

S107 - PD
119413/23

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 | 06/02/2023 19:26 (SGT) |
| Reported by | Both Policyholder and Actual Driver |
| Date of Accident | 04/02/2023 23:30 (SGT) |
| Exact Location of Accident | Near 27 Woodsville Cl, Singapore 357775 |
| Additional Location Information | Junction of Jalan Toa Payoh & Upper Serangoon Road |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJW8012Z

INSURED/POLICYHOLDER

| | |
|--------------------------|-----------------------|
| Is company? | No |
| Name Of Registered Owner | DE SOUZA PAUL FRANCIS |
| NRIC No | S1470246F |
| Email Address | paulpaullie@gmail.com |
| Mobile Phone No | (Phone) +65-98390682 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Mitsubishi |
| Model | Lancer |
| 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 | 1599 |

INSURANCE COMPANY

| | |
|-----------------------------------|--------------------------------------|
| Name of Insurance Company | AIG Asia Pacific Insurance Pte. Ltd. |
| Policy Number / Cover Note Number | 2100508054-05 |

DRIVER

| | |
|----------------|-----------------------|
| Name of Driver | DE SOUZA PAUL FRANCIS |
| NRIC No | S1470246F |
| Date Of Birth | 01/06/1961 |
| Occupation | Indoor |

| | |
|--|-----------------------|
| Date Of Driving Pass | 20/08/1984 |
| Driving experience | 38 YEARS AND 6 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-98390682 |
| Alt. Phone Number | - |
| Email Address | paulpaulie@gmail.com |
| Address | 31 Bodmin Drive |
| Address complement | - |
| Postcode | 559630 |
| 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 | Collision - Head to Rear |
| 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? | Yes |
| Was any injured conveyed to hospital by ambulance? | No |
| 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? | Yes |
| 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 |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

While I was stationary at the above mentioned location, my car was rear ended by taxi SHD2605B. I suffered muscle pull on my back.

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 | SHD2605B |
| Vehicle Manufacturer | Toyota |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Taxi |
| Name of Driver | - |
| Contact Number | - |

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

INJURED PERSONS DETAILS

INJURED 1

| | |
|---|-----------------------|
| Name of injured person | DE SOUZA PAUL FRANCIS |
| Gender | |
| Phone No | |
| Address | |
| Address Complement | |
| Post Code | |
| Approximate Age Years Old | |
| Injuries Sustained | Muscle strain on back |
| Injured person in which vehicle? | SJW8012Z |
| Were seat belts worn? | Yes |
| Was this injured conveyed to hospital by ambulance? | No |

SKETCH PLAN

IMPORTANT NOTICE

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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.

