

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



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

Co Reg No : 199405410K

#### **ESTIMATE**

GST Reg No : MR-8500111-X

| Invoice Name & Address                | Owner Name & Vehicle Info |                                    |  |  |  |
|---------------------------------------|---------------------------|------------------------------------|--|--|--|
| AIG Asia Pacific Insurance Pte.       | Cust No/Name              | /Lim Chiew Eng (Lin Qiuying)       |  |  |  |
| Ltd.                                  | Reg No/Reg Date           | SMT8966B / 07/05/201               |  |  |  |
| MOTOR CLAIM DEPARTMENT                | Date In/Mileage           | 24/09/2020/ 0                      |  |  |  |
| 78 SHENTON WAY #08-16<br>AIG BUILDING | Chassis No                | KNAPH81BMJ5448538                  |  |  |  |
| SINGAPORE 079120                      | Engine No                 | D4HBJH364677                       |  |  |  |
| Contact No 64191000                   | Make/Model                | KIA/SORENTO 2.2 A SX SR GDCO       |  |  |  |
|                                       | Colour/Trim               | ABP AURORA BLACK / WK SATURN BLACK |  |  |  |

| Account No Terr                               | ns Date/Time Printed | d CSE                   | Operator                     |               | WIP No       |      | US VICE THE |
|---|----------------------|-------------------------|------------------------------|---------------|--------------|------|-------------|
| LAX00000 Cred                                 | it 24/09/2020/ 11:   | 02 QUK                  | 282 / Kevin Leong            |               | 21617        |      |             |
|   | Description of G     | ioods / Services        |                              | Qty           | Unit Price D | isc% | Amount      |
| E PNT88000<br>TO REPLACE REA<br>REPAIR ON END | AR BUMPER, TAILGATE  | & AFFECTED AR           | EA                           |               |              |      | 1600.00     |
| E PNT98000                                    | REAR BUMPER, TAILGA  | ATE & END PANE          |                              |               |              |      | 1050.00     |
| E PNT88000                                    | BUMPER, BONNET, SU   |                         |                              |               |              |      | 1200.00     |
| E PNT98000                                    | FRT BUMPER & BONNET  |                         |                              |               |              |      | 700.00      |
| E PNT88000<br>TO REMOVE & I                   | ISTALL REAR BOOT COM | MPARTMENT FOR I         | FACILITATE REPAIR            | П             |              |      | 120.00      |
| F DNTOOOOO                                    | ISTALL REAR WINDSCRE | A STATE OF THE PARTY OF | and the second section where | f} <i>(</i> a | 9            |      | 240.00      |
| M SUNDRY                                      | NT ON WINDSCREEN     |                         |                              | 5             | 9            |      | 80.00       |
| E PNT88000<br>TO TRANSFER R                   | AR TAILGATE ATTACHM  | MENT TO NEW PA          | NEL                          |               |              |      | 120.00      |
| A 15900099<br>REPLACE REAR                    | XHAUST MUFFLER       |                         |                              |               |              |      | 400.00      |
| E PNT88000<br>TO REMOVE & I                   | ISTALL RADIATOR, CON | NDENSER FOR FA          | CILITATE REPAIR              |               |              |      | 120.00      |
| M SUNDRY<br>TO TOP UP AIR                     | CON GAS              |                         |                              |               |              |      | 80.00       |
| M SUNDRY<br>TO APPLY SELA                     | IT ON AFFEDTED AREA  |                         |                              |               |              |      | 40.00       |
| M SUNDRY PERFORM RUST                         | REVENTION            |                         |                              |               |              |      | 80.00       |
| A 54900099<br>CHECK WIRING                    | CHASSIS ELECTRICAL   | SYSTEM                  |                              |               |              |      | 30.00       |
| A 10028901                                    | DIAGNOSTIC CHECK USI |                         | 0 TEST                       |               |              |      | 120.00      |
| M SUNDRY                                      | THO TEST             |                         |                              |               |              |      | 50.00       |

