



CYCLE &amp; CARRIAGE

**CYCLE & CARRIAGE KIA PTE LTD**  
**PANDAN GARDENS CUSTOMER SERVICE CENTRE**

209 Pandan Gardens Singapore 609339 Tel: 65684567 Fax: 65651240



Co Reg No : 199405410K

**ESTIMATE**

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info	
MR WEE DAVID ANTHONY  222 LOYANG AVE #01-02 SINGAPORE 509068  Contact No Mobile: 97335918	Cust No/Name	/MR WEE DAVID ANTHONY
	Reg No/Reg Date	SGD1118J / 15/06/201
	Date In/Mileage	/ 0
	Chassis No	KNAHU815VH7182753
	Engine No	D4FDHH105703
	Make/Model	KIA/CARENS 1.7 A D SX FL DY6
	Colour/Trim	K3Y CAMDEN BEIGE / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00081	Cash	11/10/2018/ 19:12		261 / Edwin Caina	37071

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
E PNT88000 RENEW & RE-ALIGN RR DAMAGED PORTION: RENEW RR BUMPER REPAIR RR END PNL				1650.00
E PNT98000 RESPRAY RR BUMPER & RR END PNL				850.00
E PNT88000 REMOVE & REFIT RR FLR BOARD, TRIM & CARPET				275.00
A 54900099 CHECK WIRING & ELECTRICAL SYSTEM				50.00
A 10028901 TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST USING HI-SCAN PRO TEST				200.00
M SUNDRY APPLY ANTI CORROSION ON AFFECTED AREAS				80.00
E PNT88000 REMOVE & REFIT REVERSE SENSOR				250.00
M SUNDRY Sundries				30.00
M COVER-RR BUMPER, UPR	1.00	576.00	00.00	576.00
M COVER-RR BUMPER LWR	1.00	201.00	00.00	201.00
M SKID PLATE-RR BUMPER	1.00	179.00	00.00	179.00
M BEAM-RR BUMPER	1.00	367.00	00.00	367.00
M HOLDER-BACK WARING SYSTEM OTR	2.00	4.00	00.00	8.00
M HOLDER-BACK WARING SYSTEM INR	2.00	4.00	00.00	8.00

SURVEYOR NAME: \_\_\_\_\_

SURVEYOR SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Confirm &amp; accepted by

REMARKS: \_\_\_\_\_

**Nett** 4,724.00  
**7% GST on** 4724.00 **330.68**

**Total Payable** 5,054.68

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 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. 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	11/10/2018 11:21
Date Of Accident	10/10/2018 07:20
Exact Location Of Accident	PIE TUAS, 19KM AFTER STEVENS RD, EXIT LAMPOST 929
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGD1118J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WEE DAVID ANTHONY
NRIC No	S6811433J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98291181
Alternative Phone No	OTHERS-98291181
<b>Vehicle Particulars</b>	
Manufacturer	KIA
Model	CARENS-1.7 (A)
Exact Purpose for which vehicle was being used at time of accident	SENDING DAUGHTER TO CLASS
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
<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700014385-01
Cover Note Number	

### Driver

Name of Driver	GERALDINE OI AI PENG
NRIC No	S1810484I
Date Of Birth	21/10/1967
Occupation	INDOOR
Date Of Driving Pass	06/05/1999
Driving Experience	19 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98291181
Fax Number	
Contact Number	
EMail Address	GERALDINEOI1118@GMAIL.COM

Address 222 LOYANG AVENUE  
#01-02 SINGAPORE

Postcode 509068

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 COLLISION - HEAD TO REAR

Weather Conditions CLEAR

Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident 2

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by ambulance? YES

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) 2

Passenger 1  
NAME: : EMILY WEE  
GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name PASIR RIS NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-5852999 - FAX NO: 65855261

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### Circumstances of Accident

REFER TO ATTACHMENT AND POLICE REPORT

#### Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Remarks/ Reasons: VIDEO WITH THE POLICE

Was there any audio recorded? NO

#### Details of Witness 1

Name EMILY WEE

Phone Number

Email Address

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBH8184J

Vehicle Make/Model/Colour MOTOR CYCLE

Details Of Properties

Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	UNKNOWN
Approximate Age	
Injuries Sustain	CUTS, GRAZES ON HAND
Injured person in which vehicle?	FBH8184J
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

## SKETCH PLAN

### ANT 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 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 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: 11/10/2018

\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: \_\_\_\_\_  
NRIC/FIN No.: \_\_\_\_\_

PLS REFER TO ACCIDENT REPORT

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

Driver's Signature: \_\_\_\_\_  
(If driver is not the policyholder)  
Date & Time: 11/10/2018

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



# SINGAPORE POLICE FORCE



T/20181010/2026

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

1 of 4

Report No. T/20181010/2026

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/10/2018 10:54		Vide Report No.: E/20181010/0053		Station Diary No.: 34	
<b>Informant's Particulars</b>					
Name of Informant: GERALDINE OI AI PENG			Address: 222 LOYANG AVENUE #01-02 SINGAPORE 509068		
ID Type / ID No.: NRIC NO / S1810484I			Contact No.: Home/Office: Mobile: 98291181		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 50	Date of Birth: 21/10/1967	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: HOME MAKER		Driving Licence Information: Class:		Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/10/2018 07:20	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY BEFORE ADAM RD EXIT, TUAS, LP929				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH8184J	Motorcycle					0
SGD1118J	Car	KIA	CARENS 1.7 DCT DIESEL 5DR FWD	Beige	Slightly Damaged	1