[Signature] 6/2/23

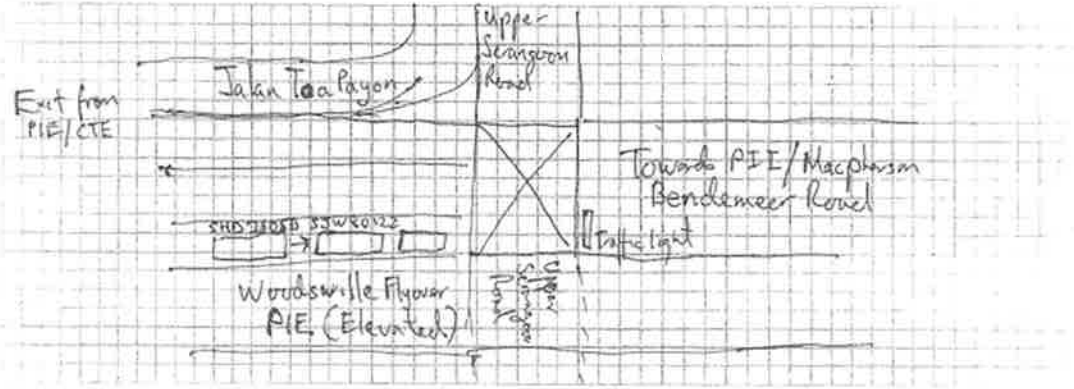
 Policyholder's Signature / Date & Time

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



 Witnessed by Reporting Centre Personnel

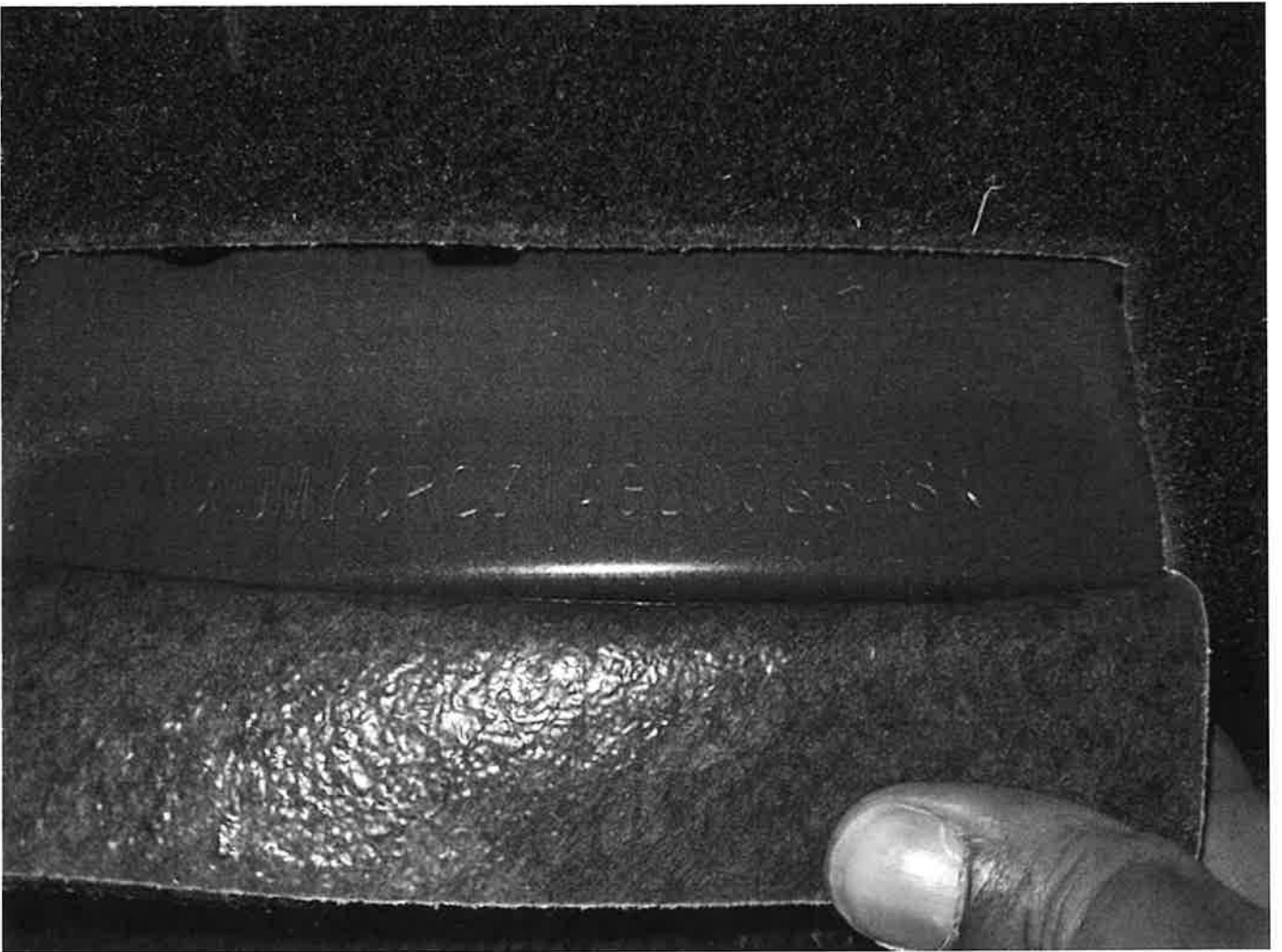
Sketch Plan



IMAGES





























RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

9 Temasek Boulevard, Suntec City Tower Two #42-01B
Singapore 038989

E-mail: gears-support@shift-technology.com

GST Registration: M400017735

TAX INVOICE

Date of Request: 08/02/2023

Your Ref No: S107-119413-23-JWW

Dear Sir/Madam,

Date of Accident: 04/02/2023 00:00 (SGT)

Vehicle No: SJW8012Z

Place of Accident: Near 12 Woodsville Cl, Singapore 357768

With reference to your application for the accident report, we have attached the following accident report as requested:

| DOCUMENTS | ACCIDENT LOCATION | PER DOC (S\$) | QTY | AMOUNT (S\$) |
|----------------------------------|---|---------------|-----|--------------|
| SHD2605B | Near 12 Woodsville Cl, Singapore 357768 | (31.00) | 1 | (28.70) |
| GST Amount | | | | (2.30) |
| Total Amount Due (GST Inclusive) | | | | (31.00) |

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.

