

ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.

Tel: 6453 8686 (3 Lines) Fax: 6459 6550

Company Reg. No.: 201113667N

GST Reg. No.: 201113667N

No. : 06767

Vehicle Insured : XE3273Z

Accident Date : 20-Feb-2023

Date : 21-Feb-2023

Our Ref : 023040 (FIRST) / CHAN

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KASNI BIN MASKIDAM

BLK 165 WOODLANDS STREET 13

#09-561

Singapore 730165

Not Authorised

1/1 Rm B

Resurvey After Paint

5 days

ESTIMATED COST OF REPAIR FOR TOYOTA VIOS SJG5701Y

- 1 pc Rear o/s door
- 1 pc Rear o/s door outer handle
- 1 pc Rear o/s door rubber
- 1 pc Rear o/s door inner lock
- 1 pc Rear o/s door protector
- 1 pc O/s door protector chrome
- 1 pc Rear o/s door glass regulator gear
- 1 pc Rear o/s door glass regulator motor
- 1 pc Rear o/s fender
- 1 pc Rear w/s glass moulding
- 1 pc O/s side skirt

R 1,122.70 ✓
DI 78.70 ✓
m 215.00 X
592.80 ?
R 109.90 ✓
m 26.90 ✓
194.80 ?
765.50 ?
R 1,250.20 X
m 97.40 X
CM 368.80 ✓

4,822.70

Less 25% : 1,205.68

- 1 pc Rear w/s glass selant

3,617.02
m 60.00 sn X

To remove & refix rear windscreen glass and conduct water leak test.

m 150.00 X

To remove roof lining, front and rear seats, trim board and carpet

120.00 *60d*

To apply undersealing

60.00 *30d*

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

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Acknowledged by Repairer

Signature:

Weekend (\$

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To putty and spray replaced parts

500
700.00

To remove, cut-out damaged parts,
panel beating, welding, align,
refix and to renew above parts

800.00 680

Total : S\$ 5,507.02

Singapore Dollars Five Thousand Five Hundred
and Seven and Cents Two Only

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 21/02/2023 11:54 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 20/02/2023 18:40 (SGT)
Exact Location of Accident 48 Pandan Rd, Singapore 609289
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJG5701Y

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner KASNI BIN MASKIDAM
NRIC No SXXXX783B
Email Address AMIRULVR@GMAIL.COM
Mobile Phone No (Phone) +65-96229744
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Vios
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 1497

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd
Policy Number / Cover Note Number DMPPHQ22-004947

DRIVER

Name of Driver KASNI BIN MASKIDAM
NRIC No SXXXX783B
Date Of Birth 24/07/1958
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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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 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.

Policyholder's Signature / Date & Time

21/2/23

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

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

Sketch Plan

Sketch Plan

Loading / Unloading Bay of
48 Pandan Road.

A = SJG 5701Y
B = XE 3273Z