

威利摩哆 WEI LEE MOTOR WORKS

BLOCK 9 SIN MING INDUSTRIAL ESTATE #01-32,
SINGAPORE 575644.
TEL: 6456 9830 • FAX: 6458 0128
Business Regn No: 269436/00J

Not Notified
1/1/23
Heavy After Paint
4 days

03 FEBRUARY 2023

Liberty Insurance PL
51 Club Street
#03-00 Liberty House
Singapore 069428

Attn: Motor claim dept-3rd party claim
Claiming against your insured vehicle no: YM9569C
Accident involving vehicle no: SKL3146A/YM9569C
DOA: 17/01/2023 at TAMPINES ROAD

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:

Dear officer in charge
Estimate cost of repair for vehicle no: SKL3146A
To supplied:

Description	Qty	Amount
Rear bumper	1	482.00
Rear bumper retainer	2	145.40
Rear bumper enforcement	1	117.50
Rear bumper reflector	2	74.40
Lid	1	754.30
Lid lock	1	96.50
Lid reflector	2	116.60
Lid chrome handle	1	332.98
Lid - 1.6 emblem	1	32.10
Lid - vvti emblem	1	38.40
Lid - corolla emblem	1	45.00
Lid - elegance emblem	1	44.10
Boot weatherstrip	1	175.35
Spare tyre panel	1	702.90
End panel	1	581.20
End panel top garnish	1	185.20
Tailamp	2	563.80
Parts		
Parts less 25%		4,487.73
		3,365.79

1. Reverse sensor
2. Remove damaged parts & attachments
Cut/weld damaged panel
Repair dented area
Replace/realign all parts into same position
3. To spray paint

CM 220.00 2000

1,100.00

5000

1,000.00

6000

5,685.79

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 11:22 (SGT)
Reported by Driver
Date of Accident 17/01/2023 07:40 (SGT)
Exact Location of Accident Singapore
Additional Location Information TAMPINES ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKL3146A

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner KH LEASING PTE. LTD.
Company Reg No 201611813C
Email Address KAHUPLASING@GMAIL.COM
Mobile Phone No (Phone) +65-90690032
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model COROLLA ALTIS
Variant -
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 1600

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5129566682

DRIVER

Name of Driver GOH CHENG HONG
NRIC No S6907195C
Date Of Birth 24/02/1969
Occupation Outdoor

SKETCH PLAN

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 willful misrepresentation or withholding of material facts may allow insurance companies to revoke 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 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.
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.



17/01/2023 11:30 AM

Policyholder's Signature / Date & Time

[Signature]

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

17/01/2023 11:30 AM

[Signature]

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

ANAND JAYAN MURALI S. MANICKAVELU

Sketch Plan

	VEH A: JKL 3146A VEH B: YM 9549C
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