7	10440	
ASS. RECBY: Tout NA	REF: CL4/GK527	101 Ctr3/7 pa3
	ASSIG	NMENT
From:	Date:	Veh No: SFZ2286X Yr Regn: 201.5, Syp
Estimated lost		Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD I TP I WS I TP RES I OD R	ES / EVA / INV / MV	Truck / Trailer or
To Inspecivehide No:	> ×	Make: Hyunda Elantra. C.C 1591
at Workship m/s		Colour Maih. A/C: Insured / Std / Ni / NA
οf		Sp.Reading 96679 T/Radio: Insured Std NI NA
insured:		Eng/No:
Policy No.	0	C/NO: KM 4 D 4 4/ CM 9 4 623705.
Claims Nu		Gen. Cond: Good / Fair / Poor / Burnt
Sum insued:	Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)		Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	*	Modi: Nil / S/Rim / STD A/Rim or
)	**	Tyre Size: F: 225/45747
(Policy Condition)		R:
Remark: The veh had comme repair at the time of	1	BS I DUN I EXNOVA I GY IFF I LIZA MID I OHTSU I PIR I SUMI I
	940K	TOAD I AOKO DI
Ball or Market Value:	Consistent? : Yes or No	Front Rear R/Bal. 6 mm R/Bal. 6 mm
IDAC Accident Rport GIA / PR Seen:	Consistent? : Yes or No	L/Bal. (mm , L/Bal. 6 mm
Est. Repairs:	days Res.: Yes or No	D.O.A. D.O.I. 03/01/23
Lum Sum:	% 3 Val.: Yes of No	Survey held at Si for 8t
CA / REV / REP. / 24	4HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooffop or
	Vehicle: IN / OUT on Contacted:	
Date / Time Action / Ins		The U/C / Chassis frame / Body Structure affected due to collision.
)	0.0000071	
		1
	9	
Date/Tine, File Pass to?	: Prell. Report	Days Of Repair:
	: Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	I mar nopore	Transportation:
2)	Add F	ee: : Site Insp (\$) _s+Rs_si.
		:Interview (\$) Photos
Reprofession (LEU: ()		:Tech. Irivs (\$) Others
Control Catego / Freshirt in)	:VVestend (\$

BIFROST AUTO PTE LTD

8 KAKI BUKIT AVE 4, PREMIER @ KAKI BUKIT #01-49 SINGAPORE 415875

Tel: +65 64524457 Fax: +65 64524584

Company Reg No: 201929175W

Repair Estimate

Vehicle number: SFZ2286X Make & Model: Hyundai Elantra

Chassis number: KMHDH41CMGU623705

Date of survey: Name of surveyor:

Contacts:

No.	Description of spare parts	Qty	Amount S\$
1	Dootlid	1	\$ bt 1,307.00
2	Bootlid Bootlid "Elantra" emblem	1	\$ 1,307.00
		1	
3	Bootlid lock	1	\$ b/ 84.00 \$ × 288.00
	Bootlid RH lamp	1	
5	Bootlid LH lamp	1	\$ x 288.00 \$ 469.00
6	Rear bumper	1	
7	Rear bumper RH reflector	1	-
8	Rear bumper LH reflector	1	\$ \ 32.00
9	Rear bumper clips	1set	\$ 3,000 80.00
10	Rear bumper reinforcement	1	\$ 44 352.00
11	Rear bumper reinforcement upper brackets	2	\$ < 20.00
12	Rear bumper reinforcement lower brackets	3	\$ x 30.00
13	Rear bumper reinforcement RH stay	1	\$ 6/- 45.00
14	Rear bumper reinforcement LH stay	1	\$ 67 45.00
15	Rear bumper lower guard	1	\$ 15.00
16	Rear bumper RH side retainer	1	\$ 🛭 33.00
17	Rear bumper LH side retainer	1	\$ × 33.00
18	End panel	1	\$ 67 404.00
19	End panel inner garnish	1	\$ 20 89.00
20	End panel inner garnish clips	1set	\$ 20m - 60.00
21	Rear antena sensor	1	\$ × 86.00
22	RH taillamp assy	1	\$ 000 378.00
23	RH taillamp sponge gasket	1	\$ × 21.00
24	RH tailamp lock clips	1set	\$ X 24.00
25	RH tailamp panel	1	\$ × 118.00
	LH taillamp assy	1	\$ 378.00
27	LH taillamp sponge gasket	1	\$ × 21.00
28	LH tailamp lock clips	1set	\$ 1 24.00
29	LH tailamp panel	1	\$ 118.00
30	Rear compartment panel top cover	1	\$ 193.00
31	Exhaust silencer	1	\$ × 737.00
32	Exhaust silencer gasket	1	\$ × 34.00
			\$ 5,872,00

