



NPH AUTO SERVICE

Block 9005 Tampines Street 93 #01-246/254 Singapore 528839 Tel: 67840663 (8 Lines) Fax: 67840692

GST Reg No: MX-0869103-NO Business Reg No: 394773/00D

E-mail: nphauto@pacific.net.sg



Your Ref : Page : 1/2
Our Ref : TP0006/01/23 Date : 11/01/2023

THIRD PARTY CLAIM

M/S : TANG HAN WEI
222A BEDOK NORTH DRIVE
#13-22 SINGAPORE 461222

Attn :

Dear Sir/Madam

RE: ACCIDENT REPAIR ON : SLQ5585P - MAZDA 3
INSURED : TANG HAN WEI
DATE OF ACCIDENT : 09/01/2023
POLICY NO : MP320428

ENGINE# : D
CHASSIS# : E

APPENDED BELOW ARE THE ESTIMATED COST OF REPAIR & TO BE REPLACED:

	Qty	U/Cost	U/Price	Total
		\$	\$	\$
<u>Replacement of Parts</u>				
1 rear boot	1@	1004.00	1004.00	1,004.00
2 rear boot hinge L & R	2@	152.00	152.00	304.00
3 rear boot lamp L& R	2@	466.00	466.00	932.00
4 rear boot center logo	1@	77.00	77.00	77.00
5 rear mazda 3 emblem	1@	55.00	55.00	55.00
6 rear skyactiv emblem	1@	67.00	67.00	67.00
7 rear boot lock top	1@	185.00	185.00	185.00
8 rear boot finisher clip	12@	6.90	6.90	82.80
9 rear boot lower lock catch	1@	57.00	57.00	57.00
10 rear lamp assembly L & R	2@	960.00	960.00	1,920.00
11 rear bumper	1@	1127.00	1127.00	1,127.00
12 rear bumper reflector lamp L& R	2@	53.00	53.00	106.00
13 rear bumper side retainer L & R	2@	38.00	38.00	76.00
14 rear bumper enforcement	1@	563.00	563.00	563.00
15 rear lamp end panel	1@	530.00	530.00	530.00
16 rear boot rubber	1@	135.00	135.00	135.00
17 rear end panel inner center garnish	1@	99.70	99.70	99.70
18 rear end panel keyless sensor	1@	123.00	123.00	123.00
19 rear parking sensor wire	1@	141.00	141.00	141.00
				7,584.50
Less 20%				-1,516.90
Total Material				\$6,067.60
<u>Special Nett Items</u>				
1 rear bumper parking sensor	1@	200.00	200.00	200.00
				200.00
				0.00



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APPENDED BELOW ARE THE ESTIMATED COST OF REPAIR & TO BE REPLACED:

	Qty	U/Cost	U/Price	Total
		\$	\$	\$
Total S/Nett				\$200.00
Labour & Misc				
1 Remove and install rear boot, rear lamp, rear bumper, cut out and renew rear end panel. Knocking spare tyre panel, rear lamp panel and restraighten body and chassis.				1,200.00
2 Spray Painting				1,000.00
3 Check wiring system.				25.00
4 Reset and renew parking sensor.				100.00
5 Remove and install rear boot carpet.				120.00
				2,445.00
Total Labour				\$2,445.00
Nett Total Before Gst				\$8,712.60

Your faithfully

NPH AUTO SERVICE
(Manager)

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	10/01/2023 10:20 (SGT)
Reported by	Both
Date of Accident	09/01/2023 14:54 (SGT)
Exact Location of Accident	740 Upper E Coast Rd, Singapore 465549
Additional Location Information	TRAFFIC LIGHT JUNCTION OF UPPER EAST COAST RD & BEDOK SOUTH AVE 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ5585P
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TANG HAN WEI
NRIC No	SXXXX454G
Email Address	tanghw@gmail.com
Mobile Phone No	(Phone) +65-96644125
Alternative Phone No	

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	3
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	HL Assurance Pte Ltd
Policy Number / Cover Note Number	MP320428

DRIVER

Name of Driver	TANG HAN WEI
NRIC No	SXXXX454G
Date Of Birth	18/08/1987

Occupation	Indoor
Date Of Driving Pass	29/05/2006
Driving experience	16 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96644125
Alt. Phone Number	-
Email Address	tanghw@gmail.com
Address	222A BEDOK NORTH DRIVE #13-22
Address complement	-
Postcode	461222
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED SKETCH PLAN.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD8279E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	WANG XIGANG



Contact Number	(Phone) +65-88530093
Address	
Address complement	
Postcode	
Insurance Company Name	Allianz Insurance Singapore Pte. Ltd.
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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2. This Form must be completed by the Policyholder and/or the Authorised 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. The 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 lodgment 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.
 - (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
 - (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



