





CYCLE &amp; CARRIAGE

CYCLE & CARRIAGE KIA PTE LTD  
PANDAN GARDENS CUSTOMER SERVICE CENTRE  
209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240



Reg No : 199405410K

## ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Mr Yeo Wen Hui (yao Wenhui)	Cust No/Name /Mr Yeo Wen Hui (yao Wenhui)
Blk 457 Segar Road	Reg No/Reg Date SKX5775H / 18/12/201
#12-135	Date In/Mileage / 0
Singapore 670457	Chassis No KNAHU813MG7143087
Contact No Mobile: 97974866	Engine No G4NCFH019482
	Make/Model KIA/CARENS 2.0 A GDI EX
	Colour/Trim 9H / WK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00081	Cash	11/08/2020/ 11:53	TLC	261 / Edwin Caina	16644

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
E PNT88000 REPAIR FRT BUMPER, FRT FENDER RH, FRT DOOR RH				550 1180.00
E PNT98000 SPRAY PAINT FOR FRT BUMPER, FRT FENDER RH, FRT DOOR RH				1260 1680.00
M SUNDRY Sundry				20 50.00

Estimate

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

SURVEYOR NAME: Pam - Hp 90010028SURVEYOR SIGNATURE: PamDATE: 11/08/2020 @ 11:50REMARKS: 4 daysReady after repair

Confirm &amp; accepted by

	Nett	2,830.00
7% GST on	2830.00	198.10
	Total Payable	3,028.10

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	22/02/2020 11:11
Date Of Accident	21/02/2020 17:30
Exact Location Of Accident	NUH MEDICAL CENTRE CARPARK LEVEL 6
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE:

Vehicle Registration Number	SKX5775H
Insured/Policyholder	
Name Of Registered Owner	YEO WEN HUI
NRIC No	SXXXX588E
Email Address	WENHUI_JIMMY@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97974866
Alternative Phone No	OTHERS-97974866

### Vehicle Particulars

Manufacturer	KIA
Model	CARENS-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	DOC APPOINTMENT
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P 90437911 DMA
Cover Note Number	

### Driver

Name of Driver	YEO WEN HUI
NRIC No	SXXXX588E
Date Of Birth	30/08/1982
Occupation	INDOOR
Date Of Driving Pass	12/05/2005
Driving Experience	14 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97974866
Fax Number	
Contact Number	OTHERS-97974866
EMail Address	WENHUI_JIMMY@YAHOO.COM.SG

ISS	BLK 457 SEGAR ROAD #12-135
code	670457
Is driver an employee of the Insured's Company	NO
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	COLLIDED INTO PARKED VEHICLE
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG
Police Station Address	ROAD: 1 SEGAR ROAD , POSTCODE: 677738 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8929999 - FAX NO:
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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

## Sketch Plan

### SKETCH PLAN

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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 Authorized 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: 22/2/20

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

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







# SINGAPORE POLICE FORCE



T/20200221/2176

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

1 of 3

Report No. T/20200221/2176

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/02/2020 20:44		Vide Report No.:		Station Diary No.: 159	
<b>Informant's Particulars</b>					
Name of Informant: YEO WEN HUI			Address: APT BLK 457 SEGAR ROAD #12-135 SINGAPORE 670457		
ID Type / ID No.: NRIC NO / S8225588E			Contact No.: Home/Office: Mobile: 97974866		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 37	Date of Birth: 30/08/1982	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: BANKER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 21/02/2020 17:30	Type of Location: Car Park
Location: Along Road 1 LOWER KENT RIDGE ROAD				
National University Hospital, Medical Centre Block, Level 6 Carpark (multi-storey), lot no 654				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKX5775H	Car	KIA	CARENS 2.0(A) GDI	Black	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKX5775H	MSIG INSURANCE (SINGAPORE) PTE. LTD.	90437911	18/12/2019	17/12/2020



# SINGAPORE POLICE FORCE



T/20200221/2176

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Report No. T/20200221/2176

Police Station Of Origin:

Bukit Panjang N.P.C

1 Segar Road #01-05 SINGAPORE 677738

Tel No: 1800-8929999

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	YEO WEN HUI	ID No.	S8225588E
Related Vehicle	SKX5775H (Car)	Contact No.	97974866
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,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 21st Feb 2020 at about 9.00am, I parked my car bearing registration number: SKX5775H at National University Hospital, Medical Centre Block, Level 6 Carpark (multi-storey), lot no 654. After securing the car, I, together with my wife, left for our son's medical appointment at the hospital. On the same day, at about 5.30pm, we returned to our vehicle only to discover that there is damage on the front right portion of the car. There are scratches as well as a big dent discovered at the right portion of the car. There was no note left at my car. However I have an in car CCTV that managed to capture a yellow Citicab taxi, which registration number is slightly unclear, reversing in and out several times before moving off. I suspect that this is the car that had hit onto my car. From the video, I can make out the following letters of the number plate, SHD8577. I have approached the security officer who has a video footage of what has happened at the multi-storey carpark. This is the first time such incident has happened.





**SINGAPORE  
POLICE FORCE**



T/20200221/2176

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Report No. T/20200221/2176

Police Station Of Origin:  
Paukit Panjang N.P.C  
Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

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**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:

J /

Insp SALLEH BIN OMAR

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

21/02/2020 20:44

Officer In Charge Of Case:

TP / HRT

Insp GOH GEOK EYE

Contact No: 65476148

Classification Of Case:

Authentication Stamp

NP168

Stamp

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	588E
Vehicle No.:	SKX5775H
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Aug 2020
Vehicle Make:	KIA
Vehicle Model:	CARENS 2.0(A) GDI
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	G4NCFH019482
Chassis No.:	KNAHU813MG7143087
Maximum Power Output:	122.0 kW (163 bhp)
Open Market Value:	\$21,223.00
Original Registration Date:	18 Dec 2015
First Registration Date:	18 Dec 2015
Transfer Count:	0
Actual ARF Paid:	\$21,713.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Dec 2025
PARF Rebate Amount:	\$16,284.00
COE Expiry Date:	17 Dec 2025
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$60,003.00
COE Rebate Amount:	\$32,097.00
Total Rebate Amount:	\$48,381.00

The information contained herein is correct as at 11 Aug 2020

OK

Black





art.com/used\_cars/info.php?ID=915446&amp;DL=1050

## Kia Carens 2.0A GDI

Overview

Financial

Accessories

Similar

Research

Photos

Map

Price \$58,800

Depreciation ⓘ \$9,070 /yr  
View models with similar depreReg Date 30-Nov-2015  
(5yrs 3mths 18days COE left)

Mileage 48,843 km (10.4k /yr)

Manufactured ⓘ 2015

Road Tax ⓘ \$1,212 /yr

Transmission Auto

Dereg Value ⓘ \$48,356 as of today (change)

OMV ⓘ \$20,976

COE ⓘ \$61,001

ARF ⓘ \$21,367

Engine Cap 1,999 cc

Power 122.0 kW (163 bhp)

Curb Weight ⓘ 1,544 kg

No. of Owners ⓘ 2

Type of Vehicle MPV

## Features

Airbags, ABS, Leather Seats, Cd Changeer, Reverse Sensors, Fog Lamp, Push Start, Cruise Control. Retractable Mirror, Keyless Entry View specs of the Kia Carens (2015-2016)

## Description

Immaculate Conditon, Low Down, Monthly \$812 \* 63, Low Mileage Contact Us For Appointment.

Car

Ad Car