\$ 5,872.00 Parts less 20% \$ 1,174.40 Total \$ 4,697.60

No.	Special Nett Items	Qty	Amount S\$
1	Bootlid centre emblem (after market)	1	\$ 14 70.00
2	Bootlid "Turbo" sticker	1	\$ 14 25.00
3	Bootlid "Sports" sticker	1	\$ 19 25.00
4	Bootlid "HKS" sticker	1	\$ 22 33.00
5	Bootlid spoiler	1	\$ × 680.00
6	Rear number plate	1	\$ 70.00
7	Rear bumper lower spoiler	1	\$de/53 850.00
8	Rear bumper reverse sensor	1set	\$ 14/200350.00
9	Rear bumper carbon fibre sticker	1	\$100 350.00
10	End panel joint sealant	1	\$ 40 80.00
		Total:	\$ 2,533.00

No.	Labour and painting		A	mount S\$
1	Labour charges to remove, check, replace and reinstall	600	\$	1,200.00
	damages bodyparts. To panel beating, cut/weld and realign all affected panels and areas			
2	Spray painting on affected areas and panels	700	\$	1,000.00
3	Check wiring and lighting system on affected areas	30	\$	60.00
4	Spray rust chemical coating on repaired and replaced panels	30	\$	50.00
5	Remove and replace rear bumper reverse sensor	30	\$	100.00
6	Remove and replace rear inner trims and garnish to assist repair	60	\$	280.00
7	Remove and replace exhaust silencer and gasket to assist repair	×	\$	120.00
8	Remove and reinstall bootlid reverse camera to assist repair	30	\$	100.00
		Total:	\$	2,910.00

(Part by Part / Lump sum)

Working days:
Tanfin 97415749
wp 3/1/23 & spm To
top 3/1/23 & Spr L/S Resum affar report forfin e/kharts.wh
t week a weight on of quickent
- to menh a wester of a exident - to men part prios.

Agreed Amount:

 Spare Parts:
 \$ 4,697.60

 Special Nett:
 \$ 2,533.00

 Labour:
 \$ 2,910.00

Total Amount: \$ 10,140.60

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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	764G
Vehicle No.:	SFZ2286X
Vehicle to be Exported:	Yes
Intended Deregistration Date:	29 Dec 2022
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA 1.6 AT ABS D/AB 2WD 4DR
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	G4FGFU024138
Chassis No.:	KMHDH41CMGU623705
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$12,766.00
Original Registration Date:	05 Sep 2015
First Registration Date:	05 Sep 2015
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$12,766.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	04 Sep 2025
PARF Rebate Amount: Intended COE Rebate Details	\$7,659.00
COE Expiry Date:	04 Sep 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$57,498.00
COE Rebate Amount:	\$15,427.00
Total Rebate Amount:	\$23,086.00

The information contained herein is correct as at 29 Dec 2022

SC1V22CS0001 / Convergence Automotive Pte Ltd ENTRY DATE & TIME: 28/12/2022 16:52 (SGT) SUBMITTED BY: Chia Pei Fen VERSION: 1 (28/12/2022 16:52 (SGT))

SINGAPORE ACCIDENT STATEMENT

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 witholding of material facts may allow insurance companies to repudiate

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

28/12/2022 16:52 (SGT)

Both

27/12/2022 19:05 (SGT)

Singapore

BKE TOWARDS WOODLANDS

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SFZ2286X

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

FOO SEK MIN

SXXXX764G

JIMMYSM88@YAHOO.COM.SG

(Phone) +65-97700788

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Hyundai Elantra

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

Private use

No - Claiming third party

Private car

Auto

1582

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

ECICS Limited MPC22A00152600

DRIVER

Name of Driver NRIC No Date Of Birth

Occupation

FOO SEK MIN SXXXX764G 28/12/1958 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

