

Co Reg No : 197701469G

## ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info	
Sidhu Manjit Seetoh  BLK 450 SIN MING AVE #22-507 SINGAPORE 570450  Contact No Mobile: 83226345	Cust No/Name	/SIDHU MANJIT SEETOH
	Reg No/Reg Date	SDY136M / 09/10/201
	Date In/Mileage	/ 0
	Chassis No	JMYXTGF3WJZ000423
	Engine No	4B12TQ4749
	Make/Model	MIT/OUTLANDER 2.4 CVT AWD (E02)
	Colour/Trim	W01 WHITE PEARL / BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00041	Cash	07/05/2019/ 10:49		465 / Tay Jian Ye	39540

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
E PNT88000 TO RENEW FRT BUMPER, FRT AIR DAM				1100.00
E PNT98000 PAINT WORK SPRAY FRT BUMPER, FRT AIR DAM				1260.00
A 54900099 CHECK WIRING AND CHASSIS 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 SUNDRIES				50.00
M AERO KIT - OUTLANDER	1.00	1554.00	00.00	1554.00
M FACE,FR BUMPER	1.00	851.00	00.00	851.00
M GARNISH,FR BUMPER SIDE LH LWR CHROME	1.00	110.00	00.00	110.00
M GARNISH,FR BUMPER SIDE LH CENTRE CHROME	1.00	218.00	00.00	218.00
M GARNISH,FR BUMPER,LH FOG	1.00	78.00	00.00	78.00
M BRACKET,FR BUMPER SIDE,LH	1.00	18.00	00.00	18.00

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

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

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

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

Confirm & accepted by

	<b>Nett</b>	<b>5,489.00</b>
7% GST on	<b>5489.00</b>	<b>384.23</b>
<b>Total Payable</b>		<b>5,873.23</b>

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 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	06/05/2019 16:01
Date Of Accident	04/05/2019 12:15
Exact Location Of Accident	MOUNT FABER LODGENEAR THE ENTRANCE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDY136M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SIDHU MANJIT SEETOH
NRIC No	S7603253Z
Email Address	MANJITSUDHU76@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83226345
Alternative Phone No	OTHERS-83226345

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	OUTLANDER-2.4 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PICK UP CHILDREN

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	1700062183
Cover Note Number	

### Driver

Name of Driver	SIDHU MANJIT SEETOH
NRIC No	S7603253Z
Date Of Birth	02/02/1976
Occupation	INDOOR
Date Of Driving Pass	19/09/1995
Driving Experience	23 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83226345
Fax Number	
Contact Number	OTHERS-83226345
Email Address	MANJITSUDHU76@GMAIL.COM

Address BLK 450 SIN MING AVENUE #22-507  
 Postcode 570450  
 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

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) 4  
 Passenger 1  
 NAME: : PHUA CHIEW KHIM  
 GENDER: : FEMALE  
 Passenger 2  
 NAME: : JOBAN SIDHU  
 GENDER: : MALE  
 Passenger 3  
 NAME: : JEEVAN SIDHU  
 GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name BISHAN NEIGHBOURHOOD POLICE CENTRE  
 Police Station Address ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: 1800-5529999 - FAX NO: 65561905  
 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? NO  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number EN28M  
 Vehicle Make/Model/Colour MERCEDES E200/SILVER  
 Details Of Properties

Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	SCRATCH ON REAR BUMPER
No. Of Passenger (Including Driver)	


## SKETCH PLAN

### IMPORTANT NOTICE

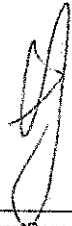
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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:

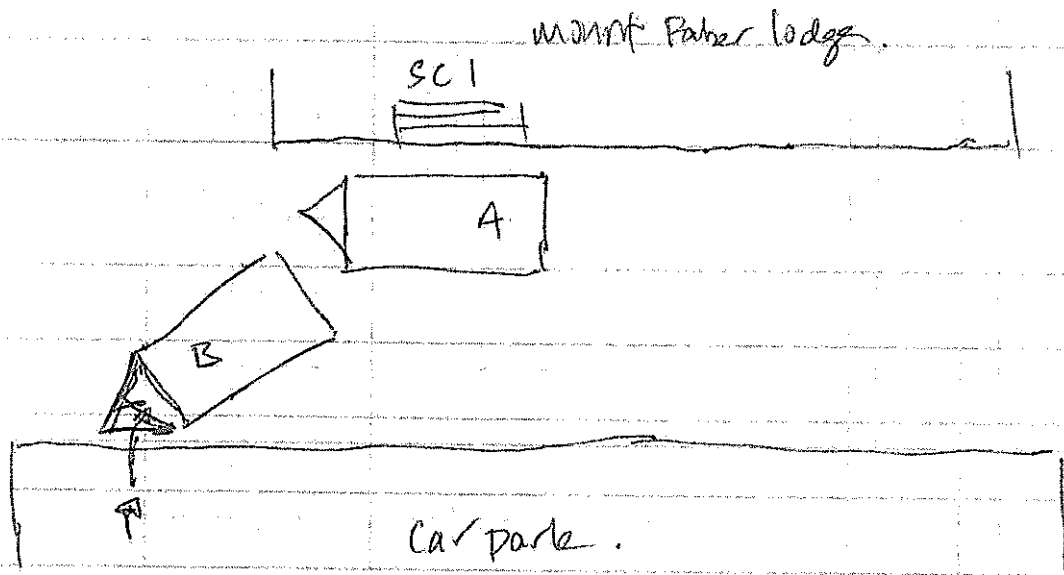
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