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20181010/2026

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

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Report No. T/20181010/2026

**CONTINUATION OF REPORT**

Name	Unknown		ID No.	NIL
Related Vehicle	FBH8184J (Motorcycle)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	
<b>Driver</b>				
Name	GERALDINE OI AI PENG		ID No.	S1810484I
Related Vehicle	SGD1118J (Car)		Contact No.	98291181
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	
<b>Pedestrian</b>				
Name	EMILY LI-ANNE WEE		ID No.	NIL
Related Vehicle	SGD1118J (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	

**Brief Details.**

On 10/10/2018 at about 0718hours, I was driving in my vehicle bearing the registration number, SGD1118J along Pan Island Expressway towards Tuas with my daughter who was seated in the rear passenger seat. I was driving on the center lane and the traffic was heavy.

As the traffic was heavy, all the vehicles was moving at slow speeds. As the traffic had stopped moving, I also had stopped my vehicle. It was not even an emergency brake as I was moving quite slowly. Suddenly, I heard a bump coming from the rear of my vehicle. I then stepped out of my vehicle and noticed that a motorcycle bearing the registration number , FBH8184J had collided onto the rear bumper of my vehicle. The rider was alone and he was laying down on the road.

He was then assisted by other motorists to the road shoulder as the traffic was congested. I then asked





**SINGAPORE  
POLICE FORCE**



T/20181010/2026

Police Station Of Origin:

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Pasir Ris N.P.C

Report No. T/20181010/2026

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

**CONTINUATION OF REPORT**

Tel No: 1800-5852999

him if he needs any further assistance and he informed that he needs an ambulance and I called an ambulance for him. I then told him that I had to go off to send my daughter to Bukit Timah Saddle Club which was nearby and I will be back shortly, he acknowledged it.

After dropping my daughter off, I came back and waited with him for the ambulance and the Traffic Police came shortly. The officer gave me an incident number E/20181010/0053. As I had an in-vehicle camera installed, the traffic police officer took the memory card for investigation purposes. He was then conveyed to a hospital by ambulance.

The damage to my vehicle was a minor dent at my vehicle rear bumper. No one else was injured. I did not managed to get the rider particulars.



**SINGAPORE  
POLICE FORCE**



T/20181010/2026

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

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Report No. T/20181010/2026

**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:  
G /  
Sgt 2 MUHAMMAD ALIF BIN AZALI

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
Sr Staff Sgt IRMAN BIN MOHAMAD SAID  
Contact No.: 65476365

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
10/10/2018 10:54

Classification Of Case:



SINGAPORE  
POLICE FORCE

SIGNATURE



# CERTIFICATE OF INSURANCE

## KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Wee David Anthony  
Period of Insurance : 15 Jun 2018 To 14 Jun 2019  
Engine No. : D4FDHH105703  
Chassis No. : KNAHU815VH7182753

Vehicle No. : SGD1118J  
Policy No. : 1700014385-01  
Endorsement No. :  
Issued Date : 14 May 2018

### ABOUT THE COVER

Make/Model : KIA Carens 1.7 Diesel SX  
Engine Capacity/Tonnage : 1,685.00 CC  
Driver Restriction : NA  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2017  
Insuring with COE/PAFF : 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 "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

#### Limitation as to use\* :

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

This Policy does not cover use for hire or reward, driving tuition, 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.

Loss of Use 1500cc - 1600cc.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) 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 : \$100

#### Named Driver and Excess (where applicable)

Wee David Anthony - \$600 (Own Damage)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501
2. Cycle & Carriage Authorised Service Centre Add: 241 Alexandra Road Singapore 158931 64278600
3. Cycle & Carriage Authorised Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

We hereby certify 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).

0500710050

C&C FULCO-CORP SALES

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617 ANSP - MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Mobile*

AIG Asia Pacific Insurance Pte. Ltd.  
AUTHORISED REPRESENTATIVE

SAP000

15011085001AC4

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S18104841**  
 Name: **GERALDINE OI AI PENG**  
 Birth Date: **21 Oct 1967**  
 Issue Date: **11 Apr 2003**

000376750B

REPUBLIC OF SINGAPORE


 IDENTITY CARD NO. **S18104841**  
 Name: **GERALDINE OI AI PENG**  
 Race: **CHINESE**  
 Date of Birth: **21-10-1967** Sex: **F**  
 Country of Birth: **SINGAPORE**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	06 May 1999

NP 428A

Licence No: S18104841

1305743


 NRIC No: **S18104841**  
 Blood Group: **A+** Date of issue: **26-07-1994**  
**222 LOYANG AVENUE #01-02**  
**SINGAPORE 509068**  
 NRIC No: **S18104841** Date: **08/10/2014**