09/03/1979

43 YEARS AND 9 MONTHS

Male

(Phone) +65-97700788

JIMMYSM88@YAHOO.COM.SG 553 WOODLANDS DRIVE 44 #10-06

730553

Yes

No

-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

Collision - Head to Rear

Clear Wet

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

Yes No

Yes

1

No

-

2,940.0

-

122

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

Yes

Traffic Police

(Phone) +65-65470000

(Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

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

SLR4650K

_

-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Gender
Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

FOO SEK MIN
FOO S

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:

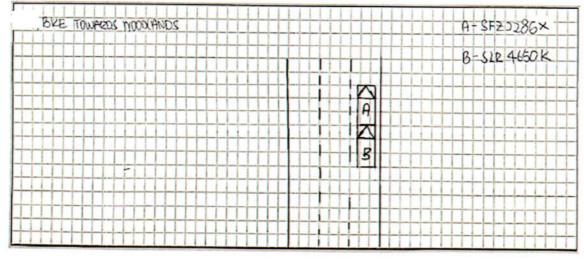
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims.
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (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.

Policyholder's Signature / Date & Time

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

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

Sketch Plan



ribe Circums	tance of the Accident
	Stated time and date, I was driving my vehicle A (SF2)186x) on
	and the six tell, I was county that where I (a sessor) as
ONE	TWARDS WOODCANDS. AS the vanicle infrant of me stop, I fallowed and
	Constitution of the state of th
24 CD 45	nell Suddenly, I feel a huge impact from my rear. After awhile, I
	the street is the street than the state that
not off	my venice and realized venice is (STR 4650K) and idlided on to
the rear	r of my vanick.
	Refer to police Report
	7/20221228/7041
	_

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

Policyholder's Signature / Date & Time

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

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

2





T/20221228/7041

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20221228/7041

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Vide Report No .: Station Diary No.: 28/12/2022 16:27 Informant's Particulars Name of Informant: Address: FOO SEK MIN 553 WOODLANDS DRIVE 44 #10-06 SINGAPORE 730553 ID Type / ID No.: Contact No .: NRIC NO / \$1325764G Home/Office: Mobile: 97700788 Nationality: SINGAPORE CITIZEN JIMMYSM88@GMAIL.COM Sex: Date of Birth: Type of Informant: Age: 64 28/12/1958 Male Driver Race: Language: Institution / School Name: Chinese English Occupation: Driving Licence Information: RETIRED Class: Date of Expiry:

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/12/2022 19:05	Type of Location Straight Road
Location: BKE TOWAR Weather:	DS WOODLANDS	Road Surface:		Road Speed Limit:
Clear		Wet		
		Wet Traffic Control: Not Controlled		Traffic Volume: Moderate

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SFZ2286X	Car	HYUNDAI	ELANTRA 1.6 AT ABS D/AB 2WD 4DR	Black		0
SLR4650K	Car					0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

Report No. T/20221228/7041

CONTINUATION OF REPORT

Details of V	ehicle Insurance		The state of the s	
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFZ2286X	ECICS LIMITED	MPC22A00152600	05/09/2022	04/09/2023

Details of Perso	n Involved				
Any Pedestrian I	nvolved: No				
No. of Pedestrian	ns Injured: NIL		Use of Ped	destrian Cros	ssing: NA
Driver					
Name	FOO SEK MIN		ID No.	S1325764G	
Related Vehicle	SFZ2286X (Car)		Contact No	. 97700788	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	28/12/2022 Date		Date	28/1	2/2022
No. of Days granted Medical Leave 0		03	Degree of	Seri	ous

Brief Details.

On the stated time and date, i was driving my vehicle (SFZ2286X) on BKE towards woodlands. As the vehicle in front of me stop, i followed and stop as well. Suddenly, i felt a huge impact from my rear. After awhile, i got off my vehicle and realized vehicle (SLR4650K) had collided on to the rear of my vehicle. I felt aches and pain after the accident and went to visit the doctor and received 3 days MC.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

Report No. T/20221228/7041

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Informant:
The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
28/12/2022 16:27

Officer In Charge Of Case:
TP / TPIB /
MUHAMMAD NOOR BIN ABDUL RAHMAN
Contact No.: 65476219

NP168