SINGAPORE ACCIDENT STATEMENT

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ACCIDENT STATEMENT

| | |
|---------------------------------|---|
| Date of Submission | 06/02/2023 15:31 (SGT) |
| Reported by | Driver |
| Date of Accident | 04/02/2023 23:30 (SGT) |
| Exact Location of Accident | Near 12 Woodsville Ct, Singapore 357768 |
| Additional Location Information | SLIP ROAD FROM JALAN TOA PAYOH TOWARDS UPPER SERANGGON ROAD |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SHD2605B |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|--|
| Is company? | Yes |
| Name Of Registered Owner | PRIME CAR RENTAL & TAXI SERVICES PTE LTD |

VEHICLE PARTICULARS

| | |
|------------------|--------|
| Manufacturer | Toyota |
| Model | Prius |
| Variant | - |
| Vehicle Category | Taxi |
| Transmission | Auto |
| CC | 1797 |

INSURANCE COMPANY

| | |
|-----------------------------------|---------------------------------------|
| Name of Insurance Company | India International Insurance Pte Ltd |
| Policy Number / Cover Note Number | D20MFL00063752-002 |

DRIVER

| | |
|---------------------------------|---|
| Name of Driver | CHEN YUEN FATT |
| NRIC No | S1249288Z |
| Address | APT BLK 477 PASIR RIS DRIVE 6 #05-510 SINGAPORE |
| Address complement | - |
| Postcode | 510477 |
| Does Driver Own Other Vehicles? | No |

GENERAL INFORMATION OF THE ACCIDENT

| | |
|------------------|--------------------------|
| Type of Accident | Collision - Head to Rear |
|------------------|--------------------------|

Weather Conditions Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No
Was anybody injured in the Accident? No
Was any other vehicle or property damaged? Yes
Number of Passengers (Including Driver) 3
Translator's name -
Translator's ID -
Translator's phone number -
Translator's email -
Original language used in the statement -

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED STATEMENT

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 SJW8012Z
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
Name of Driver -
Insurance Company Name -

SKETCH PLAN

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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 enquires by me;
(iv) administering my claims (including the making 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.



[Handwritten signature]
6th Feb 2023
11:40 AM

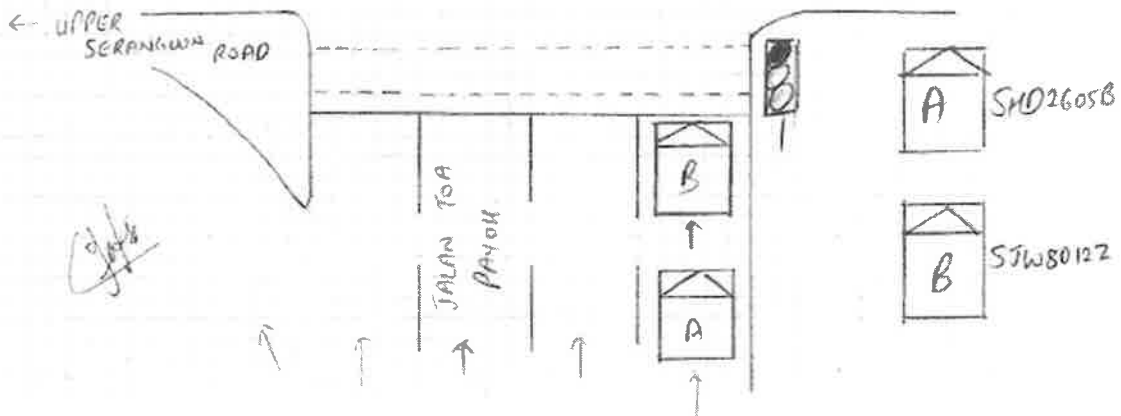
[Handwritten signature]

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 04.02.2023 @ 2330 hrs, I was driving my taxi SHD2605B with two male passengers on board along Jalan Toa Payoh on lane 1. Approaching to traffic light junction, front car SJW8012Z stopped due to red traffic light. Immediately I applied brake but my taxi collided to the rear of SJW8012Z.

