

ESTIMATE FOR SLB13K

6 RAFFLES QUAY

SINGAPORE 048580

#22-00

63476100

INDIA INTERNATIONAL INSURANCE P/L

ATTN: MOTOR CLAIM DEPARTMENT

Cycle & Carriage Industries Pte Limited Authorised Dealer Company No. 196400367W GST Reg No. MR-8500111-X

Vehicle & Document Information

20314

SLB13K

Reg No/Reg Date

Date In/Mileage

Chassis No

WIP No

Engine No

Colour/Trim

Make/Model

26092030380257

MB/A 35 AMG 4-MATIC SALOON

W1K1771512J3393727

021 149 Polar White/ 046 651 Black

/ 22/03/2022

							, , , , , , , , , , , , , , , , , , , ,	40 031	
Account No	Terms	Date/Time Print	ed	CSE	Operator				
WI000576	Credit	22/08/2024/	10:47	K0	301 / Kerlyn On	g			
		Description	of Goods / S	Services		Qty	Unit Price	Disc%	Amount
Z REQUEST Customer M BPNSUN		NOT	AN WDC /DOC /		FFICIA	LT	II XA	VV	OICE
DRIVE IN	TP VEHICL DATE SURVE			/ GBL2315S					
A BPÍLAB		•	en and constants designed	t do a response or management		A K			3840.00
DISASSEM A BPIRES	BLE AND RE	PLACE ATTACHE	D DAMAGED	PARTS & RE	FINISH.		The state of the s		3000.00
		ER, RH/ FRONT	FENDER, R	H/ FRONT D	OOR &	Mary Mary			
RH/ WING A BPILAB				1		*		0.10	380.00
		OSTIC TO CHECK NDARD, NETT	ON CONTR	OL UNIT RE	SET MEMORY TO				
A BPILAB		-							540.00
S BPNSUB	CI & CONDU	CT WHEEL ALIG	NMENT NETT						60.00
		ALANCING TYRE	. NETT						
	ORDER NO: T FENDER M	ODEL PLATE				1.00	169.48	00.00	169.48
M RH/ FRON						1.00	731.06		731.06
M RH/ FRON	T FENDER E	DGE GUARD				1.00		00.00	13.41
	MIRROR FR					1.00	1060.43	00.00	1060.43
M RH / ADD	TURN SIGN	AL LAMP				1.00	213.82		213.82
	MIDDOD CH	F 1 1				1.00	245.28	00.00	245.28
M RH/ WING	MIRROR SH T SPOKE WH					1.00	1605.94		1605.94

Confirmed & accepted by

Customer Service Centre - Pandan Loop Cycle & Carriage Industries Pte Ltd Email: kerlyn.ong@cyclecarriage.com.sg DID: 6771 4420 HP: 9186 5113

Kerlyn Ong Kai Li

Nett 9% GST on 11859.42

11,859.42 1067.35

Total Payable

12,926.77

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.

Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

> Pandan Loop Service Center 188 Pandan Loop Singapore 128378 Tel: 6777 8388 Fax: 6779 5383 www.mercedes-benz.com.sg



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 First Submission 21/08/2024 17:45 (SGT) Reported by Owner Date of Accident 20/08/2024 20:16 (SGT) Exact Location of Accident Singapore Additional Location Information CLEMENTI AVENUE 6 TOWARDS BUKIT BATOK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mercedes

Vehicle Registration Number SLB13K INSURED/POLICYHOLDER Is company? Nο Name Of Registered Owner LEE ZHIWEI NRIC No SXXXX383J **Email Address** aero_estima@hotmail.com Mobile Phone No (Phone) +65-94316928 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model A35 AMG Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto 1991 Vehicle Fuel First Regisration Date 22/03/2022 Chassis no W1K1771512J3393727 Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd Policy Number / Cover Note Number SD23V123961

DRIVER

<i>§</i> √ a .	
Name of Driver NRIC No Date Of Birth Occupation Driving Pass Date Driving License Pass Class Driving License Validity Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?	SHARON HOR SHU HUI SXXXX547C 13/12/1983 Indoor 04/07/2005 3 Valid 19 YEARS AND 1 MONTH Female (Phone) +65-90908133 - aero_estima@hotmail.com 2G JALAN MAS KUNING - 128695 No Spouse 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 Weather Conditions Road Surface	Side Swipe Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? 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? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 2 No - Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT	No No -
REFER TO ATTACHMENT	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes REFER TO KERLYN ONG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBL2315S



Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	ARIVAZHAFAN RISHIRAM NETHAJI
Passport No/FIN	MXXXX998X
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. The 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

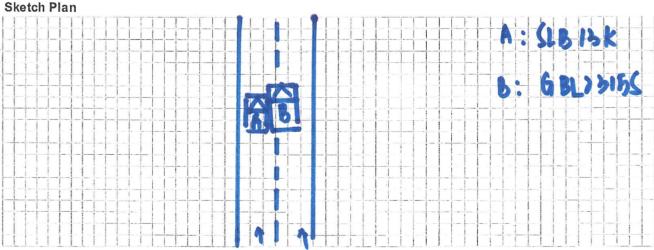
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Kerlyn Ong Kai Li
DID: 6771 4420 HP: 9186 5113
Email: kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd

Policyholder's Signature / Date & Time 21/08/2024 1711

Driver's Signature (If driver is not the policyholder) / Date Stom Witness of by Reporting Octave Loop & Time 21/08/2024 1711

Personnel KERLYN



Describe Circumstances of the Accident

I WAS DRIVING MY CAR (SLB13K) ALONG CLEMENTI AVE 6 TOWARD BUKIT BATOK.						
I WAS TRAVELLING AT THE EXTREME LEFT LANE AND WAS GOING STRAIGHT. VEHICLE B (GBL2315S) ON MY RIGHT LANE SUDDENLY CUT INTO MY LANE AND HAD COLLIDED ONTO MY RIGHT PORTION.						

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time 21/08/2024 1711

Driver's Signature (If driver is not the policyholder) / Date DID: 67214400 HP: 9186 5113

Email: kerlyn.ong@cyclecarrage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop