ASS. REC. BY:	30019951Ky
	IGNMENT
From: Date:	Veh No: Sm2 5812 A Yr Regn: 05, 21
Estimated Cost	Type: M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD TP WS/TP RES/OD RES/EVA/INV/MY	Truck / Trailer or
To Inspect Vehicle No:	Make: Hunda Vove/ cc 1496
al Workshop m/s / / / / / / / / / / / / / / / / / /	Colour M. Gray A/C: Insured / Std / HI / NA
245n	Sp.Reading 10 Po 5 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	CANO: RUI · 1332580
Claims No.	Gen. Cond: Qood? Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inerder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NII / S/Rim / STD A/Rim or
77.7	Tyre Stee: F: Airvo 215/60R16
(Policy Condition)	R: Dus
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Eroni Rear
DAC Accident Rport: Consistent? : Yes or No	R/Bal. 7 mm R/Bal. 3 mm
GIA / PR Seen: Consistent?: Yes or No	UBal. 7 mm UBal. 3 inm
Est. Repairs: 05 days Res.: Yes or No	D.O.A. 18/2/23 D.O.I. 1/3/2023
Lum Sum: 211 % 3 Val.: Yes or No	Survey held at
	Des. of Damages Fit   Rear   O/S   N/S   U/C   Rooftop or
CA / REV / REP. / 24 HRS  Vehicle: IN / OUT	Des. of Daniages FTT 1 Rear 1 OIS 1 NIS 1 UIC 1 ROOMOP OF
Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	L
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Was -	
Date/Time, File Pass to? Prell. Report D	ays Of Repair:
i) : Final Report Re	esurvey No. of Trip: Survey Fee:
Outs/Time, File Return to?	Transportation
Add Fee:	: Site Insp (\$ )_s-Rs_si
	Interview (\$ ) First
Papart Format	
Report Format:	Tech Invs (\$ ) Others
Lump Sum / I.B.I: (S	Weekend (\$

## 辉陽汽車有限公司

LKK 01/03/23

### HUI YANG MOTOR PTE. LTD.

Contact Add: SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721

Tel: 64515752 (2 Lines) . Fax: 64514658

GST Reg No. 201629438M

18/02/2023

Prenny Afte Pains
5day,

#### Owner:

GRAVITY CAR LEASING PTE LTD

### ESTIMATE TO REPAIR HONDA VEZEL HYBRID - SMZ5812A

<u>ESTIM</u>	ATE TO REPAIR HONDA	V CEBE II Z		
1.00	front bonnet		\$ 1,125.00	
1pc	front bonnet hinge @\$85.5	50	nii \$ 171.00 —	
2pcs	front bonnet inner rubber		% \$ 150.50 X	
lpc	front bonnet inner lock		Dil \$ 395.20	
1pc	front bonnet inner lock bra	acket	\$ 78.50 <b>7</b>	
1pc	1.5		5 cm \$ 5,161.00 —	
2pcs	front headlamp @\$2580.5		\$ 371.00 7	
2pcs	front headlamp chrome @		\$ 90.00 7	
2pcs	front headlamp top bracke		\$ 110.00 7	
2pcs	front headlamp lower brace	cket @\$55.00	cm \$ 550.20 —	
1pc	front centre grille base		cms 420.50	
1pc	front centre grille outer ga		cm <sub>\$</sub> 68.50	
1pc	front centre grille "HONI	DA" logo	<b>B</b> \$ 951.70 —	
1pc	front bumper		Me \$ 50.00 -	
10pcs	front bumper clip @\$5.00			
2pcs	front bumper side retaine	r @\$65.60	nn \$ 131.20	
1pc	front bumper lower lid		\$ 450.30 X	
1pc	front bumper lower grille		\$ 280.50 X	
· -	front bumper reinforcement		\$ 368.80 7	
1pc	front fender @\$680.50		* \$ 1,361.00 X	
2pcs	front fender protector @	\$285.50	5 571.00 x	
2pcs	The state of the s		\$ 681.20	
1pc	front support panel		cm \$ 385.20	
1pc	front support panel top ga	arnish	P∽ \$ 950.20 ×	
1pc	front air-con condensor	LKK Auto Consultants hence notif	5 1 150 20 Å	
1pc	front radiator	uie Repairer of the following:	\$ 1,150.20 A	
		<ul> <li>To resurvey before/after spray painting</li> </ul>		
		<ul> <li>To display damaged part(s) during resun</li> </ul>	\$ 16,022.70	
	1 200/	Parts prices are subject to confirmation     Third party suppose an accordance to the party suppose are supposed to the party s	\$ 3,204.54	
	less 20%	<ul> <li>Third party survey is on a "Without Prejute</li> <li>No illegal modification(s) is allowed</li> </ul>	\$ 12,818.16	
		Supplementary items) must be resurrouse	ad and	
		is subject to final approval from Insurance	e Company 50 50	`^
1set	front number plate & ca	Sing Acknowledged by Repairer	s.het \$ 50.00 P	
		Signature:		
		Date:	0.4	,
	ima		\$ 100.00 200 \$ 120.00 300	
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	tuffkote		Ra	-

tuffkote spray painting labour charges

Total



\$ 1,000.00 \$ 1,000.00

\$15,088.16

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process.

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

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 Mana. and that copies of this report will, for a fee, be made available upon applic

7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the

#### ACCIDENT STATEMENT

Date of Submission Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

21/02/2023 17:57 (SGT) Both Policyholder and Actual Driver 18/02/2023 22:40 (SGT) 55 Jln Lokam, Singapore 537887

Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SMZ5812A

#### INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

Yes Gravity Car Leasing Pte Ltd 202112245W hyms@live.com.sg (Phone) +65-83336725

#### 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** CC

Honda Vezel

Private hire

No - Claiming third party Private hire Auto 1500

**INSURANCE COMPANY** 

Name of Insurance Company Policy Number / Cover Note Number

Etiqa Insurance Pte Ltd M0016926

DRIVER

Name of Driver **NRIC No** Date Of Birth Occupation

Samsu Adumai Hakkim S8572260C 30/12/1985 Outdoor

# SKETCH PLAN

# IMPORTANT NOTICE

- Please report correctly the details of the accident to spood up the claims process
- This Form must be completed by the Polloyholder and/or the Actual Driver.
- Information provided must be as <u>Inuthial and accurate as possible</u>. Any wilful misropresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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 Traffic Police Department for investigation.

  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 ladgement 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

understand, acknowledge, agree and consent that:

- government agency/authority (such as the police), for the purpose(s) of collectively referred to as the "Insurers"), the insurers' lawyers law firms, the Monetary Authority of Singapore and any relevant who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be (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 the or sed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s)
- (i) processing, 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:
- packages); and/or disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopesimal (w) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- use, disclose and/or process my Personal Information for one or more of the above Purposes; and (b) all issurer(s) who have insured vehicle(s) involved in this accident and the insurers' buyyers/law firms, may/are permitted to collect
- (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third-party service providers or agents

Sketch Plan 1 ELB 2013 & Time Driver's Signature (if driver is not the policyholder) / Date 2 1 FEB 2023

Witnessed by Reporting Contre Personnel (Name as in NRICAD care)

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