 6/5/19 1150  
\_\_\_\_\_  
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 stopped my car (SDY136M) along stair case 1 (SC1) to pick up my children after their swimming lesson. I left my engine running while strapping my sons onto their child seat. My wife was loading the boot at this time.

I noticed a car (EN28M) reversing out of the car park. When I realised he wasn't able to stop, I shouted but the driver didn't hear. He then knocked into my front left.

He got down and apologised saying he didn't see any car there when he was walking to his car.

I wanted to exchange particulars so that I could inform him the cost of damages. He refused to exchange particulars. He said it was minor damage until I showed him the crack on my bumper.

He told me to claim his insurance.

A const security guard came over and can witness that the driver of EN28M didn't want to exchange particulars.

## DECLARATION

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

*[Signature]* 6/5/19 11:50

Policyholder's Signature  
Date & Time:

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

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



# SINGAPORE POLICE FORCE



T/20190504/2162

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

1 of 3

Report No. T/20190504/2162

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made:  
04/05/2019 23:58

Vide Report No.:

Station Diary No.:  
146

**Informant's Particulars**

Name of Informant: SIDHU MANJIT SEETOH		Address: APT BLK 450 SIN MING AVENUE #22-507 SINGAPORE 570450	
ID Type / ID No.: NRIC NO / S7603253Z		Contact No.: Home/Office: Mobile: 83226345	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 43	Date of Birth: 02/02/1976	Type of Informant: Driver
Race: Sikh		Language:	Institution / School Name:
Occupation: OPERATION MANAGER		Driving Licence Information: Class: 3 Date of Expiry:	

**General Information of the Accident**

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/05/2019 12:15	Type of Location: Drop off Point
Location: Along Road 1 MOUNT FABER ROAD Mount Faber Lodge, near to the entrance			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
EN28M	Car				Slightly Damaged	0
SDY136M	Car	MITSUBISHI	OUTLANDE R 2.4 CVT 4WD SR	White	Slightly Damaged	3

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE  
POLICE FORCE**



T/20190504/2162

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

2 of 3

Report No. T/20190504/2162

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDY136M	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1700062183-01	09/10/2018	08/10/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	SIDHU MANJIT SEETOH		ID No. S7603253Z
Related Vehicle	NIL		Contact No. 83226345
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the above mentioned date, time and location, I was picking up my children for their swimming lessons. I stopped my car (SDY136M) near to the entrance at Staircase 1. As I was trying to strap my children on the child seat, I notice that a car (EN28M) was reversing. As such I shouted at the driver but he did not hear and I felt an impact coming from the front.

I made a check and discover that my front portion is damaged. As such I asked the driver of the for is particulars but he refused to give and we went off.

As such I am lodging this report for my insurance claim.





**SINGAPORE  
POLICE FORCE**



T/20190504/2162

3 of 3

Report No. T/20190504/2162

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

**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:

E /

Sgt 2 LIM HWEE JIE, SAMUEL

Sgt 2 LIM HWEE JIE, SAMUEL

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

SI ABDUL KAREEM BIN ABDUL HAGUE

Contact No.: 65476079

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

04/05/2019 23:58

Classification Of Case:

SN 061

## CYCLE &amp; CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : SIDHU MANJIT SEETOH  
 Period of Insurance : 09 Oct 2018 To 08 Oct 2019  
 Engine No. : 4B12TQ4749  
 Chassis No. : JMYXTGF3WJZ000423

Vehicle No. : SDY136M  
 Policy No. : 1700062183-01  
 Endorsement No. :  
 Issued Date : 23 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 "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 those 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)

SIDHU MANJIT SEETOH - \$600 (Own Damage)

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

1. Cycle & Carriage Authorised Service Centre Add: 20 Leng Koe 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: 209 Pandan Gardens Singapore 609339 65664501

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6260. 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: MayBank

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).

3504486218

CYCLE & CARRIAGE - LUKAS  
 139 ALEXANDRA ROAD  
 SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

SSPSHA

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7603253Z**  
Name: **SIDHU MANJIT SEETOH**

Birth Date: 02 Feb 1976  
Issue Date: 26 Mar 2016

002551396A

**FOR C&C USE ONLY**

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

EFFECTIVE DATE

Class 3	Motor cars with unladen weight $\leq 3000\text{kg}$ with $\leq 7$ passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	19 Sep 1995
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**FOR C&C USE ONLY**

NP 428A

Licence No: S7603253Z