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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| Ltd.                                  | Reg No/Reg Date           | SMT8966B / 07/05/201               |  |  |
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| SINGAPORE 079120                      | Engine No                 | D4HBJH364677                       |  |  |
| Contact No 64191000                   | Make/Model                | KIA/SORENTO 2.2 A SX SR GDCO       |  |  |
|                                       | Colour/Trim               | ABP AURORA BLACK / WK SATURN BLACK |  |  |

| Account No  | Terms   | Date/Time Pri   | inted    | CSE | Operator   |       |      | WIP No    |  |         |
|-------------|---------|-----------------|----------|-----|--|-------|------|-----------|--|---------|
| LAX00000    | Credit  | 24/09/2020/     | 11:02    | QUK | 282 / Kevin  | Leong |      | 21617     |  |         |
|             |         | Description     |          |     |  | Q     | ty U | nit Price | Disc%  | Amount  |
|             | FRT NUM | MBER PLATE WI   | TH FRAME |     | - CONTRACTOR OF THE CONTRACTOR |       |      | 0.000     |  |         |
| M SUNDRY    |         |                 |          |     |  |       |      |           |  | 50.00   |
| SUNDRIES    |         |                 |          |     |  |       |      |           |  |         |
| M PANEL ASS |         | SATE            |          |     |  | 1.0   |      | 1445.00   |  | 1156.00 |
| M PANEL ASS |         |                 |          |     |  | 1.0   |      | 526.00    |  | 420.80  |
| M GLASS ASS |         | SATE            |          |     |  | 1.0   |      | 690.00    |  | 552.00  |
| M EMBLEM-SO |         | art areas       |          |     |  | 1.0   |      |           | 20.00  | 22.40   |
| M EMBLEM-EC |         |                 |          |     |  | 1.0   |      |           | 20.00  | 29.60   |
| M COVER-RR  |         |                 |          |     |  | 1.0   |      | 605.00    | 20.00  | 484.00  |
| M COVER-RR  |         |                 |          |     |  | 1.0   |      | 565.00    | 20.00  | 452.00  |
| M SKID PLAT |         | MPER            |          |     | ]  | □1.0  |      | 103.00    | 20.00  | 82.40   |
| M COVER ASS |         | R UNDER         | <u> </u> | 757 | 1000   |       | 00   |           | 20.00  | 24.00   |
| M COVER-BLA |         | FOG,LH          |          | 211 | im   |       | bo—  |           | 20.00  | 8.80    |
|             |         | G & R/REFL,L    |          |     |  |       | 00   | 129.00    |  | 103.20  |
|             |         |                 |          |     |  | +••   |      |           | 20.00  | 4.00    |
|             |         | DE REINF,RH     |          |     |  | 1.0   |      |           | 20.00  | 4.00    |
| M RETAINER- |         |                 |          |     |  | 1.0   |      |           | 20.00  | 1.60    |
| M WIRING HA |         |                 |          |     |  | 1.0   |      | 240.00    |  | 192.00  |
| M RAIL ASSY |         |                 |          |     |  | 1.0   |      | 341.00    |  | 272.80  |
| M ANTENNA A |         |                 | 107      |     |  | 1.0   |      |           | 20.00  | 42.40   |
|             |         | BUMPER SIDE, LI |          |     |  | 1.0   |      |           | 20.00  | 20.00   |
|             |         | BUMPER SIDE, RI | Н        |     |  | 1.0   |      |           | 20.00  | 20.00   |
|             |         | R ASSY-BWS      |          |     |  | 1.0   |      | 187.00    |  | 149.60  |
|             |         | R ASSY-BWS      |          |     |  | 1.0   |      | 187.00    |  | 149.60  |
| M MUFFLER A |         |                 |          |     |  | 1.0   |      | 1177.00   |  | 941.60  |
| M GASKET-EX |         |                 |          |     |  | 1.0   |      |           | 20.00  | 10.40   |
| M W/STRIP-T |         | . OPNG          |          |     |  | 1.0   |      | 128.00    | Contract Court   | 102.40  |
| M PANEL ASS |         | 2111255         |          |     |  | 1.0   |      | 1654.00   |  | 1323.20 |
| M BEAM COMP |         |                 |          |     |  | 1.0   |      | 551.00    |  | 440.80  |
|             |         | IT END MODULE   |          |     |  | 1.0   |      | 760.00    | STATE OF THE PARTY | 608.00  |
| M COVER-FR  |         |                 |          |     |  | 1.0   |      | 561.00    |  | 448.80  |
| M GRILLE AS |         |                 | _        |     |  | 1.0   |      | 673.00    |  | 538.40  |
| M MOULDING- | FRT BPR | LICENSE PLATE   | E        |     |  | 1.0   | 00   | 20.00     | 20.00  | 16.00   |