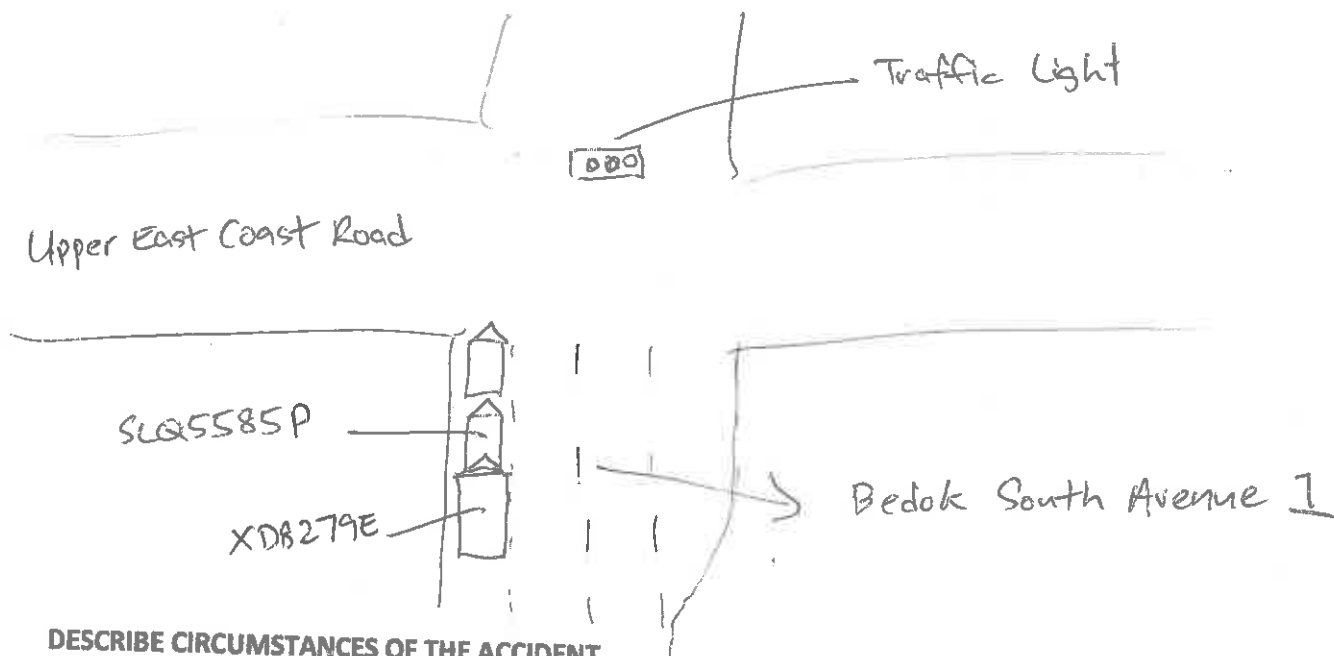
Policyholder's Signature Date
& Time:

Driver's Signature
(If driver is not the policyholder) Date
& Time:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Date: 9 January 2023 Time: 1454 hrs

Travelling along Bedok South Avenue 1 (north direction) and stopped at the traffic light junction of Bedok South Avenue 1 and Upper East Coast Road (Red Light). When preparing to move off from the traffic light junction (on green light), I heard a bang and felt the car jerk forward. I checked my rear view mirror and noticed that a Scania lorry has hit my car from behind. I exited my car and saw the Scania driver exit the car as well. We exchanged particulars, took photos and videos, exchanged contact numbers, and moved away from accident site.

Particulars exchanged: Car plate: XD8279E Driver Name:
Wang Xigang
(668893242)

No injuries reported at site.

* Kindly take note that you have 14 days to revert to Own Insurance Claim (own damage).

Claim OD / TP At NPH

Claim OD / TP Own W/shop

Reporting Only

DECLARATION

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

Policyholder's Signature Date
& Time:

Driver's Signature
(If driver is not the policyholder) Date
& Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Information

1 Date of Accident : 09/01/2023 Time(base on 24hrs): 1454
2 Location : Traffic light junction of Upper East Coast Rd & Bedok South Ave 1
3 Weather condition : Clear / Rain Road Surface : Dry / Wet
4 Claiming under : Own Damage _____ Third Party ☒ Reporting Only _____
5 Injuries : Yes ☒ No _____ Type Of Collision : Head to rear. 3rd Party hit insured
6 Witness Name / Hp : _____
7 Police Report : Yes ☒ No _____ Which Station : _____

VEHICLE A

Vehicle No : SLQ5585P Model : Mazda 3
Policy Holder Name : Tang Han Wei
Policy I/C No. : S87244546 Contact : 96644125
Policy Address : 222A Bedok North Drive #13-22 Singapore 461222
Policy No. : MP 320428 Cover : Comp / 3rd pty / Fire n Theft
Insurance Company : HL Assurance No Of Pax 1 (including Driver)
1) Tang Han Wei Sex(☒ Male / Female)
2) _____ Sex(Male / Female)

Driver Particulars

Name : Tang Han Wei NIRC S87244546 DOB: 18/08/1987
Address : 222A Bedok North Drive #13-22 Singapore 461222
Pass Date: 29/05/2006 Gender : ☒ Male / Female Occupation: ☒ Indoor / Outdoor
Contact : HP 96644125 Office _____ Home _____
Email tanghw@gmail.com Relationship: Spouse/Children/Friend/Relative
Employee/ Hirer/Parent/Sibling

VEHICLE B : XD8279E Model: _____ Insurance : _____
Driver Name : WANG XIGANG I/C No. : G6889324R
Contact No. : 88530093