



CYCLE & CARRIAGE

CYCLE & CARRIAGE KIA PTE LTD

PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684567 Fax: 65651240



ESTIMATE

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Mr Desmond Hoon Sio Hwee.	Cust No/Name LCV02936/Mr Desmond Hoon Sio Hwee.
Blk 420 Clementi Avenue 1	Reg No/Reg Date SJW4355K / 25/03/201
#35-213	Date In/Mileage / 0
Singapore 120420	Chassis No KNAKU811MA5065495
Contact No Mobile: 98364728	Engine No G4KEAH711523
	Make/Model KIA/SORENTO 2.4 A EX PREMIUM EDITIO
	Colour/Trim DO / VA

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00081	Cash	26/04/2018/ 12:28		261 / Edwin Caina	27048
Description of Goods / Services				Qty	Unit Price Disc% Amount
M SUNDRY					
SUPPLY RHR INNERSHIELD - KS868402P000					
M SUNDRY					
SUPPLY RHR MUDFLAP - KS868802P000					
E PNT88000					3300.00
RENEW & RE-ALIGN RR DAMAGED PORTION:					
RENEW RHR FENDER & RR BUMPER					
REPAIR RHR DOOR					
E PNT98000					2100.00
RESPRAY RR BUMPER , RHR FENDER , RHR WHEELHOUSE & RHR DOOR					
M SUNDRY					50.00
RENEW RHR SPORT RIM & TRANSFER TYRE					
E PNT88000					200.00
REMOVE & REFIT RR FLR BOARD, TRIM, CARPET & SEAT					
A 54900099					50.00
CHECK WIRING & ELECTRICAL SYSTEM					
A 10028901					200.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST					
USING HI-SCAN PRO TEST					
M SUNDRY					150.00
APPLY ANTI CORROSION & BODY SEALANT ON AFFECTED AREAS					
E PNT88000					120.00
REMOVE & REFIT RHR QTR FENDER GLASS					
M SUNDRY					100.00
INSTALL RHR QTR GLASS SOLAR FILM					
M SUNDRY					80.00
SUPPLY RHR QTR GLASS SEALANT					
E PNT88000					100.00
REMOVE & REFIT REVERSE SENSOR					
M SUNDRY					50.00
Sundries					
M COVER-RR BUMPER				1.00	620.00 00.00 620.00
M MOULDING ASSY-RR BUMPER SIDE,R				1.00	152.00 00.00 152.00

Confirm & accepted by

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.



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**ESTIMATE**

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#35-213	Date In/Mileage / 0
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	Colour/Trim DO / VA

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00081	Cash	26/04/2018/ 12:28		261 / Edwin Caina	27048
Description of Goods / Services		Qty	Unit Price	Disc%	Amount
M	BRACKET-RR BPR SIDE REINF,RH	1.00	22.00	00.00	22.00
M	PANEL ASSY-QUARTER OUTER,RH.	1.00	1521.00	00.00	1521.00
M	GARNISH ASSY-QTR SIDE,RH	1.00	92.00	00.00	92.00
M	GLASS & MOULDING ASSY-QUARTER	1.00	392.00	00.00	392.00
M	WHEEL ASSY-ALUMINIUM	1.00	658.00	00.00	658.00
<h1>Estimate</h1>					

Confirm & accepted by

	Nett	9,957.00
7% GST on	9957.00	696.99
Total Payable		10,653.99

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.

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 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 ability.
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 Report	14/04/2018 12:15
Date Of Accident	07/04/2018 09:30
Exact Location Of Accident	EXIT WOODLANDS AVENUE 12
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJW4355K
Insured/Policyholder	
Name Of Registered Owner	DESMOND HOON SIO HWEE
NRIC No	S7617836D
Email Address	ADELINE.CHAN42@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-98364728
Alternative Phone No	OTHERS-96348986
Vehicle Particulars	
Manufacturer	KIA
Model	SORENTO-2.4 (A)
Exact Purpose for which vehicle was being used at time of accident	MEETING FRIEND
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI18V02762/VPE/R00
Cover Note Number	
Driver	
Name of Driver	ADELINE CHAN KIN LENG
NRIC No	S7602851F
Date Of Birth	04/02/1976
Occupation	INDOOR
Date Of Driving Pass	12/07/2001
Driving Experience	16 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98364728
Fax Number	
Contact Number	OTHERS-96348986
Email Address	ADELINE.CHAN42@YAHOO.COM.SG

Address	BLK 420 CLEMENTI AVENUE 1 #35-213
Postcode	120420
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident.	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI N.P.C
Police Station Address:	ROAD: 20 CLEMENTI AVE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180407/2114

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	20563MID
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOVERNMENT
Name of Driver	KASYFIL AZIZ BIN KAMARULZAMAN
NRIC/Passport Number	S8504716E
Contact Number	84536783
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver) 1