Confirm & accepted by

Authorized signatory and company stamp

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| MOTOR CLAIM DEPARTMENT                | Date In/Mileage           | 24/09/2020/ 0                      |  |  |
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|                                       | Colour/Trim               | ABP AURORA BLACK / WK SATURN BLACK |  |  |

| Account No | Terms     | Date/Time Printed    | CSE        | Operator          | THE STATE OF | WIP No     | 1  | Mary Area |
|------------|-----------|----------------------|------------|-------------------|--------------|------------|--|-----------|
| LAX00000   | Credit    | 24/09/2020/ 11:02    | QUK        | 282 / Kevin Leong |              | 21617      |  |           |
|            |           | Description of Goods | / Services |                   | Qty          | Unit Price | Disc%  | Amount    |
| M LIP-FRON | T BUMPER  |                      |            |                   | 1.00         | 56.00      | 20.00  | 44.80     |
| M SKID PLA | TE-FR BUN | MPER                 |            |                   | 1.00         | 111.00     | 20.00  | 88.80     |
| M COVER AS | SY-RADIAT | TOR GRILLE UPR       |            |                   | 1.00         | 186.00     | 20.00  | 148.80    |
| M GRILLE-F | RONT BUMP | PER                  |            |                   | 1.00         | 191.00     | 20.00  | 152.80    |
| M ABSORBER | -FRONT BU | JMPER ENERGY         |            |                   | 1.00         | 117.00     | 20.00  | 93.60     |
| M BRACKET- | FR BUMPER | R SIDE, LH           |            |                   | 1.00         | 17.00      | 20.00  | 13.60     |
| M BRACKET- | FR BUMPER | R SIDE,RH            |            |                   | 1.00         | 17.00      | 20.00  | 13.60     |
| M ULTRASON | IC SENSOR | R ASSY-BWS           |            |                   | 1.00         | 187.00     | THE RESERVE OF THE PARTY OF THE | 149.60    |



Confirm & accepted by

Nett 15,406.40 7% GST on 15406.40 1078.45

Total Payable 16,484.85

Authorized signatory and company stamp

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#### SINGAPORE ACCIDENT STATEMENT

#### **IMPORTANT NOTICE**

**EMail Address** 

- 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 witholding 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.

