

ESTIMATE FOR SFJ3399G

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

MS FIRST CAPITAL INSURANCE LIMITED

MOTOR CLAIM DEPARTMENT 6 RAFFLES QUAY #21-00 SINGAPORE 048580 65073848

Vehicle & Document Information

WIP No 19695

/ 21/01/2015 SFJ3399G Reg No/Reg Date

Date In/Mileage

-/100 WDD2120362B089591 Chassis No

27492030301040 Engine No

MB/E 250 2.0 CGI SEDAN (W212 Make/Model

027 775 Iridium sil/ 042 274 Leather Jav Colour/Trim

Account No	Terms	Date/Time Printed	CSE	Operator				
WF001862	Credit	27/07/2024/ 10:49		301 / Kerlyn On	g			
		Description of Good	ls / Services		Qty	Unit Price	Disc%	Amount
Z REQUEST Customer M BPNSUN	Request	NOT A	NC	FFICIA	LTA	XII	VV	OICE
DRIVE IN DATE IN/	I/TP VEHICL 'DATE SURVE		4 // SH774	4Z - FIRST CAPITAL		5.		
BY/AUTHR A BPILAB	KIZED ON	:			100	-		1920.00
	IBLE AND RE	PLACE ATTACHED DAMAG	ED PARTS &	REFINISH.				4000 00
A BPIRES	DEAD DUMBE	· D		6 13	, II -			1200.00
RESPRAY REAR BUMPER A BPILAB					1	,	0.10	380.00
	NTRY DIAGN	OSTIC TO CHECK ON CO	NTROL UNIT	RESET MEMORY TO			0.10	0001100
		NDARD. NETT		IIA .				
A BPILAB				NAME AND ADDRESS OF THE PARTY.				120.00
M BPNSUN	AR LIGHTIN	IG SYSTEM AND WATER I	EST FOR AN	Y LEAKAGE. NEII				15.00
SUNDRY			1					20101
M REAR BUM	1PER	100			1.00	1837.82		1837.82
M REAR BUM	MPER LOWER	TRIM			1.00	292.43		292.43
M LH/ REAF	R BUMPER CH	ROME MOULDING			1.00	209.84		209.84
M RH/ REAF	R BUMPER CH	ROME MOULDING			1.00	209.84	5 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	209.84
M REAR DIS	STANCE SENS	SOR			2.00	201.17	00.00	402.34
M SPACER F	RING				2.00	8.89	00.00	17.78
M LH/ BASI	IC MOUNTING	FOR BUMPER			1.00	72.53	00.00	72.53
M LH/ REAF	R BUMPER SI	IDE STABILITY			1.00	49.85		49.85
M LH/ REAF	R BUMPER BO	OTTOM BRACKET			1.00	32.64	00.00	32.64
							1	

Confirmed & accepted by

Kerlyn Ong Kai Li DID: 6771 4420 HP: 9186 5113 Email: kerlyn.ong@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Custemer Service Gentre - Pandan Loop Authorized signatory and company stamp

Nett 9% GST on 6760.07

6,760.07 608.41

Total Payable

7,368.48

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

- 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

29/07/2024 10:59 (SGT) Date of First Submission Both Policyholder and Actual Driver Reported by 26/07/2024 17:00 (SGT) Date of Accident **Exact Location of Accident** Singapore ALONG PIE TOWARDS TUAS (20.5KM) Additional Location Information

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFJ3399G INSURED/POLICYHOLDER Is company? No CHNG SEOW CHYE Name Of Registered Owner NRIC No SXXXX723C **Email Address** kevin_chng@hotmail.com Mobile Phone No (Phone) +65-94510404 Alternative Phone No VEHICLE PARTICULARS

Manufacturer Mercedes E250 Model 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 1991

INSURANCE COMPANY

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company Policy Number / Cover Note Number 2100399433-09

DRIVER

Name of Driver CHNG SEOW CHYE NRIC No SXXXX723C Date Of Birth 25/08/1957 Occupation Indoor

Driving Pass Date 01/07/1977 Driving experience 47 YEARS Gender Male Mobile Number (Phone) +65-94510404 Alt. Phone Number Email Address kevin chng@hotmail.com BLK 133 GEYLANG EAST AVENUE 1 #03-201 Address Address complement Postcode 380133 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 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 3 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? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO ATTACHMENT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

NRIC No

SH7744Z

VH744Z

Taxi

HABIBULLAH SHAH BIN MOHAMED IBRAHIM SXXXX235J

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBE309K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
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)	-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Formmust be completed by the Policyholder and/or the Authorised 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. 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.

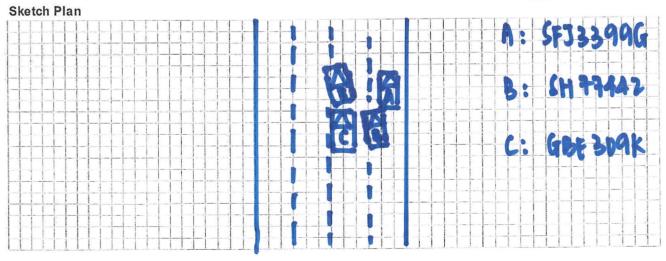
DID: 6771 4420 HP: 9186 5113 Email: kerlyn.ong@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd

Kerlyn Ong Kai Li

Witnessed by Reporting Centre an Loop Personnel KERLYN

Policyholder's Signature / Date & Time 27/07/2024 1022

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



Describe Circumstances of the Accident

I WAS DRIVING MY CAR (SFJ3399G) ALONG PIE TOWARD TUAS. I WAS TRAVELLING AT THE EXTREME RIGHT LANE.						
I HAD STOPPED MY CAR (SFJ3399G) AS VEHICLES INFRONT OF ME HAD STOPPED. AS I STOPPED, VEHICLE B (SH7744Z) CAME FROM THE REAR COULD NOT STOP ON TIME AND TRIED TO SWERVE OUT HAD COLLIDED ONTO MY LEFT REAR PORTION.						
VEHICLE C (GBE309K) HAD THEN COLLIDED ONTO VEHICLE B (SH7744Z) REAR PORTION.						

Declaration

We declare the foregoing particulars are true in every respect.

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

Policyholder's Signature / Date & Time 27/07/2024 1022

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

Witnessed by Reporting Centre Personnel KERLYN