \$ 100.00 60		
	To remove, tr	ransfer boot lid components			\$ 100.00 60		
	To remove, r	epair & replace damaged bodyparts, rea	align bodyworl	k	\$ 800.00 7		
		nsistent to the accident.					
					\$ 800.00 45		
		LKK AU	to Consultante	s hence notify	\$ 100.00 5		
F	Rust proofing	on affected portions.	airor of the f	2 Herice Houry	\$ 100.00 7		
		ale re	valler of the to	llowing our Total	: \$ 2,230.00		
		,	voy before/after	SDrav Daintino			
		To display	ay damaged part	(s) during resurvey	A) ====		



**Teh Mong Hwee** 

Singapore 648217

123D Westwood Ave

Mr

for E M Solution Pte Ltd

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:

Parts quoted were based on visual inspection. Should additional

7,375.24

NA

SLOM22CE0002 / Lai Huat (Meng Kee) Motor Pte Ltd ENTRY DATE & TIME: 14/12/2022 14:31 (SGT) SUBMITTED BY: LHMK -3 VERSION: 1 (14/12/2022 14:31 (SGT))

## **SINGAPORE ACCIDENT STATEMENT**

IMPORTANT NOTICE

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 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.

4. The issue and acceptance of this Form by insurance companies is not an admission of pointy insurance and insurance and insurance association of Singapore (GIA) for archiving 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

14/12/2022 14:31 (SGT) Both 14/12/2022 07:50 (SGT) Jurong West Ave 5, Singapore Filter lane to Jalan Bahar Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SMR6297Y

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

**Email Address** 

Mobile Phone No

Alternative Phone No

No

**TEH MONG HWEE** 

S8081753C

monghwee80@gmail.com

(Phone) +65-92295428

VEHICLE PARTICULARS

Manufacturer

Model

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?

Vehicle Category

Transmission

CC

Honda

Vezel

Private use

No - Claiming third party

Private car

Auto

1500

**INSURANCE COMPANY** 

Name of Insurance Company

Policy Number / Cover Note Number

Liberty Insurance Pte Ltd SI22V11077/VPE/R00

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

**TEH MONG HWEE** S8081753C 23/10/1980 Indoor



### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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 purposo(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 (rms, 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Contro Personnel (Name as in NRIC/ID card) SOH JIT HOON

Sketch Plan Jalan Bahan A) SMR 62974 B) GBF TZSZM