| Date Of Report         24/09/2020 10:59           Date Of Accident         24/09/2020 08:15           Exeat Location Of Accident         24/09/2020 08:15           Country/State of Loss         SINGAPORE           DETAILS OF OWN VEHICLE           Vehicle Registration Number           Manual Of Registered Owner         LIM CHIEW ENG           WRIC No         SXXXXT05D           WRIC No         SXXXXT05D           Woell Address         NOEMAIL           Mobile Phone No         (LOCAL) +65-93882839           Manufacturer         KIA           Modell Phone No         SORENTO-2.2 (A)           Vehicle Particulars         VER           Manufacturer         KIA           Modeld         SORENTO-2.2 (A)           Sexact Purpose for which vehicle was being used at time of accident         OTW BACK           Very you claiming under your own insurance policy or repair to your vehicle?         YES           Mo. Please state action to be taken         YES           Mo. Please state action to be taken         YES           Vehicle Category         PRIVATE CAR           Insurance Company         AIG ASIA PACIFIC INSURANCE PTE. LTD.           Over Occerage         COMPREHENSIVE           Gliet Poli   | aroresaru.   | ACCIDENT STATEMENT   |
|--|--|--|
| Date Of Accident 24/09/2020 08:15 Exact Location Of Accident 25KM PIE TOWARDS CHANGI SINGAPORE  DETAILS OF OWN VEHICLE  //ehicle Registration Number SMT8968  //ehicle Particulars  //ehicle Particulars  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category Number No  //ehicle Category No  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category No  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category No  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category No  //ehicle Category No  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category PRIVATE CAR  //ehicle Category No  //ehicle Category PRIVATE CAR  //ehicle | Date Of Report   |  |
| Exact Location Of Accident Country/State of Loss  DETAILS OF OWN VEHICLE  SINGAPORE  SINGAPORE  DISTAILS OF OWN VEHICLE  SINGAPORE  SINGA |  |  |
| Details of Loss  SINGAPORE  DETAILS OF OWN VEHICLE  Mane Of Registered Owner  Name Of Registered Owner  Name Of Registered Owner  Name Of Registered Owner  Note Mall  Noble Phone No  NOEMAIL  NOEMAIL  Noble Phone No  OTHERS-98509562  Wehicle Particulars  Manufacturer  Model  SORENTO-2.2 (A)  OTW BACK  We you claiming under your own insurance policy or repair to your vehicle?  Yes  To, Please state action to be taken  Vehicle Category  PRIVATE CAR  Insurance Company  Alame of Insurance Company  Alame of Insurance Company  Alame of Insurance Company  No  Policy Number  Driver  No  SAMSURI BIN OSMAN  SINGAPORE  SINGAPORE  SAMSURI BIN OSMAN  SAMSURI BIN OSMAN  SINGAPORE  SINGAPORE  SAMSURI BIN OSMAN  SINGAPORE  SINGAPOR  SINGA |  |  |
| PETAILS OF OWN VEHICLE  Abricle Registration Number  SMT8966B  Insured/Policyholder  Name Of Registered Owner  All CHIEW ENG SXXXX705D  NOEMAIL Mobile Phone No  (LOCAL) +65-93882839  OTHERS-98509562  Vehicle Particulars  Anaufacturer  Model SORENTO-2.2 (A)  OTW BACK  Ver you claiming under your own insurance policy or repair to your vehicle?  If No, Please state action to be taken  Vehicle Particulars  Alame of Insurance Company  Alame of Insurance Company  Alame of Insurance Company  Alame of Driver  Jordon  SAMSURI BIN OSMAN  Iffice Of Driving Pass  24/04/1985  Driving Experience  35 YEARS AND 5 MONTHS  Sender  MoLE  Molel  LIM CHIEW ENG SXXXX705D  NOEMAIL  LIM CHIEW ENG SXXXX705D  NOEMAIL  LIM CHIEW ENG SXXXX705D  NOEMAIL  LIM CHIEW ENG SXXXX636E  Alame of Driver  SAMSURI BIN OSMAN  Iffice Noemail SAMSURI BIN OSMAN  Iffice Noemail SAMSURI BIN OSMAN  Iffice Of Driving Pass  24/04/1985  Driving Experience  35 YEARS AND 5 MONTHS  Sender  Mobile Number  Ale COCAL) +65-98509562   |  |  |
| Vehicle Registration Number  Insured/Policyholder  Vame Of Registered Owner  VRIC No  SXXXX705D  SXXXXX705D  SXXXXX05D  SXXXXX0D  SXXXXX0D  SXXXXXD  SXXXXXXD  SXXXXXXD  SXXXXXXXX  | SHE OF THE RESIDENCE OF THE PARTY OF THE PAR |  |
| Insured/Policyholder Name Of Registered Owner Name Of Registered Owner Name Of Registered Owner Name Of Registered Owner NoEMAIL Nobile Phone No NOEMAIL Nobile Particulars Namufacturer Nobicle Particulars Namufacturer Nobicle Particulars Namufacturer Nobicle Particulars Nobicle Active Yes Nobicle  |  | The state of the s |
| All And Company   Lim Chiew and Section 10   | Insured/Policyholder   |  |
| RIC No SXXXX705D Email Address NOEMAIL Mobile Phone No (LOCAL) +65-93882839 OTHERS-98509562  Wehicle Particulars  Model SORENTO-2.2 (A)  Exact Purpose for which vehicle was being used at ime of accident Very you claiming under your own insurance policy or repair to your vehicle?  If No, Please state action to be taken Wehicle Category PRIVATE CAR  Insurance Company Alma of Oriver Bleet Policy No Coverage COMPREHENSIVE Cover Note Number  Driver  Blame of Driver Alma of Driver  | Name Of Registered Owner   | LIM CHIEW ENG  |
