

CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

MITSUBISHI
MOTORS

Co Reg No : 197701469G

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Mr Lynette Tan Su Ling (Lynette Chen Suling) 526 Miltonia Close #05-17 Singapore 768107 Contact No	Cust No/Name KCV06334/Ms Lynette Tan Su Ling (Lynette) Reg No/Reg Date SKH3335S / 04/10/201 Date In/Mileage / 0 Chassis No JMYXTGF3WJZ000325 Engine No 4B12TP2671 Make/Model MIT/OUTLANDER 2.4 CVT AWD (E04) Colour/Trim D01 COSMIC BLUE / BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
KCV06334	CRDVCH	05/03/2019/ 17:00		265 / AndreChow	37003			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
E PNT88000								2750.00
RENEW ACCIDENT DAMAGED PORTION ON REAR BUMPER, REAR TAILGATE, REPAIR REAR END PANEL								
E PNT88000								550.00
TRANSFER TAILGATE TRIM, MECHANISM AND ELECTRONICS TO FACILITATE REPAIR								
E PNT88000								240.00
REMOVE AND INSTALL TAILGATE GLASS								
E PNT88000								150.00
REMOVE AND INSTALL REVERSE SENSOR								
E PNT98000								1680.00
RESPRAY REAR BUMPER, REAR TAILGATE, REAR END PANEL								
M SUNDRY								40.00
SUPPLY C&C LOGO								
M SUNDRY								80.00
SUPPLY REAR WINDSCREEN SEALANT								
M SUNDRY								80.00
SUPPLY BODY SEALANT								
M SUNDRY								160.00
SUPPLY ANTI CORROSION								
M SUNDRY								220.00
SUPPLY REVERSE SENSORS								
A 54900099								100.00
CHECK WIRING AND CHASSIS ELECTRICAL SYSTEM								
A 10028901								200.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST USING HI-SCAN PRO TEST								
M FACE,RR BUMPER					1.00	873.00	00.00	873.00
M REINFORCEMENT,RR BUMPER,LH					1.00	78.00	00.00	78.00
M REINFORCEMENT,RR BUMPER,RH					1.00	78.00	00.00	78.00
M BRKT,R/BMPR FACE SIDE,RH					1.00	12.00	00.00	12.00
M BRKT,R/BMPR FACE SIDE,LH					1.00	12.00	00.00	12.00
M EXTENSION,RR BUMPER					1.00	230.00	00.00	230.00
M PANEL ASSY,TAILGATE					1.00	924.00	00.00	924.00

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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Mr Lynette Tan Su Ling (Lynette Chen Suling) 526 Miltonia Close #05-17 Singapore 768107 Contact No	Cust No/Name	KCV06334/Ms Lynette Tan Su Ling (Lynette)
	Reg No/Reg Date	SKH3335S / 04/10/201
	Date In/Mileage	/ 0
	Chassis No	JMYXTGF3WJZ000325
	Engine No	4B12TP2671
	Make/Model	MIT/OUTLANDER 2.4 CVT AWD (E04)
	Colour/Trim	D01 COSMIC BLUE / BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
KCV06334	CRDVCH	05/03/2019/ 17:00		265 / AndreChow	37003		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
M	GARNISH, TAILGATE			1.00	489.00	00.00	489.00
M	DAM, TAILGATE, UPR			1.00	12.00	00.00	12.00
P	DAM, TAILGATE SIDE			2.00	27.00	00.00	54.00
P	STOPPER, WINDSHIELD GLASS			2.00	3.00	00.00	6.00
M	DAM, TAILGATE, LWR			1.00	41.00	00.00	41.00
M	REFLECTOR, TAIL LAMP, LH			1.00	99.00	00.00	99.00
M	REFLECTOR, TAIL LAMP, RH			1.00	94.00	00.00	94.00
M	DECAL, 4WD			1.00	18.00	00.00	18.00
M	MARK, OUTLANDER			1.00	94.00	00.00	94.00

