ASS. REC. BY: REF: C12/	1
Menneth	SIGNMENT
From:	C 2 0- 2 12 -0
Cost:	Times II Con III Out a Day 11/2 II and Toul I Day 11
OD VIP WS / TP RES / OD RES / EVA / INV / MV	Yand 17
Agura Agura MO.	Make: Merd 9 5 c.c 1998
at Workshop m/s /C/C/1/1 N	Colour M. Ac.: Insured / Std / NI / NA
Of	Sp.Reading //3033 T/Radio: Insured / Std / N1 / NA
Insured:	Eng/No:
Policy No.	CNO: JM 6 CR 10 F 290 30 8951
Claims No.	Gen. Cond: Good Fair / Poor / Burnt
Sum Insured: Excess:	Sleering: Inorder Jammed / Leaked / Burit or
(Client's Record)	Brake: Ingree / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NII / S/Rim / ST/D A/Rim or
	Tyre Size: F: 205/55 R16
(Policy Condition)	R:
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
IDAC Accident Rport: Consistent? : Yes or No	R/Bail. & mm 'R/Bail. & mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. B mm
Est. Repairs: 4-5 days Res.: Yes or No	D.O.A. 2/5/23 D.O.I. 3/5/2023
Lum Sum: 20 % 3 Val.: Yes or No	Survey heid at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date:Person Contacted: Vehicle: IN / OUT	· ore / tag / ore / resolution of
Date / Time Action / Instruction	The U/C / Chasals frame / Body Structure affected due to collision.
7100017 110000001	
- / CAA NOT rady	
R	
11,	
Oste/Time, File Pass to?	
Day Preil. Report	ys Of Repair:
Usta/Time, File Return to?	survey No. of Trip: Survey Fee:
,	Transporation
Add Fee:	Citation 18
<i>_</i>	Intendeur /s
Report Format :	Tech love (\$
Lump Sum / I.B.I: (\$	
The second of th	Weekend (\$
	10.TAL

FIT ES OF TO at of In: Pr C S

金興(龔)汽車私人有限公司

K. KIM HIN AUTO PTE LTD

160 Sin Ming Drive #02-18/19/20 Sin Ming AutoCity Singapore 575722 Tel: 6452 7018 (5 Lines) Fax: 6458 3895 Not Nothern USmy 8 Menory After Pains Adam

No.: 32908

Date: 03-May-2023

PAGE: 1

Vehicle Insured : GBL 5312 E Accident Date : 02-May-2023

Our Ref : 023240 (CHINA) / THERESA

NG KOK HENG (MR)

Singapore

ESTIMATED COST OF REPAIR FOR MAZDA 5 (1999CC) (2008) SJL9085P

1			Bu 994.30
		rear bumper	040.00 \$
2	pcs	rear bumper side skirting	@ S\$420.00 Pm 840.00 X
		(LH/RH)	MIDICION ON 1 X
2	pcs	rear bumper side retainer	@ S\$ 51.00 Als Dii 102.00 27
		(LH/RH)	
2	pcs	rear bumper side bracket	@ S\$ 43.00 Mani 86.00 Lt
	_	(LH/RH)	
10	pcs	rear bumper clips	@ S\$ 4.80 Mz 48.00
		rear bumper reflector (LH/RH)	@ S\$ 53.00 In 106.00 X
1		rear bumper sponge	150.00 7
1		rear bumper reinforcement	227.00 7
_			N 510.70 x
1		rear end panel	/n 138.00 X
1		rear end panel top garnish	~ 3,197.30 X
	рc		
2	pcs	tailgate hinges (LH/RH)	
2	pcs	tailgate damper	
1	pc	tailgate lock	356.80 ?
1	рс	tailgate lock catch	× 48.00×
1	рс	tailgate outer handle	~ 79.00 X
1	рс	tailgate inner trim	161.20 x
1		tailgate weatherstrip	5 187.40 X
1	рс	tailgate logo	Ma 71.90 -
1	pc	tallgate logo	ne 42.00 -
1	pc	tailgate 'MAZDA 5' emblem	Shortons 696.00 - Nn 135.00 X
1	pc	tailgate windscreen glass	NN 135 00 V
1	pc	tailgate windscreen glass	133.00 🗴
		moulding	
2	DCS	rear number plate lamp (LH/RH)	@ S\$ 72.00 144.00 X
	pcs	taillamp assy (LH/RH)	W \$1429.00 ~ 2,030.00 A
1	_	tailgate third brake lamp	1 432.00 ★
1	pc	-ar winer blade	€ 49.00 ×
1	pc	rear wiper blade	

LKK Auto Consultants hence notify

the Repairer of the following:

- To resurvey before/after spray painting Con't Page 2 ...
- 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:

金興(獎)汽車私人有限公司

K. KIM HIN AUTO PTE LTD 160 Sin Ming Drive #02-18/19/20 Sin Ming AutoCity Singapore 575722 Tel: 6452 7018 (5 Lines) Fax: 6458 3895

Vehicle Insured: GBL 5312 E Our Ref: 023240

Page: 2 No.: 32908

1 pc rear wiper arm
1 pc rear wiper motor
1 pc rear wiper screw cover

105.00 X 12 463.90 X 29.00 X

12,808.70

Less 20%: -2,561.74

10,246.96

1 pc reverse sensor
 1 pc tailgate windscreen glass sealant
 1 pc tailgate windscreen glass damping seal
 1 pc rear number plate

l pc rear number plate 1 pc record camera

1 pc rear windscreen glass solar film

To remove, cut out damaged parts, panel beating, welding, align, refix and to renew affected parts.

