HOCK WAH MOTOR WORKSHOP PTE LTD

BLK 3011 BEDOK INDUSTRIAL PARK E
BEDOK NORTH AVE 4,
#01-2008/10/12 SINGAPORE 489977
TEL : 6441 5655 FAX : 6441 5355/6243 8121
R.O.C No : 200104141D GST Reg. No. 20-0104141-D

ESTIMATE BILL

TO : 90706633
NELSON WONG CHOON SIEN
BLK 101 CASHEW ROAD
#10-02
SINGAPORE 679672
TEL : FAX :
PH : 90706633
ATTN :

Term:

Number : EB00006241
Date : 21/03/2023
Case No : AD00013737
Vehicle No : SDR988H
Chassis: WAUZZZ4G5HN02108
Year of Mfr 2016
Policy No 5119650337-02
Model : AUDI A6 1.8 TFSI ULTRA (PI) (NAV)

Sn	DESCRIPTION	QTY	U_PRICE	DISC	AMOUNT
1	FRONT DOOR RH	1.0	2,532.15	0	2,532.15
	List Price - Parts Sub Total				**2,532.15**
	Parts Total				**2,532.15**
2	LABOUR TO REMOVE & REFIT NECESSARY PARTS	1.0	300.00	0	300.00
3	SPRAY PAINT ON THE AFFECTED AREAS	1.0	300.00	0	300.00
4	ANTI-RUST COATING	1.0	80.00	0	80.00
	Labour 1 Sub Total				**680.00**

SINGAPORE DOLLARS : THREE THOUSAND FOUR HUNDRED SIXTY-NINE AND CENTS TWELVE ONLY

Less Excess	0.00
SUBTOTAL	3,212.15
GST 8.00%	256.97
TOTAL	**3,469.12**

Date of accident : 18/03/2023 04:00 PM. Place : 20 Merchant Rd, Singapore 058281

E. & O. E.

HOCK WAH MOTOR WORKSHOP PTE LTD

CUSTOMER SIGNATURE

AUTHORISED SIGNATURE

* N = Item not subjected to GST

Issued by : Anysia

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 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.
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	20/03/2023 15:34 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	18/03/2023 16:00 (SGT)
Exact Location of Accident	20 Merchant Rd, Singapore 058281
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDR988H

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NELSON WONG CHOON SIEN
NRIC No	SXXXX855D
Email Address	CHOONSIEN88@GMAIL.COM
Mobile Phone No	(Phone) +65-90706633
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A6
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	1798

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5119650337-02

DRIVER

Name of Driver	NELSON WONG CHOON SIEN
NRIC No	SXXXX855D
Date Of Birth	09/06/1970
Occupation	Indoor

Date Of Driving Pass	16/09/1993
Driving experience	29 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90706633
Alt. Phone Number	-
Email Address	CHOONSIEN88@GMAIL.COM
Address	101 CASHEW ROAD #10-02
Address complement	-
Postcode	679672
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	IRENE TAN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON THE STATED DATE AND TIME AT THE SAID LOCATION, I WAS EXITING FROM MERCHANT COURT HOTEL AND SUDDENDLY I SAW VEHICLE B(SDP111Y) WAS COMING IN FROM THE OTHER SIDE WHICH IS ILLEGAL ENTRANCE. I STOP MY VEHICLE AS HE WAS ABOUT TO COLLIED INTO MY VEHICLE . THE OTHER DRIVER REVERSED HIS CAR AND MOVE FORWARD AGAIN THUS RAMMING INTO MY CAR . ALL THS WHILE MY VEHICLE WAS STATIONARY . HIS FRONT BUMPER RAMMED INTO MY DRIVER SIDE FRONT DOOR. THERE IS NO DAMAGE ON THE OTHER DRIVER FRONT BUMPER .

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	CANNOT UPLOAD

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDP9111Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN HENG LOONG, JOEL(CHEN XINGLONG)
NRIC No	SXXXX742A
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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")

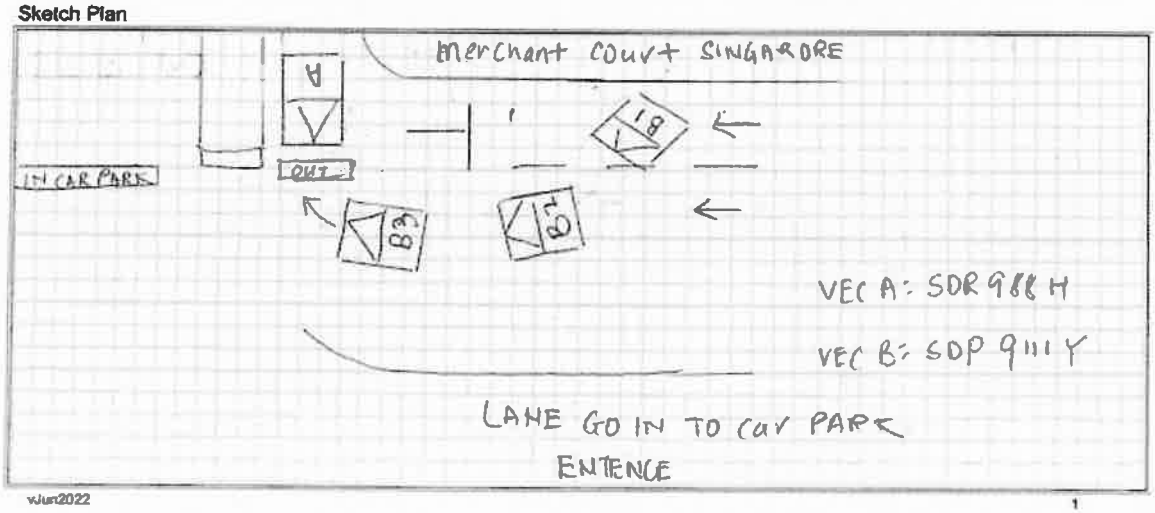
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

HOCK WAH MOTOR WORKSHOP PTE LTD
Reg. No. 200104151D

Policyholder's Signature / Date & Time	Actual 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 #2

Describe Circumstance of the Accident

REFER TO GIA REPORT

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a Fourteen (14) days clause whereby the claim must be made within the stipulated time-frame from the day of occurrence.

	Reporting Only
	Claim OD
✓	Claim TP
	Claim OD/TP at other workshop

Declaration

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

HOCK WAH MOTOR WORKSHOP PTE LTD ★ Reg. No. 200104141D

Policyholder's Signature / Date & Time

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

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

vJun2022

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