

CYCLE & CARRIAGE FRANCE PTE. LIMITED PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens, Singapore 609339 Tel: (65) 6568 4501 Fax: (65) 6565 1240

ESTIMATE

Company Reg No. 200609327M GST Reg No. MR-8500111-X

Invoice Name & Address MR TOH YAM KWANG				Owner Name & Vehicle Info			
				Cust No/Name FCV01586/MR TOH YAM KWANG			
				Reg No/Reg Date		/ 28/03/2018	
	PETIR RO	AD			Date In/Mileage / 0		
#21-08 SINGAPORE 678267 Contact No Mobile: 91001800				Chassis No VF73AHNYTHJ860388 Engine No 10XTA40842693			
				Make/Model	CIT/GC4P 1.2 PURETECH 130 S&S EAT6 FEEL		
				Colour/Trim	EBM LAZULI BI	LUE / 8LP TIS	SSU MILAZZO G
Account No	Terms	Date/Time Printed	CSE	Operator		WIP No	- Concentration of the Concent
SM00073	Cash	20/07/2018/ 12:59		465 / Tay Jian	Ye	13619	
		Description of Good	s / Services		Qty	Unit Price Disc?	
PNT98000	DI CDDAV	REAR BUMPER AND BODYK	IT				1260.00
PNT88000							600.00
TO RENEW REAR BUMPER, REPAIR REAR BODYKIT E PNT88000							60.00
TO TRANSFER REAR PARKING SENSOR TO NEW PART A 54900099							50.00
	RING AND	CHASSIS ELECTRICAL SY	STEM				
10028901	OUT DIAG	NOCTIO OUEQU UCINO UI	CCAN DDO T	ret			300.00
	-SCAN PRO	NOSTIC CHECK USING HI	-SCAN PRO II	£31			
SUNDRY			$\sim L$		JL		50.00
SUNDRIE M REAR BUM		- Control of the Cont	(C)11	1110015	2) [1.00	858.00 0.0	0 858.00
M BRACKET			0)		1 4.00	101.00 0.0	
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M LOW RR P	AN FIX				1.00	107.00 0.0	107.00
		SURVEYOR	R NAME :		-		
				:-			
		KEWAKKO					
		4					
Confirm & accepted by			HI CHANGE OF THE CONTROL OF THE CONT	Parts		1,422.0	
					Labour Standard Me Specialist Diagnostics	Job	2,270.0 0.0 0.0 0.0
Authorized signatory and company stamp					Sundry/Othe	50.0	

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

Contact Number

EMail Address

- 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 witholding 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

	ACCIDENT STATEMENT
Date Of Report	20/07/2018 13:59
Date Of Accident	19/07/2048 19:00
	NEWTON FLYOVER
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKR8488Z
Insured/Policyholder	
Name Of Registered Owner	TOH YAM KWANG
NRIC No	S7244618F
Email Address	DESTOH88@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-91001800
Alternative Phone No	OTHERS-66181800
Vehicle Particulars	
Manufacturer	CITROEN
Model	GRAND C4 PICASSO 1.2
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE GOING HOME
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO.
Policy Number	1800032164
Cover Note Number	
Driver	
Name of Driver	TOH YAM KWANG
NRIC No	S7244618F
Date Of Birth	25/11/1972
Occupation	INDOOR
Date Of Driving Pass	26/06/1992
Driving Experience	26 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91001800
Fax Number	

OTHERS-66181800

DESTOH88@YAHOO.COM.SG

6 PETIR ROAD #21-08 Address

678267 **Postcode**

Was driver an employee of the Insured's Company NO If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions DRY Road Surface

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 NO

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 : LIN JEN YING NAME:

> GENDER: : FEMALE

Passenger 2 NAME: : HING KOOI CHOO

NO

3

GENDER: : FEMALE

Details of Police Action

NO Was the accident reported to the police?

If Yes, Please state which Police Station

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? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SGV3422Y Vehicle Registration Number

HONDA CIVIC SILVER Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category TAY KHANG HUAT Name of Driver

S7338585G NRIC/Passport Number Contact Number 92780415

Address Postcode

Insurance Company Name

Nature Of Damage 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 Form must 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.
- By the lodgment 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:

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

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DESCRIBE CIRCUMSTAN	CES OF THE ACCIDENT
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N	ewton Flyover (going toward Butit Tomah Road)
[B	palmoral Mall Direction
	almoral Mall Direction)
<u> </u>	ne cor behind Suddenly banged into my
	lar bumper
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CLARATION	
ve declare the foregoing part	iculars are true in every respect,
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licyholder's Signature	Driver's Signature Reporting Control Reporting
ite & Time:	(if driver is not the policyholder) Reporting Centre Personnel's Signature Name:

Date & Time:

1.86

Name:

NRIC/FIN No.:



GERMEIOS INSURVANCE

CITROEN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

; TOH YAM KWANG

Period of Insurance

: 28 Mar 2018 To 27 Mar 2020

Engine No.

: 10XTA40842693

Chassis No.

VF73AHNYTHJ860388

Vehicle No.

: SKR8488Z 1800032164

Policy No.

Endorsement No.

Issued Date

: 05 Apr 2018

ABOUT THE COVER

: CITROEN Grand C4 Picasso 1.2

Engine Capacity/Tonnage : 1,199.00 CC

Sum Insured : Market Value

First Year of Registration : 2018

Driver Restriction

; NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person 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/her permission. This Policy will indemnify the Policyholder or any authorised driver only if he/she-meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition

: 40 years old and above

Limitation as to use*

Use only for social, demostic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving fullion, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Lass of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Companisation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings

EXCESS

Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: 5100

Named Driver and Excess (where applicable)

TOH YAM KWANG - \$600 (Own Damage)

APPROVED REPORTING CENTRESIAUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1.Cycle & Carriage Customer Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 40850 67461900 2.Cycle & Carriage Customer Service Centre (For windscreen claim only) Add: 20 Leng Kee Rd Singapore 169094

For other Approved Reporting Centres/AlG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65.6338.6200. Alternatively, you may refer to AlG website www.arg.com.sg. or AlG SG Mobile App. Simply search and download. AlG SG* from Tunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

 $(\{(a,b),(a,b)\}_{a\in \mathcal{B}},(a,b)) = (\{(a,b),(a,b)\}_{a\in \mathcal{B}},(a,b))$

[We hereby certity that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

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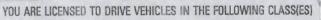
C&CCICP2 - EDWCHU 239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte, Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

AIO Asia Pacific Insurance Pte. Ltd.





Motor Cars =< 3000kg with =<7 passengers, exclusive 26 Jun 1992 of the driver; and other motor vehicles =< 2500kg

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NP 428A

17-11-2014

Address

6 PETIR ROAD #21-08 SINGAPORE 678267

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