Accident Sketch Plan

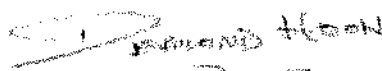
SKETCH PLAN


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 Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 indorsement 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

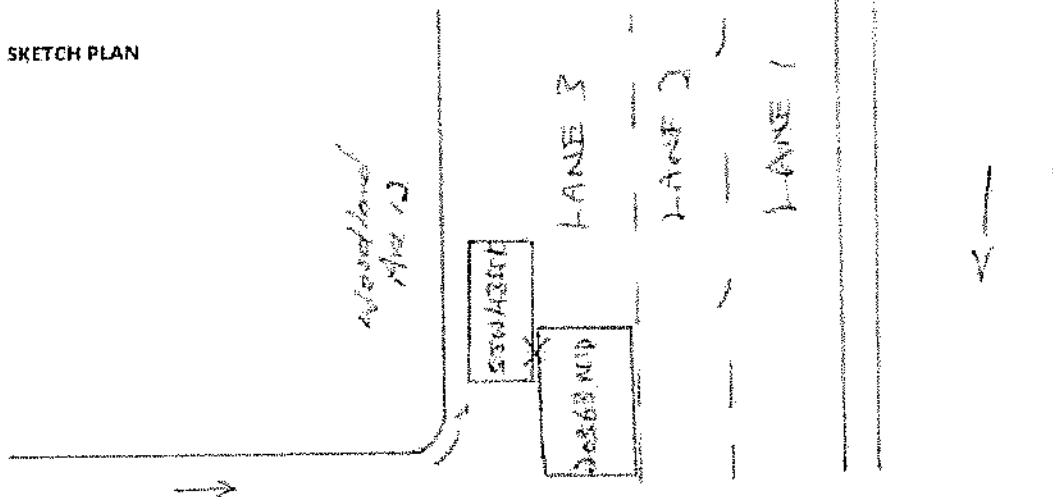

Policyholder's Signature
Date & Time: 13/04/2018
15:30 HRC


Driver's Signature
(If driver is not the policyholder)
Date & Time: 13/04/2018
15:30 HRC


Reporting Centre Personnel's Signature
Name: [Signature]
NRIC/IN No: [Signature]

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 07/04/2018 at about 0930hrs I was driving vehicle registration Number SWW 1355K along Woodlands Ave 12. As I was driving along the road, I took a glance at the right side of the side mirror and saw orange colour signal light flashing from a MINDEF lorry bearing registration number D0563MID traveling by my side.

Upon realizing it, the said driver was filtering into my lane and he collided into my right side rear bumper. After the accident, we move our vehicle to the side of the road and come down from the vehicle to take a look at the accident.

I then obtained his particulars from him and I gave my particulars to him.

I wish to state that there was ~~no~~ one injured during the point of accident and I have the images of the damages on the vehicle.

POLICE REPORT T/2018/0907/2114

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Demond Horn
Policyholder's Signature
Date & Time:

Keeline Awa
Driver's Signature
(If driver is not the policyholder)
Date & Time: 13/4/2018
15:40:40

14/04/2018
Reporting Centre Personnel's Signature
Name: Keeshi Antonio
NRIC/ID No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180407/2114

1 of 3

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No 1800-8729999

Report No T/20180407/2114

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/04/2018 17:59		Vide Report No.:		Station Diary No.: 128
Informant's Particulars				
Name of Informant: ADELINE CHAN KIN LENG		Address: APT BLK 420 CLEMENTI AVENUE 1 #35-213 SINGAPORE 120420		
ID Type / ID No.: NRIC NO / S7602851F		Contact No.: Home/Office:		Mobile: 96348986
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Female	Age: 42	Date of Birth: 04/02/1976	Type of Informant: Driver	
Race: Chinese		Language:		Institution / School Name:
Occupation: CUSTOMER SERVICE ADMIN		Driving Licence information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 07/04/2018 09:30	Type of Location: Straight Road
Location: Along Road 1 WOODLANDS AVENUE 12				
Exit of Woodlands Avenue 12				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
20563MID	Lorry				No Damage	0
SJW4355K	Car				Seriously Damaged	0

POLICE REPORT



SINGAPORE
POLICE FORCE



1120 104574117

Police Station Of Origin:
Clement N.P.C
20 Clement Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No: 129858

CONTINUATION OF REPORT

Brief Details:

On 07/04/2018 at about 0930hrs, I was driving vehicle bearing registration number: SJKH558K along Woodlands Avenue 12. As I was driving along the road, I took a glance at the right side of the side mirror and saw orange color signal light flashing from a MINDEF lorry bearing registration number: 20563M.D travelling by my side.

Upon realizing it, the said driver was sharing into my lane and he collided into my right side rear bumper. After the accident, we move our vehicle to the side of the road and came down from the vehicle to take a look at the accident.

