



CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD EUNOS LINK SERVICE CENTRE



CYCLE & CARRIAGE

330 Ubi Road 3 Singapore 408650 Tel: 67461000 Fax: 64875857

MAXUS

Steve (LKK) 83228813 ESTIMATE

Invoice Name & Address	Owner Name & Vehicle Info
CHINA TAIPING INSURANCE (SINGAPORE) 3 Anson Road #16-00 Springleaf Tower Singapore 079909 Attn: Claims Dept. Contact No 63896111	Cust No/Name /Y.S. Lim Construction Pte Ltd Reg No/Reg Date GBF8801Y / 03/04/2017 Date In/Mileage 14/07/2020/ 0 Chassis No LSKG4GL12HA410055 Engine No 19D4N1PYGB01K018 Make/Model MAXCV/G10D19TMT Colour/Trim WHT White / BK Black

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No				
F0000018	Credit	14/07/2020/ 15:56	DS	218 / MarsLer	48530				
Description of Goods / Services					Qty	Unit Price	Disc%	Amount	
S	MIPNT88088								50.00
	FRONT NUMBER PLATE WITH CASING								
S	MIPNT88088								250.00
	DIAGNOSTIC / SCANNING								
S	MIPNT88088								80 100.00
	TO CHECK LIGHTING AND WIRING SYSTEM ON FRONT ACCIDENT AFFECTED AREAS								
S	MIPNT88088								600 2400.00
	TO REPLACE FRONT BUMPER, REINFORCEMENT, ETC								
	-REPAIR SUPPORT PANEL								
	STRAIGHTEN, REFORM, ALIGN ON FRONT ACCIDENT AFFECTED AREAS								
S	MIPNT98088								420 1680.00
	SPRAY PAINTING ON FRONT ACCIDENT AFFECTED AREAS								
P	NC00071562	FASCIA-FRT BPR W/ LH	1.00	437.00	0.00	437.00			
P	NC00071570	GRILLE-FRT BPR LWR	1.00	144.00	0.00	144.00			
P	NC00037357	LH FRT FOGLIGHT COVE	1.00	10.00	0.00	10.00			
P	NC00018122	ABSORBER-FRT BPR ENG	1.00	42.00	0.00	42.00			
M	NC00063826	GRILLE ASM-RAD	1.00	171.00	0.00	171.00			
P	NC00008711	CLIP-RAD GRL	2.00	1.00	0.00	2.00			
M	NC00018364	LOGO-FRT	1.00	23.00	0.00	23.00			
P	NC00020644-4100	CROSSMEMBER ASM-FRT	1.00	1037.00	0.00	1037.00			
P	NC00024453	LH SIDE BRACKET	1.00	6.00	0.00	6.00			
M	NC00024454	RH SIDE BRACKET	1.00	6.00	0.00	6.00			
P	JJMR200300	CLIP, BUMPER	10.00	4.00	10.00	36.00			
M	NC00036427	LH FRT FOG LAMP	1.00	69.00	0.00	69.00			
P	NC00056663	LH HEADLAMP ASSY	1.00	1652.00	0.00	1652.00			
Z	NOTES								
ACCIDENT ON 13/07/2020 ALONG EAST COAST RD									
OWNER CLAIMING THIRD PARTY									
REQUIRED REPLACEMENT VEHICLE									
TP # GBD1670P TP INS : CHINA TAIPING									

Confirm & accepted by

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 14 day period stamp

No illegal modification(s) is allowed

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.

Supplementary items may be resurveyed 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 Signature. 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.

Parts	3,635.00
Labour	0.00
Standard Menu	0.00
Specialist Job	4,480.00
Others(Lub,etc)	0.00
Sundry	0.00
Total(w/o GST)	8,115.00

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 13/07/2020 17:43
Date Of Accident 13/07/2020 14:50
Exact Location Of Accident EAST COAST RD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBF8801Y
Insured/Policyholder
Name Of Registered Owner Y.S. LIM CONSTRUCTION PTE LTD
Co Reg No 1XXXXX365K
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-96389418
Alternative Phone No OFFICE-96389418
Vehicle Particulars
Manufacturer MAXUS
Model G10-1.9 (A)
Exact Purpose for which vehicle was being used at time of accident NORMAL USAGE
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 COMMERCIAL VEHICLE
Insurance Company
Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number 2100506310-03
Cover Note Number
Driver
Name of Driver FOO TUCK LAM
NRIC No SXXXX184E
Date Of Birth 08/11/1967
Occupation OUTDOOR
Date Of Driving Pass 03/11/2009
Driving Experience 10 YEARS AND 8 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-91130623
Fax Number
Contact Number OTHERS-91130623
Email Address NOEMAIL

