> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

01 Feb 2023 / 11:20:25

Receipt Date/Time: 01 Feb 2023 / 11:20:25

Tax Invoice/Receipt

Receipt No.: ITNET-00000-230201-001154

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHD7155A As at 31 Jan 2023/14:45:00 Insurance Co: AXA INSURANCE PTE LTD				
1 Insurance Enquiry - SHD7155A Enquiry Fee 20230201111922713908		24.77	1.98	26.75
	Sub-Total	24.77	1.98	26,75
	Total Before Rounding	24.77	1.98	26,75
	Rounding Difference			0.00
	Total Amount Payable Paid By			26.75
Sec. Sec.	450898XXXXXX6673	eNETS	Credit Card	26.75
	Total			26.75
	Cash Change			0.00
	Tendered Amount			26.75
,	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

J-MART MOTOR PTE LTD

Block 5, Defu Lane 10, #01-578, Defu Industrial Park C, SIngapore 539186 Tel: 6343-0934 Fax: 6343-0921

> Email: jmartauto@gmail.com Registration No: 201400246D GST Reg. No: 201400246D

RE: estimate cost for vehicle no: SLE 928E

Bal brought forward:	\$	10,127.90
Panel beating.		1,500.00
Spray painting.		1,500.00
Transfer tailgate fitting.		80.00
Remove & refit rear w/screen.		120.00
Upholstery.		120.00
Rust proofing.	No.	80.00
Wiring.		30.00
Sec. 5-	- de	13,557.90
	Plus 8% GST	1,084.63
		14,642.53

SD: Fourteen thousand six hundred forty-two & cents fifty-three only.

J-MART MOTOR PTE LTD

Block 5, Defu Lane 10, #01-578, Defu Industrial Park C, SIngapore 539186 Tel: 6343-0934 Fax: 6343-0921

> Email: jmartauto@gmail.com Registration No: 201400246D GST Reg. No: 201400246D

2-Feb-23

Our ref: TP/5229/23

Ng Chong Mon

RE: estimate cost for vehicle no: SLE 928E

l pc	tailgate		\$	1,700.00	
1 pc	logo emblem			72.20	
1 pc	Estima emblem			47.00	
1 pc	Aeras emblem			55.00	
1 pc	tailgate lock			475.00	
1 pc	tailgate w/strip			355.00	
1 pc	tailgate trimboard			596.60	
1 pc	rear bumper	100	WIT.	685.00	
2 pcs	rear bumper retainer long			120.00	
2 pcs	rear bumper retaienr short			110.00	
1 pc	rear bumper tow hook cover			32.40	
2 pcs	rear bumper reflector			130.00	
8 pcs	rear bumper clips			40.00	
2 pcs	taillamp			896.80	
1 pc	tailgate centre reflector		5.70	398.00	
2 pcs	tailgate reflector rh lh		879.2	857.20	
1 pc	end panel			860.00	
1 pc	end panel inner garnish top			275.00	
1 pc	end panel inner garnish lower			209.70	
1 pc	rear bumper sponge			110.00	
2 pcs	rear fender inner trim			1,997.00	
1 pc	spare tyre cardboard			1,165.00	
1 pc	spare tyre panel			957.00	
l pc	key lock sensor			155.00	
1 pc	power gate switch			178.30	
				12,477.20	
		less 25%		3,119.30	
				9,357.90	•
1 pc	rear w/screen gum			50.00	snett
1 pc	rear w/screen seal			30.00	
1 pc	reverse sensor			250.00	
1 pc	rear no plate			40.00	
l pc	camera			400.00	
-				10,127.90	•

nas then	stopped so I fellowed sout but uch
Pailed	to brate in time but onto my veh rear
rtion.	
	- 19 of 18 April 19 A
2	

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

Driver's Signature (if driver is not the policyholder) / Date 8. Time

Witnessed by Reporting Centre Personnel (Name as in NRIC10 card)

SKETCH PLAN

- 1. Please report correctly the details of the accident to speed up the claims provens.
- This Form must be completed by the Po cyholder and/or the Actual Driver.
- 3. Information provided must be as truthful and accurate as obtaining. Any wiful misropresentation or withholding of material facts may allow insurance companies to repudiate notice liability.
- 4. The Issue and acceptance of this Form by insurance companies is not an admission of golloy fieldity on the part of the insurance companies
- 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.
- By the lodgement of this report to the insurers, you handly consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 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(a) of:

(i) precessing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to

- (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, stalaments, 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.

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

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

Skelch Plan

INJURED PERSONS DETAILS

INJURED 1

Name of injured person NG WEI HOU Gender Male Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SLE928E Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? Νo

INJURED 2

Name of injured person NG CHONG MON Gender Male Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SLE928E Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? No

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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

Collision - Head to Rear

Raining

28/12/2016

Male

310247

No

No

Child

6 YEARS AND 1 MONTH

ngweihou@yahoo.com.sg

BLK 247 KIM KEAT LINK #04-39

(Phone) +65-91149041

Wet

No

Yes

No

2

No

Yes

2

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

PASSENGER 1

Name

Gender

NG CHONG MON

Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

If yes, against whom?

No

No

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH

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

SHD7155A

Accident report SJ0E23210002

Page 2 of 19

SJ0E23210002 / Jin Auto Services Pte Ltd ENTRY DATE & TIME: 01/02/2023 12:11 (SGT) SUBMITTED BY: Lim Hong Guo VERSION: 1 (01/02/2023 12:55 (SGT))



SINGAPORE ACCIDENT STATEMENT

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.

- The issue and acceptance of this Form by Insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 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

01/02/2023 12:11 (SGT)

Driver

31/01/2023 15:30 (SGT)

PIE, Singapore

TOWARDS CHANGI

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLE928E

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No Email Address

Mobile Phone No Alternative Phone No No

NG CHONG MON

S2589748Z

ngweihou@yahoo.com.sg (Phone) +65-96690928

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission

Toyota Estima

AERAS 2.4 CVT ABS AIRBAG 2WD

Private use

No - Claiming third party

Private car

Auto

2362

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Income Insurance Limited

5080884470-06

DRIVER

Name of Driver

NRIC No Date Of Birth

Occupation

NG WEI HOU S9817699C 30/05/1998 Indoor