After the accident, we alighted from our vehicles to check on damages and exchanged particulars. No one was injured in this accident as well as my passengers.

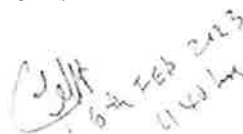


Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel

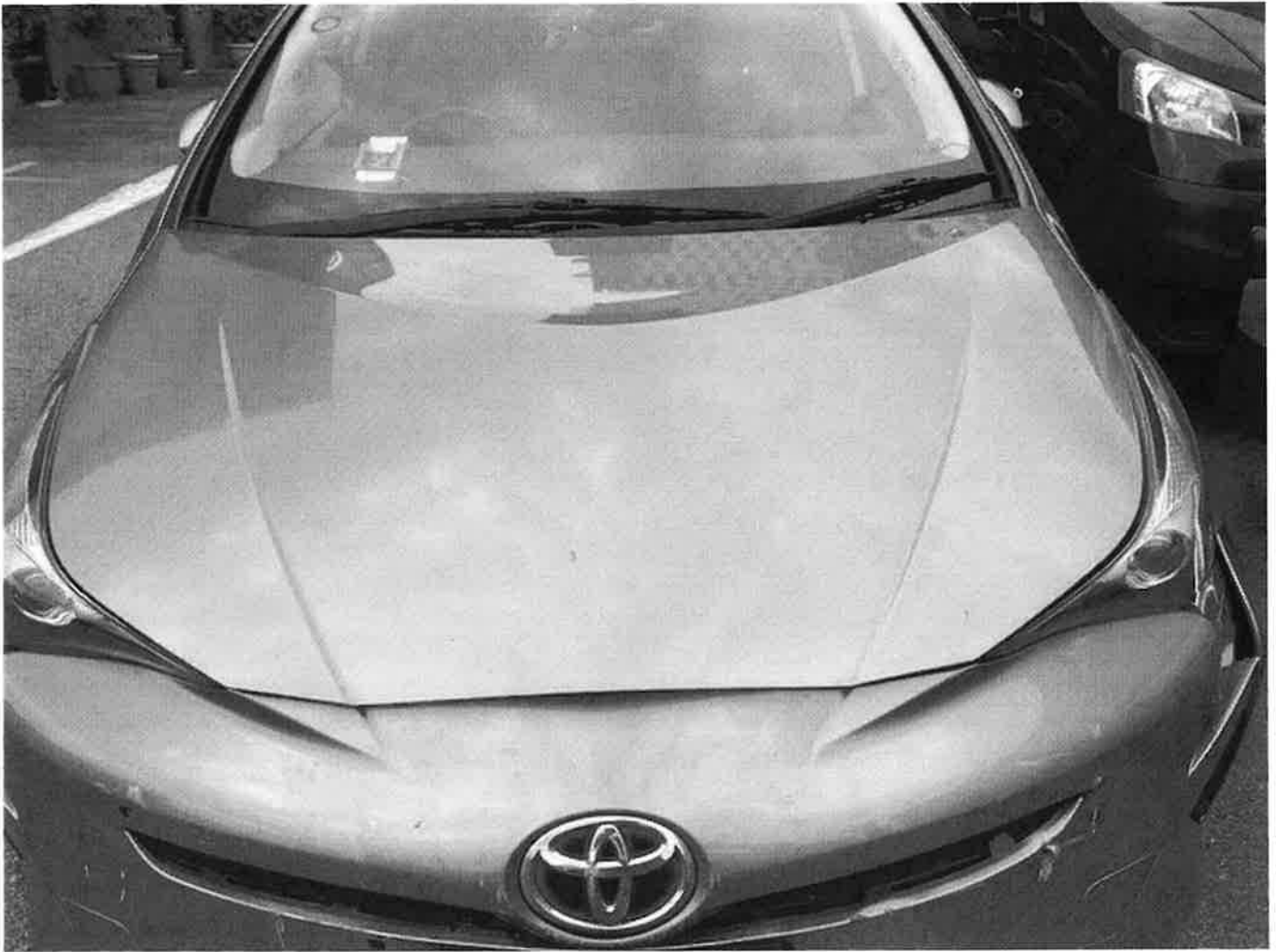














Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars (As At 04 Feb 2023 / 23:30:00)

Vehicle Insurance Details ^

Vehicle No.:

SHD2605B

Make Description/Model:

TOYOTA / PRIUS HYBRID 1.8S CVT

Insurance Company Name:

INDIA INT'L INS PTE LTD

Business Transaction Reference No.:

20230207152523641705

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

Save as PDF

OK →

Print



Thank you

You have successfully logged out.

