SC2024AF0003 / CYCLE & CARRIAGE INDUSTRIES PTE LTD ENTRY DATE & TIME: 15/10/2024 13:49 (SGT) SUBMITTED BY: HO WIE LIH VERSION: 1 (15/10/2024 13:49 (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 First Submission 15/10/2024 13:49 (SGT)

Reported by Owner

Date of Accident 11/10/2024 10:30 (SGT)

Exact Location of Accident Singapore Additional Location Information BKE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SLN1131H**

INSURED/POLICYHOLDER

Is company? Nο

Name Of Registered Owner SOH GIM HONG NRIC No SXXXX883A

kelvin.gh.soh@gmail.com **Email Address** Mobile Phone No (Phone) +65-84280989

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model Cla180

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle? No - Claiming third party

Vehicle Category Private car Transmission Auto 1332

Vehicle Fuel

First Regisration Date 29/01/2024

Chassis no W1K1183842N4315285 Effective Date/Time of Ownership 29/01/2024 00:00 (SGT)

INSURANCE COMPANY

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company

Policy Number / Cover Note Number 7240010118

DRIVER

Name of Driver NGUYEN THI SANG NRIC No SXXXX346C Date Of Birth 15/12/1971 Occupation Indoor **Driving Pass Date** 18/02/2011 **Driving License Pass Class** 3A **Driving License Validity** Valid 13 YEARS AND 8 MONTHS Driving experience Gender Female Mobile Number (Phone) +65-84280989 Alt. Phone Number Email Address kelvin.gh.soh@gmail.com BLK 330 ANG MO KIO AVENUE 1 #08-1801 Address Address complement Postcode 560330 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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? No 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO ATTACHMENT ATTACHMENT(S) Yes

Are accident photos available for attachment?

No

Was there any video captured by Car Camera?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMX8770C Vehicle Manufacturer

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	India International Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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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 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)

Lunderstand, 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.

Policyholder's Signature / Date & Time

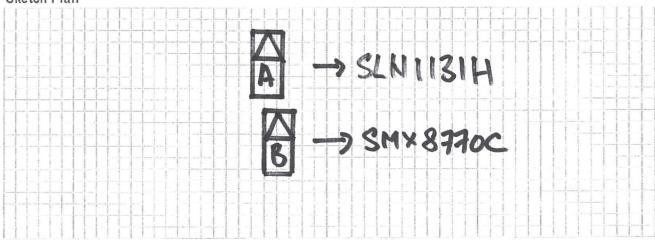
Cycle & Carriage Industries 1 to Cycle & Carriage Industries 1 to Cycle & Carriage Industries 2 to Centre Pandan Leep

Briver's Signature (if driver is not the policyholder) / Date ustoWitnessed by Reporting Centre & Time

Email: cheehan.go@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd

Go Chee Han DID: 6771 4336 HP: 9181 7717

Sketch Plan



Describe Circumstances of the Accident

I WAS TRAVELLING VERY SLOW AT BKE DUE TO TRAFFIC JAM , SUDDENLY CAR "B" KNOCKED ONTO MY CAR REAR PORTION.						

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

Go Chee Han

DID: 6771 4336 HP: 9181 7717

Email: cheehan.go@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Cycle & Carriage Industries Pandan Loop

Customer Service Centre: Pandan Loop

Witnessed by Reporting Centre Personnel



ESTIMATE FOR SLN1131H

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

Vehicle & Document Information

INDIA INTERNATIONAL INSURANCE P/L

ATTN: MOTOR CLAIM DEPARTMENT

6 RAFFLES QUAY

#22-00

SINGAPORE 048580

63476100

WIP No

Reg No/Reg Date

21499 **SLN1131H** / 29/01/2024

Date In/Mileage

Chassis No

W1K1183842N4315285

1010

Engine No

28281480047516

Make/Model

MB/CLA 180 COUPE

Colour/Trim

021 149 Polar White/ 041 111 ARTICO Blac

Account No	Terms	Date/Time Printed	CSE	Operator				
WI000576	Credit	16/10/2024/ 17:30	СН	371 / Go Chee Han				
		Description of Good	s / Services		Qty	Unit Price	Disc%	Amount
M BPNSUN		NOT A : 7240010118 // 11-	NO	FFICIAL	. TA	XII	VV	DICE
DRIVE IN		MBER : 15-10-2024 //		III		*		
DIRECT S A BPILAB	ETTLEMENT	BY:			66			2400.00
A BPIRES		PLACE ATTACHED DAMAGI	ED PARTS & F	REFINISH.	1 1			1800.00
A BPILAB		R & TRUNK LID OSTIC TO CHECK ON COI	NTDOL HINTT D	DESET MEMORY TO			0.10	380.00
		NDARD. NETT	VIKUL UVII P	IESET MEMORIT TO				120.00
M BPNSUN	AR LIGHTIN	G SYSTEM AND WATER T	ST FOR ANY	LEAKAGE. NETT				15.00
SUNDRIES M REAR BUM M REAR BUM		DI ACK TOTA			1.00	1463.03	100,000	1463.03
M CTR/REAR	BUMPER LO	WER TRIM STRIP			1.00	517.32 119.84	00.00	517.32 119.84
M RH/REAR		ER TRIM STRIP ER TRIM STRIP E			1.00 1.00 1.00	146.70 146.70 224.29	00.00	146.70 146.70 224.29
		Go Chee Han DID: 6771 4336 HP: 9181 7717 Email: cheehan.go@cyclecarriage.com.sg Email: cheehan.go@cyclecarriage Pre Ltd Cycle & Carriage Industries Pre Loop Customer Service Centre = Pandan Loop Customer Service Centre						

Nett

7,332.88

9% GST on

659.96

Total Payable

7332.88

7,992.84

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

