

TP INSURER: Allianz Insurance Singapore Pte. Ltd. (HQ)

Singapore

PARTICULARS OF CLAIM

Claim Type:	Third Party	Ref. No:	
Policy No:		Date of Loss:	14/01/2023
Vehicle Reg. No.:	SLZ6448Z	Driveable?	
Party At Fault:	UNKNOWN		
Driver (TP):	Roger Valentin		
Make/Model:	HONDA ODYSSEY, 2.4 EXV-S CVT SR (A)	Vehicle Reg. Date:	14/05/2018
Vehicle Colour:	Black	Chassis No:	JHMRC1890JC201714
Engine No:	K24W72400913		
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	8 <i>4 days</i>		
Remarks:	VEHICLE IS IN		
Present Location:	CITY AUTO PTE LTD (HQ)		

*Not Authorized
Return By pain*

COST OF CLAIMS	Amount
Parts	1,886.50
Miscellaneous Items	0.00
Labour	1,450.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (\$\$)	3,336.50
+ GST 8.00% (\$\$)	266.92
Nett Amount (\$\$)	3,603.42

This claim is handled by: VRONICA

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 18 Jan 2023)
Parts: M1-SUV HONDA ODYSSEY 2.4 EXV-S CVT SR (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: City Auto Pte Ltd/SLZ6448Z/18/01/2023 10:41
Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount	
1	1		*Rear bumper	0.00	0.00	Bu *550.00 F	✓
2	1		*Rear bumper retainer	0.00	0.00	DIY *45.00 F	✓
3	1		*Rear bumper parking sensor	0.00	0.00	SCR *145.00 F	✓
4	1		*Rear bumper rad reflector	0.00	0.00	R *55.00 F	X
5	1		*Rear bumper side chrome	0.00	0.00	SC *155.00 F	✓
6	1		*Rear RH fender	0.00	0.00	R *480.00 F	X
7	1		*RH taillamp	0.00	0.00	R *285.00 F	X
Sub Total (\$\$)						1,715.00	
+ Margin on L,N Items 10.00% (\$\$)						171.50	
Total Parts (\$\$)						1,886.50	

F=Franchise part.

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- 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 is allowed
 - Supplementary item(s) must be surveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	- To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts	New	600.00
2	- Spray painting on affected and replace parts	New	850.00
Gross Labour Cost (\$\$)			1,450.00

600
850

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< END OF ESTIMATES >

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 17/01/2023 16:02 (SGT)
Reported by Driver
Date of Accident 14/01/2023 09:28 (SGT)
Exact Location of Accident Singapore
Additional Location Information HILL STREET
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ6448Z

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SAN'S TOURS & CAR RENTALS
Company Reg No - 0251630016
Email Address PETER@SANSTOURS.COM.SG
Mobile Phone No (Phone) +65-91296007
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Honda
Model Odyssey
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 1800

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number D22MTRENT000680

DRIVER

Name of Driver ROGER VALENTIN
Passport No/FIN GXXXX632P
Date Of Birth 12/08/1975
Occupation Indoor

SKETCH PLAN

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

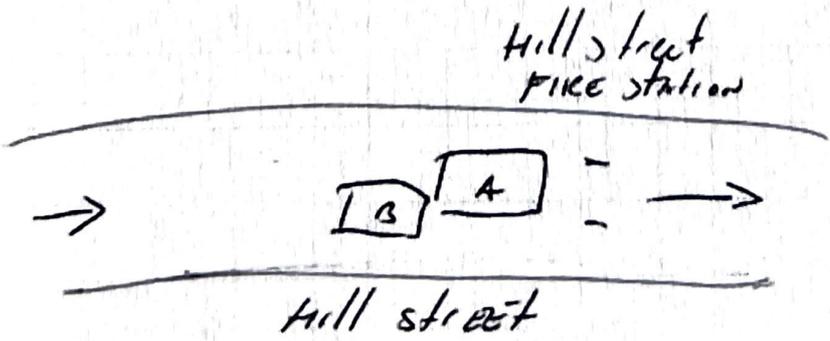
[Signature]
 Driver's Signature (if driver is not the policyholder) / Date & Time

15 Jun 23
 17:50

CITY AUTO PTE LTD
 Blk 8 Sin Ming Road
 #01-58/60/62 Sin Ming Ind Est
 Singapore 575643
 Tel: 6453 1235 Fax: 6453 7944
 (Claims Section)

Witnessed by Reporting Centre Personnel

Sketch Plan



A - SLZ 64432

B - SMG 5810E