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Driving Experience 10 YEARS AND 8 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-91130623
Fax Number
Contact Number OTHERS-91130623
Email Address NOEMAIL

Address 374A EAST COAST ROAD
SINGAPORE
Postcode 428983
Was driver an employee of the Insured's Company YES
If No, Relationship of the Driver with the Insured
Vehicle Registration Number of Driver's Own Vehicle -
-
-
Insurance Company of Driver's Own Vehicle -
-
-

General Information of the Accident

Type Of Accident SIDE SWIPE
Weather Conditions RAINING
Road Surface WET
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) 2
Passenger 1 NAME: : PANG SIONG POH
GENDER: : MALE

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

I WAS TRAVELLING ALONG EAST COAST RD. I SAW VEHICLE B GBD1670P IN FRONT OF ME INTENTION REVERSING HIS VEHICLE, I WAS STOPPED AND GIVE WAY HIM BUT HE STILL REVERSED AND COLLIDED INTO MY VEHICLE.

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

Vehicle Registration Number GBD1670P
Vehicle Make/Model/Colour NISSAN NV350 WHITE
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver CHIA KHOON TECK
NRIC/Passport Number SXXXX752G
Contact Number
Address BLK 108 SERANGOON NORTH AVENUE 1
#04-707 SINGAPORE
Postcode 550108
Insurance Company Name

SKETCH PLAN

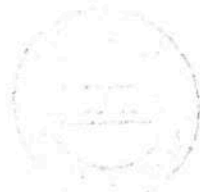
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8. Consent under the Personal Data Protection Act (PDPA)

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.

Y.B. JIN CONSTRUCTION PTE. LTD.
224-A EAST COAST ROAD
SINGAPORE 444745

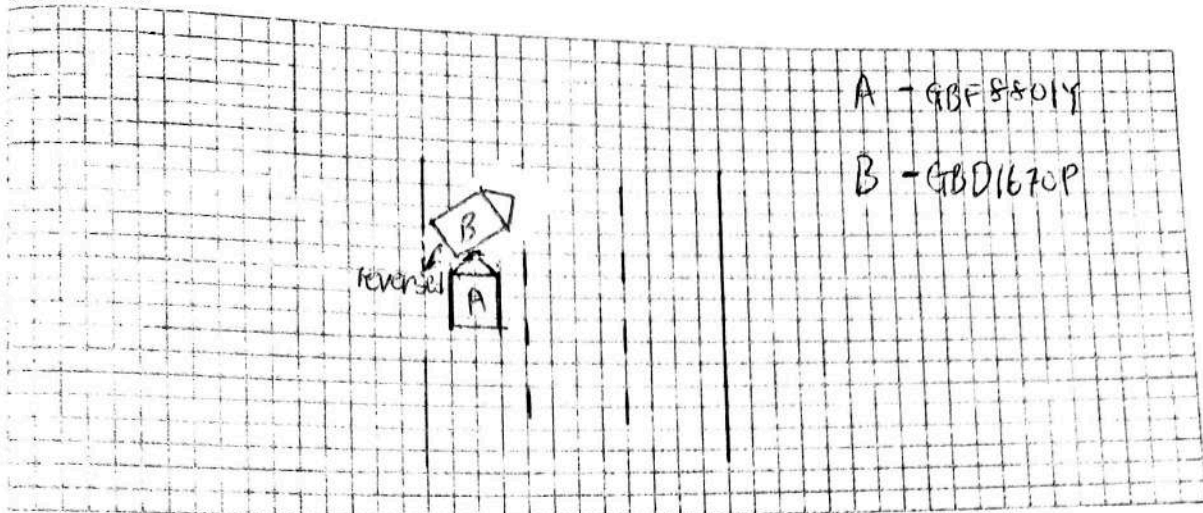


Policyholder's Signature
Date & Time:

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 travelling along East Coast Rd. I saw vehicle B GBD 1670P in front of me, intention reversing his vehicle, I was stopped and give way him but he still reversed and collided into my vehicle.

DECLARATION

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

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.: