

MY CAR CONSULTANT PTE LTD
60 JALAN LAM HUAT, CARROS CENTRE
#05-68 Singapore 737869

Not to be used
U/Ry &
Money After Repair
3 days

TO	: FIRST CAPITAL	DATE	: 6-Jan-23
ATTENTION	: MOTOR CLAIMS DEPT	JOB TYPE	: T/P CLAIM
VEHICLE DETAILS			
:		VEHICLE NO	: SKF9008H
:		MODEL	: HONDA CRV
THIRD PARTY REQUESTOR / CONTACT : DAUD/93911482			

QUOTATION SUMMARY

CLAIM DETAIL : PARTS

S/N	DESCRIPTION	QTY	UNIT LIST PRICE	TOTAL LIST PRICE
1	FRONT BUMPER <i>Buclma</i>	1	\$ 1,598.00	\$ 1,598.00
2	FRONT BUMPER SIDE GARNISH RH <i>by</i>	1	\$ 159.00	\$ 159.00
3	FRONT BUMPER LOWER <i>lu</i>	1	\$ 879.00	\$ 879.00
4	FRONT FENDER RH <i>lu</i>	1	\$ 698.00	\$ 698.00
5	FRONT FENDER WHEEL ARCH RH <i>Bu</i>	1	\$ 387.00	\$ 387.00
7	FRONT KNUCKLE ARM RH <i>lu</i>	1	\$ 612.00	\$ 612.00
8	FRONT KNUCKLE BEARING <i>lu</i>	1	\$ 198.00	\$ 198.00
10	HEADLAMP RH <i>lu</i>	1	\$ 1,710.70	\$ 1,710.70
11	HEADLAMP LOWER BRACKET RH <i>lu</i>	1	\$ 147.20	\$ 147.20

TOTAL PRICE \$ 6,388.90
LESS 20% \$ 1,277.78
SUB TOTAL PRICE \$ 5,111.12

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT
1	FRONT BUMPER CLIP <i>lu</i>	10	\$ 6.50	\$ 65.00
2	FRONT BUMPER SIDE CHROME RH <i>lu</i>	1	\$ 150.00	\$ 150.00
3	FRONT BUMPER SIDE GARNISH CLIP <i>lu</i>	3	\$ 6.50	\$ 19.50
4	FRONT BUMPER SENSOR <i>lu</i>	1	\$ 220.00	\$ 220.00
5	FRONT SPORTS RIM RH <i>lu</i>	1	\$ 1,000.00	\$ 1,000.00

TOTAL \$ 1,454.50

CLAIM DETAILS: LABOUR AND SPRAY PAINTING

1	PANEL BEATING, REMOVAL AND REPLACING PARTS	\$500.00	<i>30d</i>	
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2	TO SPRAY PAINT AFFECTED AREA		\$500.00	4000	
3	TUFF COAT	~	\$150.00	X	
4	WIRING CHECK		\$50.00	150	
5	REFOCUS HEADLAMP BEAM	~	\$80.00	X	
6	REMOVE AND REFIX FRONT UNDERCARRIGE	~	\$400.00	X	
7	CONDUCT WHEEL ALIGNMENT	~	\$100.00	X	

TOTAL

\$1,780.00

ESTIMATE REPORT

TOTAL PARTS COST \$ 6,565.62
 TOTAL LABOUR COST : \$ 1,780.00
 TOTAL REPAIR COST : \$ 8,345.62

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	29/12/2022 14:21 (SGT)
Reported by	Owner
Date of Accident	28/12/2022 13:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SUNTEC ROUNDABOUT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF9008H
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	A E BROTHERS PTE LTD
Company Reg No	2XXXXX902C
Email Address	jon.lew1980@gmail.com
Mobile Phone No	(Phone) +65-91474325
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Cr-v
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	2354

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5076291154-06

DRIVER

Name of Driver	LIEW YEW KIM
NRIC No	SXXXX271Z
Date Of Birth	31/12/1970
Occupation	Indoor

SKETCH PLAN

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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 & Time

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

Sketch Plan