To focus taillamps. To check rear wiring and lighting operation.

To remove and renew rear windscreen glass and conduct water leak test.

To remove and refit rear upholstery trimming, roof lining, seats, speaker board in order to facilitate repairing works

To apply undersealing

To transfer tailgate's fittings

120.00 sn 10.00 sn 10.00 sn 10.00 sn 10.00 sn X

580.00 sn 7 1201 220.00 sn 7

> 40c1 850.00

50.00 201

120.00

No 120.00 X

m 120.00 X

100.00 601

Con't Page 3 ...

上興(集)汽車私人有限公司 K. KIM HIN AUTO PTE LTD 160 Sin Ming 12 = #02-18/19/20 Sin Wing 2 = #02-18/19/20 Sin Ming 2 = #02-18/19/20 Sin Ming 2 = #02-18/19/20 Tel: 6452 7018 (5 Lines) Fax: 6458 3895

Vehicle Insured: GBL 5312 E

Page: 3

No.: 32908

To remove and refit reverse sensor assy.

80.00

To putty and respray on affected portions.

1,100.00

Total:

s\$13,906.96

=========

Singapore Dollars Thirteen Thousand Nine Hundred and Six and Cents Ninety Six Only

Note: Amount quoted above is subject to prevailing GST at time of tax invoice.

en 2/5	1
Vydea: WA	
ACCIDENT STATEMENT	Scene Pic Owner O Driver
	O Auth Letter
Date of Accident Time (24 HRS)	Location of Accident
02 May 2023 7:50 am Tea Payoh L	or 2 going into PIE (towards Changi).
3,000	or 2 July
Vehicle Resident	
Vehicle Registration Number	SJL 9085P
Name of Policyholder	NG 100 K HENG
Full NRIC/ FIN/ Passport/ ROC (if owner is company) Address	3XXX572G
Address	
Contact Number	Hp: 96253935
	Tel:
(MUST WRITE) - EMAIL ADDRESS (compulsory)	MGKH @ HP. COM
Vehicle Make / Model	Mazda 5
Type of Vehicle 2000CE AUTO/MANUAL	Saloon MPV CRV, Van, Lorry, Bus M/cycle, Others.
Are you claiming under your own insurance policy?	Yes O No Remarks. Motorcycle
Vehicle category O Private Hire	Private Commercial
Name of Insurance Company	NTUC Inrome Front & Rear.
Type of Policy	O Comprehensive O TP Fire & Theft O Third party
Fleet Policy	O Yes O No
Policy Number	5052401167-11
Name of Driver	Same as above
NRIC/ FIN/ Passport	·
Date of Birth	Outdoor
Occupation Viv. 417	- Indoor Sates
Oriving Pass Date	/. (Clan 3)
Gender C	Male Female
Contact Number	Tel: Hp:
Address	
ddress	
(MUST WRITE) - EMAIL ADDRESS (compulsory)	*
/as driver an employee of the Insured's Company?	O Yes No
No, relationship of Driver with the Insured.	owner
o. of Passenger in vehicle (including Driver)	(그) (including Driver)
lease state Passenger Names:	Name: Na Mino Xuan Gender: M
case state i descrigor indirect.	Name: Gender:
	A second
(Single Complete Comp	Name: Gender:
chicle Number of Driver's Own Vehicle (if applicable)	and the second of the second o
surance of Driver's Own Vehicle (if applicable)	
eather Conditions	✓ Clear
ad Surface	O Wet O Dry O Others:
HER WEORNANON	AND
s there any foreign vehicle(s) involved? (Malaysia car)	⊗ No
s anybody injured in the accident?	Yes Ambulance (Yes/ No
is any other vehicle(s) or property damaged?	O No Syes
is there any video captured? (in-car camera in YOUR CAR)	\bigcirc No \bigcirc Yes (WR)
TAILS OF POLICE ACTION	
s the accident reported to the Police?	✓ No ✓ Yes
me of Police Station	Name of police station
s notice of intended Prosecution given?	✓ No ✓ Yes
so guallis whom/	

SKETCH PLAN

MPORTANT 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.
- 2. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow
- 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.

02 May 223

10.am.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

• 128

(Name as in NRIC/ID card)

Sketch Plan CUY D 0 nang