Estimate

SURVEYOR NAME : _____

SURVEYOR SIGNATURE : _____

DATE : _____

REMARKS : _____

Confirm & accepted by

	Nett	9,364.00
7% GST on	9364.00	655.48
Total Payable		10,019.48

Authorized signatory and company stamp

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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 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	05/03/2019 16:39
Date Of Accident	05/03/2019 08:55
Exact Location Of Accident	HAVELOCK EXIT, CTE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH3335S
Insured/Policyholder	
Name Of Registered Owner	LYNETTE TAN SU LING
NRIC No	S7623143E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97951566
Alternative Phone No	OTHERS-97951566
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	OUTLANDER-2.4 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY TO WORK
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	1700060518
Cover Note Number	
Driver	
Name of Driver	KHOO WUNSON
NRIC No	S7534713H
Date Of Birth	22/11/1975
Occupation	INDOOR
Date Of Driving Pass	04/02/2002
Driving Experience	17 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97951566
Fax Number	
Contact Number	
EMail Address	ME@WUNSON.COM

Address	526 MILTONIA CLOSE #04-17
Postcode	768107
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 (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
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?	NO
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)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD4413A
Vehicle Make/Model/Colour	COMFORT CAB/HYUNDAI/BLUE
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TANG HIANG LAI
NRIC/Passport Number	S7238508Z
Contact Number	91455428
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

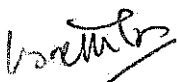
SKETCH PLAN

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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 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:

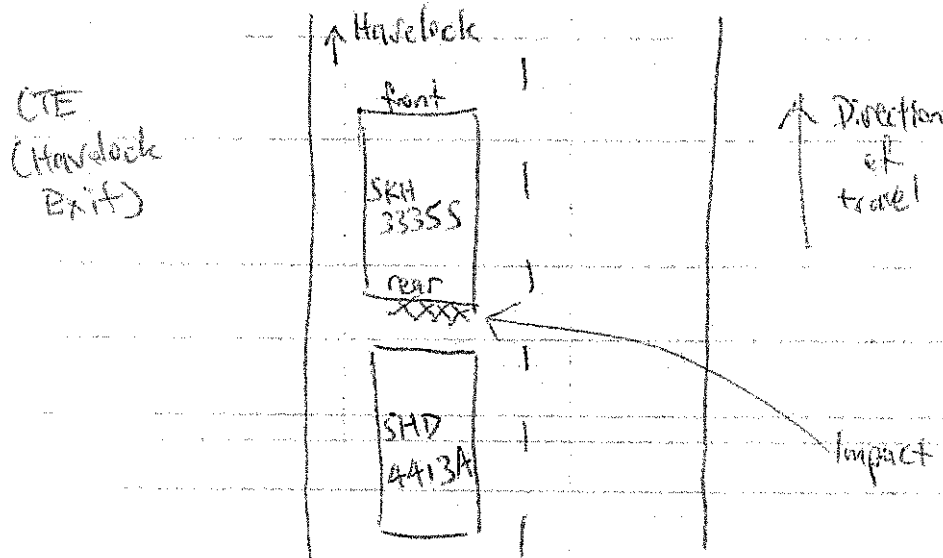


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was exiting the CTE at 0855hrs, 5 March 2019, via the Hawelock exit. The traffic was slow, typical of the usual morning traffic. I was proceeding along the leftmost lane.

I was thrown forward and it was clear there was an impact to the rear of my vehicle. I switched on the hazard light and stopped my vehicle.

Upon inspection, the taxi (SHD 4413A) had hit the rear of my vehicle. The visible damage was to the rear of the my vehicle SKH33355.

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:

[Signature]

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

5 March 2019, 1545hrs

[Signature]

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



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : LYNETTE TAN SU LING (LYNETTE CHEN SULING)
Period of Insurance : 04 Oct 2018 To 03 Oct 2019
Engine No. : 4B12TP2671
Chassis No. : JMYXTGF3WJZ000325

Vehicle No. : SKH3335S
Policy No. : 1700060518-01
Endorsement No. :
Issued Date : 29 Aug 2018

ABOUT THE COVER

Make/Model : MITSUBISHI OUTLANDER 2.4 CVT
Engine Capacity/Tonnage : 2,360.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
Insuring with COE/PARF : Yes

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, 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)

LYNETTE TAN SU LING (LYNETTE CHEN SULING) - \$600 (Own Damage)

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

1. Cycle & Carriage Authorised Service Centre Add: 20 Leng Kee Rd Singapore 159094 64708688
2. Cycle & Carriage Authorised Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
3. Cycle & Carriage Body & Paint Centre Add: 208 Pandan Gardens Singapore 609339 65664501

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 or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

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

I/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).

0500720792

CYCLE & CARRIAGE - ANNAL
239 ALEXANDRA ROAD
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Janile
AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSP000

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