Your last login date and time was 07 Feb 2023, 15:23:26.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

| S/No. ↕ | Asset Type ↕ | Asset ID ↕ | Transaction Type ↕ | Transaction Amount(\$\$) ↕ | Log Date/Time ↕ |
|---------|--------------|---------------|---|----------------------------|------------------------|
| 1 | Vehicle | SHD2605B18.19 | Enquire Veh Owner Info (Others) by Law Firm | 26.75 | 07 Feb 2023 / 15:25:23 |



GOLDBELL

CAR RENTAL

Industrial Vehicles. Financial Services.
41,000 Served. And Counting.

GOLDBELL CAR RENTAL PTE LTD

Main Office: 10 Raeburn Park #02-01 Singapore 088702 Tel: +65 6838 6300 Fax: +65 6225 1029
Finance: 8 Tuas Ave 18 Singapore 638892 Tel: +65 6861 007 Fax: +65 6862 3500
Website www.gbcr.com.sg
Co Reg No : 200710651D

Page 1 / 1

SIN HENG LONG MOTOR WORK
BLOCK 5032 ANG MO KIO INDUSTRIAL PARK 2
#01-305
SINGAPORE 569535
IAN CHAN

TAX INVOICE

GST Reg No. : M9-0002514-E
Invoice No. : CXI00133420
Invoice Date. : 17-02-2023
Account No. : C00015158
Our Ref. : CPVS2302032
Your Ref. : DE SOUZA PAUL F RANCIS
Credit Term. : CASH
Salesman. : EUGENEWONGSR

| PARTICULARS | | AMOUNT SGD |
|--|-----------------------------|------------------|
| Asset Description | : MITSUBISHI ATTRAGE 1.2CVT | |
| Reg No/ID No | : SLF6642J | |
| Chassis No | : MMBSTA13AHH002545 | |
| Engine No | : 3A92UDK0756 | |
| Agreement No | : CPVS2302032 | |
| Contract Period | : 07-02-2023 To 16-02-2023 | |
| Type Of Lease | : Short Term | |
| BEING CHARGES FOR ADVANCED PAYMENT FOR THE ABOVE | | 900.00 |
| GST @8.00% for \$ 900.00 | | 72.00 |
| E. & O.E | | |
| TOTAL | | \$ 972.00 |

Mode of Payment:

- 1) Bank Transfer / Giro: (Preferred Mode of Payment)
United Overseas Bank Ltd. Account number 450-303-896-4
- 2) PayNow: (Preferred Mode of Payment)
Enter UEN 200710651DUOB
Scan QR code for payment
- 3) Cheque:
Please make all cheques payable to Goldbell Car Rental Pte Ltd.
No receipts will be issued for Cheque Payments.
Please send payments to 8 Tuas Ave #18 Singapore 638892.

Scan to Pay:

GOLDBELL CAR RENTAL PTE



This is a computer generated document. No signature is required.



Industrial Vehicles. Financial Services.
41,000 Served. And Counting.

DELIVERY ORDER


To Messrs:

| | | |
|---|----------|-----------------------|
| SIN HENG LONG MOTOR WORK | DO NO | |
| BLOCK 5032 ANG MO KIO INDUSTRIAL PARK 2 | OUR REF | CPVS2302032 |
| #01-305 | YOUR REF | DE SOUZA PAUL FRANCIS |
| SINGAPORE | DATE | 07/02/2023 |
| 569535 | | |

Please acknowledge receipt of the following goods in good order and condition.

| | | |
|---|----------|-----------------|
| <p> MITSUBISHI ATTRAGE 1.2CVT Rental Agreement : CPVS2302032 Model : ATTRAGE 1.2CVT Vehicle No. : SLF6642J Chassis No : MMBSTA13AHH002545 Engine No : 3A92UDK0756 Contact Person : IAN CHAN Place Of Delivery : BLOCK 5032 ANG MO KIO INDUSTRIAL PARK 2 #01-305 SINGAPORE 569535 </p> | | |
| SECURITY DEPOSIT PAID | : Y / N | CHECKED OUT BY: |
| FIRST MONTH RENTAL PAID | : Y / N | DATE & TIME : |
| PERIOD OF HIRE | : 7 Days | KM OUT : |
| AGREEMENT RETURNED | : Y / N | |

REMARKS User: De Souza Paul Francis

| | | | |
|---|-----------------------|---|--|
| <p>I/We acknowledge having received goods as described above in good order and condition. Goods sold are non-refundable</p> | | <p>GOLDBELL CAR RENTAL PTE LTD</p> | |
| DATE: | 7/2/2023 |  <p>SIGN HERE PLEASE!</p> | <p>SIGNATURE & COMPANY'S STAMP</p> |
| NAME: | DE SOUZA PAUL FRANCIS | | |
| NRIC NO: | 91710246/F | | |



**SIN HENG LONG
MOTOR WORK**

Registered No: 25546200W
BLK 3023A UBI ROAD 1
#01-63 SINGAPORE 408717

Tel No. : 6481 6078 Fax No.: 6483 0905
E-mail : shlmotorwork@gmail.com

Attention To : De Souza Paul Francis
Invoice No : 0020-23-SHLM
Invoice Date : 3rd April 2023

Nric No : SXXXX246F
Car Model : Mitsubishi Lancer
Car Plate No : SJW 8012 Z

| S/N | Description | Amount S\$ |
|-----|--|------------|
| 1 | Part-By-Part repair for providing replacement parts, repair service to panels, and providing putty and re-spray on affected areas. | \$3,900.00 |

Sub-Total \$ 3,900.00

~~新 興 隆 噴 漆~~
~~SIN HENG LONG MOTOR WORK~~
~~Blk 3023 #01-305 Ang Mo Kio~~
~~Industrial Park 2 Singapore 569535~~

Date and Customer's Signature/Co. Stamp

SIN HENG LONG MOTOR WORK

PAR Automotive Consultancy

Regn. No: 52986974L

Mailing Address : Blk 310 Shunfu Road #07-213, Singapore 570310. Tel : 645 31173, Fax : 645 36131.

Report No: 0020-23-SHLM

03 April 2023

De Souza Paul Francis
31 Bodmin Drive
Singapore 559630

INVOICE No. **0020-23-SHLM**


Vehicle No. **SJW8012Z**

| <u>S/NO.</u> | <u>SERVICES RENDERED</u> | <u>Amount due</u> |
|--------------|--|------------------------|
| 1 | Being accident vehicle appraisal services, transport, photographs and re-inspection (work in progress and post repair inspection). | \$578.00 |
| | Total amount payable | <u>\$578.00</u> |

Kindly cross your cheque in favour of "PAR Automotive Consultancy"

We thank you in anticipation for your prompt payment.

PAR Automotive Consultancy



Report No: 0020-23-SHLM

03 April 2023

ACCIDENT VEHICLE SURVEY REPORT

De Souza Paul Francis
31 Bodmin Drive
Singapore 559630

VEHICLE INFORMATION:

| | | | |
|--------------------------|--|--------------------------|------------|
| <i>Vehicle Reg No.:</i> | SJW8012Z | <i>Odometer:</i> | 3500km |
| <i>Make & Model:</i> | Mitsubishi Lancer | <i>Colour:</i> | Blue |
| <i>Chassis number:</i> | JMYSRCY1AGU006543 | <i>Date of accident:</i> | 04/02/2023 |
| <i>Year of Regn.:</i> | 02/05/2017 | <i>Date inspected:</i> | 08/02/2023 |
| <i>Repairer at:</i> | Sin Heng Long Motor Work Blk 5032 Ang Mo Kio Ind Pk 2 #01-287/305 Singapore 569535 | | |

STATIC CHECKS, where applicable:

| | |
|----------------------------|-------------|
| <i>Steering :</i> | serviceable |
| <i>Footbrake :</i> | serviceable |
| <i>Handbrake :</i> | serviceable |
| <i>Paintwork :</i> | Good |
| <i>General condition :</i> | Good |

TIRE CONDITION:

| | <u>LH / Make</u> | <u>RH / Make</u> | <u>Size</u> |
|---------------|------------------|------------------|-------------|
| <i>Front:</i> | 6mm/Falken | 6mm/Falken | 205/60R16 |
| <i>Rear:</i> | 6mm/Falken | 6mm/Falken | 205/60R16 |

POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the rear portion.

Please see details as described in the Annex for parts and labour.

REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

Parts and Labour Assessment

Report No: 0020-23-SHLM

Vehicle No: SJW8012Z

| Description of part | Qty | Condition as inspected | Repairer's estimate | Our adjustment |
|---|----------------------------|---------------------------------|---------------------|-----------------|
| Rear boot lid | 1 | buckled | 595.00 | 595.00 |
| Rear boot lid logo "Star" | 1 | necessary | 35.00 | 35.00 |
| Rear boot lid emblem "EX" | 1 | necessary | 29.00 | 29.00 |
| Rear boot lid emblem "Lancer" | 1 | necessary | 40.00 | 40.00 |
| Rear boot lid emblem "Mivex" | 2 | necessary | 42.00 | 42.00 |
| Rear boot lid reflector lamp RH | 1 | reuse | 127.00 | 0.00 |
| Rear boot lid inner trim | 1 | reuse | 148.00 | 0.00 |
| Rear boot lid inner trim clip | 10 | necessary | 30.00 | 30.00 |
| Rear boot lid damper RH/LH | 2 | reuse | 100.00 | 0.00 |
| Rear boot lid hinge RH/LH | 2 | repair | 144.00 | 0.00 |
| Rear boot lid lock | 1 | bent | 130.00 | 130.00 |
| Rear boot lid lock catch | 1 | bent | 35.00 | 35.00 |
| Rear boot weatherstrip | 1 | deformed | 142.00 | 142.00 |
| Rear tail lamp RH/LH | 2 | fractured | 608.00 | 608.00 |
| Rear bumper | 1 | squashed | 724.00 | 724.00 |
| Rear bumper reflector RH/LH | 2 | fractured | 76.00 | 76.00 |
| Rear bumper tow cover | 1 | deformed | 15.00 | 15.00 |
| Rear bumper number plate lamp bracket RH/LH | 2 | bent | 24.00 | 24.00 |
| Rear bumper number plate lamp RH/LH | 2 | fractured | 56.00 | 56.00 |
| Rear bumper centre beam | 1 | bent | 63.00 | 63.00 |
| Rear bumper impact bracket RH/LH | 2 | bent | 82.00 | 82.00 |
| Rear bumper reinforcement | 1 | bent | 172.00 | 172.00 |
| Rear bumper side retainer RH/LH | 2 | necessary | 58.00 | 58.00 |
| Rear bumper clip | 8 | necessary | 28.00 | 28.00 |
| Rear end panel | 1 | repair | 463.00 | 0.00 |
| Rear end panel inner top garnish | 1 | deformed | 101.00 | 101.00 |
| | | <i>Subtotal before discount</i> | 4,067.00 | 3,085.00 |
| | <i>Percentage discount</i> | <i>0% and 10%</i> | 0.00 | 308.50 |
| | | Sub-total 1 | 4,067.00 | 2,776.50 |
| Rear boot lid emblem 'C&C' | 1 | necessary | 38.00 | 38.00 |
| Reverse sensor | 1 | shorted | 350.00 | 300.00 |
| | | <i>Subtotal before discount</i> | 388.00 | 338.00 |
| | <i>Percentage discount</i> | <i>0% and 0%</i> | 0.00 | 0.00 |
| | | Sub-total 2 | 388.00 | 338.00 |
| | | Parts-total | 4,455.00 | 3,114.50 |

PAR Automotive Consultancy


LABOUR

| | | |
|--|----------------------|----------|
| 1. To straighten and panel beating, rear boot floor panel, rear end panel and rear frame members. To remove and refit above parts. | 1,000.00 | 750.00 |
| 2. To putty, re-spray painting and polish affected areas. | 1,500.00 | 1,000.00 |
| 3. To check and rectify wiring system. | 80.00 | 50.00 |
| 4. To rust proof affected areas. | 120.00 | 60.00 |
| | Labour total | 2,700.00 |
| | Parts & Labour total | 7,155.00 |
| | | 1,860.00 |
| | | 4,974.50 |

Results of inspection of the accident vehicle are as shown above.

We have taken into consideration the age and condition of the vehicle in our recommendation.

Hence, the recommended cost of repairs based on LUMP SUM repairs is : \$3,900.00
and the recommended number of working days for the repairs is : 5


B J Loi (I Eng. MIMI, AIRTE)
 Automotive Appraiser





















23/07/2023
10:03 AM

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