# 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.: 06797

600.00

Vehicle Insured : SNJ9873U

Accident Date : 30-Mar-2023 Date : 30-Mar-2023

Our Ref : 023070 (III) / CHAN PAGE : 1

FAIRWAY LIMOUSINE NETWORK PTE LTD

BLK 155 SIMEI ROAD

#02-206

Singapore 520155

ESTIMATED COST OF REPAIR FOR M/BENZ VIANO CDI2.2EL PC6565S

 1 pc
 0/s headlamp
 2,058.00

 1 pc
 Front o/s fender
 774.00

 1 pc
 Front bumper fascia
 1,092.00

 1 pc
 Front bumper reinforcement
 969.00

1 pc Front o/s bumper side retainer 68.00 1 pc Front o/s bumper lower grille 58.00 1 pc Front bumper ctr lower grille 78.00

1 pc Front bumper ctr lower grille /8.00 1 pc Front grille 459.00

> 5,556.00 Less 10%: 555.60

Hess 100 . 555.00

1 pc Front no.plated with box 50.00 sn

To putty and spray replaced parts 700.00

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

To rewire damaged parts and refocus

headlamp beam. 60.00

Total : S\$ 6,410.40

Singapore Dollars Six Thousand Four Hundred and Ten and Cents Forty Only

SC1N233U0002 / City Auto Pte Ltd ENTRY DATE & TIME: 30/03/2023 13:17 (SGT) SUBMITTED BY: Jason Quak VERSION: 1 (30/03/2023 13:17 (SGT))



## 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
- 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 30/03/2023 13:17 (SGT) Reported by **Actual Driver** Date of Accident 30/03/2023 09:25 (SGT) \_xact Location of Accident Singapore Additional Location Information SIMEI ROAD Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number PC6565S

### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner FAIRWAY LIMOUSINE NETWORK PTE LTD Company Reg No 2XXXXX662H **Email Address** TAYPENGCHER@GMAIL.COM Mobile Phone No (Phone) +65-96890025 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer Mercedes Model Viano Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 2143

### INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 50111906770-02

### DRIVER

Name of Driver TAY PENG CHER NRIC No SXXXX110G Date Of Birth 11/11/1960 Occupation Outdoor

Date Of Driving Pass 07/09/1978 Driving experience 44 YEARS AND 6 MONTHS Gender Male Mobile Number (Phone) +65-96890025 Alt, Phone Number Email Address TAYPENGCHER@GMAIL.COM Address BLK 155 SIMEI ROAD #02-206 Address complement Postcode 520155 Is the driver the policyholder? No If No. Relationship of the Driver with the Insured OWNER 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 Chain Collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No 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? Yes Number of Passengers (Including Driver) 1 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 DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? No yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No DETAILS OF OTHER VEHICLE PROPERTY 1 Vehicle Registration Number SNJ9873U Vehicle Manufacturer Vehicle Model Vehicle Variant

Private car

Name of Driver

Vehicle Colour
Vehicle Category

Contact Number

Address	-
Address complement	-
Postcode	-
Insurance Company Name	920
Nature Of Damage	:4
Details of property damaged in accident	:4:
No. Of Passenger (Including Driver)	(=)

### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLP1515Z
Vehicle Manufacturer	-
Vehicle Model	5 <u>2</u> -
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	11 <del>-</del> 1
Contact Number	9. <del>7</del> 1
Address	-
Address complement	-
Postcode	843
Insurance Company Name	2 <b>-</b>
'ature Of Damage	( <del>-</del>
Details of property damaged in accident	1:=:
No. Of Passenger (Including Driver)	15

### SKETCH PLAN

### IMPORTANT NOTICE

- 3. Please report correctly the details of the accident to speed up the claims process
- 2. This Form must be completed by the Policyholder and for the Astual Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wiful misrepresentation or withholding of material facts may allow insurance companies to regudate 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 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 aforesaid.

