



MY CAR CONSULTANT

Reg no.: 201605878Z

Address: 60 JALAN LAM HUAT, CARROS CENTRE 05-68 S737896

HP: 98888885

Estimation

Make
INSU

No.	Description
	Parts Replacement:
1	FRT BUMPER
2	FRT BUMPER SIDE RETAINER RH
3	FRT BUMPER LOWER LID
4	FRT BUMPER FOGLAMP RH
5	FRT BUMPER SIDE COVER RH
6	HEADLAMP RH
	TOTAL PART
	LIST DOWN
	AFTER LIST DOWN
	SPEICAL NETT
1	FRT BUMPER CLIP SET
	TOTAL AMOUNT

	LABOUR
1	CHECK WIRING
2	REALIGN HEADLAMP
3	KNOCK
4	SPRAY
	TOTAL AMOUNT

\$ 400.00	\$ 400.00
	\$ 1,020.00
Parts Replacement Amount	\$ 2,385.00
Total Amount for Labour	\$ 1,020.00
Total Amount	\$ 3,302.00

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:



MY CAR CONSULTANT PTE LTD

Reg no.: 201605878Z

Address: 60 JALAN LAM HUAT, CARROS CENTRE 05-68 S737896

HP: 98888885

Estimation

Date:

3/1/2023

Vehicle:

SML9430R

Make / Model:

TOYOTA PRIUS

INSURANCE

LIBERTY

Not Notified
L/Ry &
Priming After Paint
2 days

No.	Description	Unit	Unit Price	Amount
Parts Replacement:				
1	FRT BUMPER	1	\$ 879.00	\$ 879.00
2	FRT BUMPER SIDE RETAINER RH	1	\$ 45.00	\$ 45.00
3	FRT BUMPER LOWER LID	1	\$ 698.00	\$ 698.00
4	FRT BUMPER FOGLAMP RH	1	\$ 321.00	\$ 321.00
5	FRT BUMPER SIDE COVER RH	1	\$ 112.00	\$ 112.00
6	HEADLAMP RH	1	\$ 2,257.00	\$ 2,257.00
	TOTAL PART			\$ 4,312.00
	LIST DOWN	25%		\$ 1,078.00
	AFTER LIST DOWN			\$ 3,234.00
SPECIAL NETT				
1	FRT BUMPER CLIP SET	1	\$ 50.00	\$ 50.00
	TOTAL AMOUNT			\$ 50.00
LABOUR				
1	CHECK WIRING		\$ 100.00	\$ 100.00
2	REALIGN HEADLAMP		\$ 120.00	\$ 120.00
3	KNOCK		\$ 400.00	\$ 400.00
4	SPRAY		\$ 400.00	\$ 400.00
	TOTAL AMOUNT			\$ 1,020.00
Parts Replacement Amount				\$ 2,385.00
Total Amount for Labour				\$ 1,020.00
Total Amount				\$ 3,302.00

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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	19/12/2022 08:48 (SGT)
Reported by	Driver
Date of Accident	16/12/2022 21:25 (SGT)
Exact Location of Accident	78 Airport Blvd., Jewel Changi Airport, Singapore 819666
Additional Location Information	PILLAR 7
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML9430R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	LUMENS AUTO PTE LTD
Company Reg No	2XXXXX961K
Email Address	kokhow.tay@lumens.sg
Mobile Phone No	(Phone) +65-92700985
Alternative Phone No	(Office) +65-87781765

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	PLUS
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	22-MN000812-R00

DRIVER

Name of Driver	SEAH HOCK SENG (SHE FUCHENG)
NRIC No	SXXXX542I
Date Of Birth	08/05/1979
Occupation	Outdoor

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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

17/12/2022 0030HRS

FLASH ACCIDENT
REPORTING OFFICER

FRO SUFIYAN



Witnessed by Reporting Centre Personnel

Sketch Plan

A - SML9430R
B - SMX5049Y

JEWEL CHANGI AIRPORT PILLAR 7