I then obtained his particulars from him and I gave my particulars to him.

I wish to state that there was no one injured during the point of accident and I have the images of the damages on the vehicle.

The purpose of lodging this report is for insurance claims.

The particulars of the person as follows:
Name: Kasyili Aziz Bin Kamarulzaman
NRIC: S9504718E
Add: Blk 422 Clement Ave 1 #04-333

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180407/2114

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

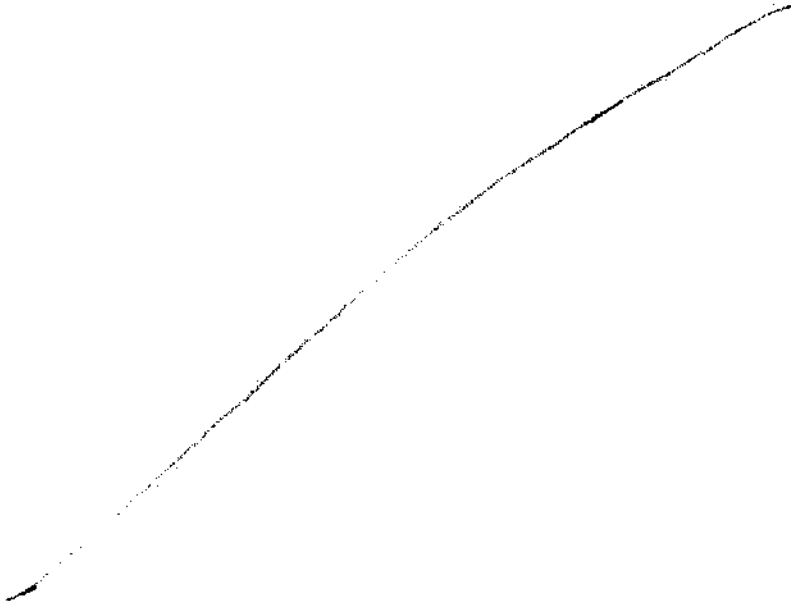
3 of 3

Report No: T/20180407/2114

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan



IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: D / Sgt 1 WONG JUN LI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 07/04/2018 17:59
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No.: 65476430	Classification Of Case:

Authentication Stamp
NP163

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189); Motor Vehicles (Third-Party Risks And Compensation) Rules, 1980; Road Transport Act, 1987 (Malaysia); Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Name of Policyholder:
DESMOND HOON SIO HWEE (DESMOND HONG XIAOFEI)
Certificate No.:
SI18V02762/ VPE / R00
Date of Issue:
02 Mar 2018
Effective Date of Commencement:
04 Mar 2018 00:00
Date of Expiry:
03 Mar 2019 23:59
Registration No.:
SJW4355K
Chassis No.:
KNAKU811MA5065495
Type of Certificate:
MX1
Persons or Classes of Persons entitled to drive*:

A) The Policyholder.

B) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

A) Use for hire or reward.


B) Use for racing, pace-making, reliability trials or speed-testing.

C) Use for the carriage of goods (other than samples) in connection with any trade or business.

D) Use for any purpose in connection with the Motor Trade.

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings.

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

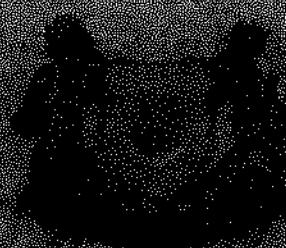


For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers

For Information Only:
Coverage(s):
Comprehensive, Unlimited Windscreen
Sum Insured:
MARKET VALUE AT THE TIME OF LOSS
Excess:
Section I - Named Drivers S\$900, Section I - Unnamed Drivers S\$1400, Additional Excess for Young, Elderly & Inexperienced Drivers S\$3000, Windscreen Excess S\$100
Name of Finance Company:
KENSO LEASING PTE LTD
Name of Producer:
D&S AUTO AGENCY (A1661-3)

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7617838D



Name

DESMOND HOON SIO HWEE
(DESMOND HONG XIAOFEI)

洪曉飛

Race

CHINESE

Date of Birth

15-03-1976

Sex

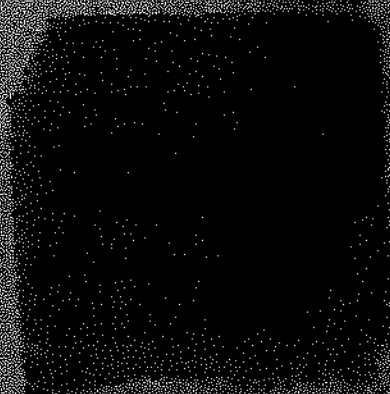
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Country of Birth

SINGAPORE



15-03-1976



Date of Issue

15-03-2003

NOT VALID FOR ENTRY INTO SINGAPORE

EXPIRATION DATE

15-03-2003

15-03-2003

15-03-2003