### § Consent under the Personal Data Protection Act (POPA)

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 vehicless) 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 retailing to the claims.
- (ii) investigating the accident and/or my claims;
- (ia) 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/matt nackages transfer
- (v) complying with applicable law in administering, processing, handling analor dealing with my claims.

### (collectively the Purposes)

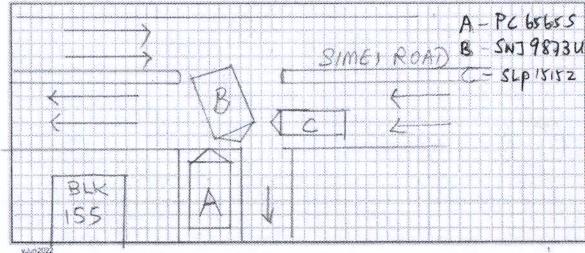
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers law firms, may late permitted to collect. use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents finduding their lawverstaw firms), which may be sited existed of Sindapore, for one or more of the above Purposes

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

CITY AUTO PTE LTD 8th 8 Sin Ming Road #01-58/60/62 Sin Ming Ind Est Singapore 575643 Tel: 6453 1235 Fax: 8453 7844

Witnessed by Republing Celling Refsonce (Name as in NRIC/IO card)

Sketch Plan



Describe Circ	cumstance of the	Accident						
0N VEHIC	30-03-	2023 K	T ABOUT	09.25 A	m tromk	1 STOP	PED M	1
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Declaration

the foregoing particulars are true in every respect.

CITY AUTO PTE LTD

Bit 8 Sin Ming Road

#01-58/00/22 Sin Ming had Eat
Singapore 57/50/23

Tel: 64/50 1/235 Fax: 64/53 79/44

ider's Signature / Date & Time Actual Diver's Signature (8 driver is not the policyholder) Witnessed by Reporting Centre Versonnel (Name as in NRIC/ID card)

KAMBORK

### Register New Vehicle (Acknowledgement)

### Vehicle Particulars

Vehicle No.:

PC6565S

Vehicle Type:

Z20 - Private Hire (Chauffeur)

Bus/Coach/Minibus

Air-Conditioned

Public Service Vehicle (Others)

Vehicle Attachment 1:

Vehicle Attachment 2:

Vehicle Attachment 3:

Vehicle Make:

MERCEDES BENZ

Vehicle Model:

Vehicle Scheme:

VIANO CDI2.2 EL

Chassis No.:

WDF63981523715499

Engine No.:

65194030943404

Motor No.:

Trailer Chassis No.:

Propellant:

Diesel

Passenger Capacity:

9

Engine Capacity:

2143 cc

Power Rating:

Unladen Weight:

2340 kg

Maximum Laden

3050 kg

Primary Colour:

Grey

Weight: Secondary Colour:

Date:

First Registration Date:

25 Apr 2012

Original Registration

25 Apr 2012

Manufacturing Year:

2011

Open Market Value:

\$45,422.00

PARF Eligibility:

No

Minimum PARF Benefit: \$0.00

No. of Transfers:

0

Owner Particulars

Owner Name:

FAIRWAY LIMOUSINE NETWORK

PTE LTD

Owner ID Type:

Company

Owner ID:

201120662H

Registered Address

HDB / HUDC

Type:

Registered Block/House

No.:

Registered Street

Registered Unit No.:

Registered Building

Registered Postal

Code:

COE No. / Expiry Date: 2012030105000118G / 24 Apr 2022

COE Bid Category:

C - Goods Vehicle & Bus

QP Paid:

\$49,801.00

**Transaction Details** 

**Business Transaction** 

20120425092932358120

Ref. No .:

**Business Transaction** Date:

25 Apr 2012

**Business Transaction** 

09:29:32

Time: Message

The above vehicle has been successfully registered.

Please note that \$42,851.00 will be deducted from your GIRO account.

OK



14:1550244106