| Email Address Mobile Phone No (LOCAL) +65-93882839 Alternative Phone No OTHERS-98509562  Wehicle Particulars  Wanufacturer Model Exact Purpose for which vehicle was being used at lime of accident Are you claiming under your own insurance policy or repair to your vehicle?  I No, Please state action to be taken Vehicle Category PRIVATE CAR  Insurance Company Alame of Driver Alame of Dr | NRIC No  |  |
| Mobile Phone No Naternative No Naternative Phone Naternative Phone No Na | Email Address  |  |
| Alternative Phone No OTHERS-98509562  Vehicle Particulars  Manufacturer  Model SORENTO-2.2 (A)  OTW BACK  Veryous claiming under your own insurance policy or repair to your vehicle?  If No, Please state action to be taken  Vehicle Category PRIVATE CAR  Insurance Company  Jame of Driver  Jame of Driv | Mobile Phone No  |  |
| Manufacturer Model SORENTO-2.2 (A) SORENTO-2.2 (A) Sorent Purpose for which vehicle was being used at ime of accident Manufacturer Model SORENTO-2.2 (A) Sorent Purpose for which vehicle was being used at ime of accident Manufacturer Model Sore you claiming under your own insurance policy for repair to your vehicle? Move you claiming under your own insurance policy for goal to your vehicle? Move you claiming under your own insurance policy yes Move you claiming under your own insurance policy Move yellow Sore yellow yellow Sore y | Alternative Phone No   |  |
| Addel SORENTO-2.2 (A)  Exact Purpose for which vehicle was being used at ime of accident Are you claiming under your own insurance policy or repair to your vehicle?  If No, Please state action to be taken  Alga Asia Pacific Insurance PTE, LTD.  Company  Aliga Asia Pacific Insurance PTE, LTD.  Comprehensive  No  Policy Number  Alouer Of Coverage  Asia Masuri Bin Osman  Aliga No SXXXX636E  Alare Of Birth  Cocupation  Outdoor  Diving Pass  Diving Experience  Sender  MALE  Mobile Number  OTW BACK  ATW BACK  YES  PRIVATE CAR  PRIVATE CAR  ASIA PACIFIC INSURANCE PTE, LTD.  COMPREHENSIVE  NO  SAMSURI BIN OSMAN  SXXXX636E  16/06/1958  Outdoor  Outdoor  SYXXX636E  16/06/1958  Outdoor  Outdoor  Alare Of Driving Pass  Oving Experience  SYEARS AND 5 MONTHS  MALE  Mobile Number  | Vehicle Particulars  |  |
| Adodel SORENTO-2.2 (A)  Exact Purpose for which vehicle was being used at ime of accident Are you claiming under your own insurance policy or repair to your vehicle?  If No, Please state action to be taken  Vehicle Category PRIVATE CAR  Insurance Company  Identify American Company  Identify | Manufacturer   | KIA  |
| Are you claiming under your own insurance policy or repair to your vehicle?  If No, Please state action to be taken  Yehicle Category  Insurance Company  Mame of Insurance Company  Alia ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE  NO  Policy Number  Cover Note Number  Priver  SAMSURI BIN OSMAN  SXXXX636E  Date Of Birth  16/06/1958  Occupation  Date Of Driving Pass  Priving Experience  35 YEARS AND 5 MONTHS  Bender  MALE  (LOCAL) +65-98509562  | Model  |  |
| or repair to your vehicle?  If No, Please state action to be taken  //ehicle Category PRIVATE CAR  nsurance Company  Jame of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE  Fleet Policy NO  Policy Number  Priver  Jame of Driver  Jame of Birth  Jame of Birth  Jame of Birth  Jame of Driving Pass  Jame of Driving Pass  Jame of Driving Experience  Jame of Driving Experience  Jame of Driving Experience  Jame of Driving Pass  Jame of Driving Experience  Jame o | Exact Purpose for which vehicle was being used at time of accident   |  |
| Rehicle Category Insurance Company Idame of Coverage Idame of Policy Idame of Driver Id | Are you claiming under your own insurance policy for repair to your vehicle?   | YES  |
| Alg ASIA PACIFIC INSURANCE PTE. LTD.  Fige Of Coverage COMPREHENSIVE Fileet Policy NO Policy Number 1800042986  Cover Note Number  Cover Note Number  Cover Note Number  SAMSURI BIN OSMAN  IRIC No SXXXX636E Date Of Birth 16/06/1958 Cocupation OUTDOOR Date Of Driving Pass 24/04/1985  Criving Experience 35 YEARS AND 5 MONTHS  Gender MALE  Mobile Number  Alg ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE NO  AND  ALIGN ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE NO  AND  ALIGN ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE NO  AND  AND  AND  AND  AND  AND  AND   | If No, Please state action to be taken   |  |
| Alame of Insurance Company Type Of Coverage COMPREHENSIVE NO Policy Number 1800042986 Cover Note Number  SAMSURI BIN OSMAN SXXXX636E Cover Note Number Cover Note Number  SAMSURI BIN OSMAN COVER SAMSURI BIN OSMAN COVER SAMSURI BIN OSMAN SXXXX636E Cover Note Number Cover Note Number  SAMSURI BIN OSMAN SXXXX636E  SAMSURI BIN OSMAN SXXXX63CE SAMSURI BIN OSMAN SXXXX63CE SAMSURI BIN OSMAN SXX | Vehicle Category   | PRIVATE CAR  |
| COMPREHENSIVE Fleet Policy NO Policy Number 1800042986  Cover Note Number  Priver  Name of Driver Name of Driver Name of Birth No Policy Number Note Of Birth No Policy Number Note Of Driving Pass Note Of Driving Pass Note Of Driving Experience Note Of Number  Note Number Note Numbe | Insurance Company  |  |
| Fleet Policy Policy Number 1800042986  Cover Note Number  Priver  Name of Driver SAMSURI BIN OSMAN SXXXX636E Pote Of Birth Poccupation Pote Of Driving Pass Potiving Experience Sender Mobile Number  NO 1800042986  SAMSURI BIN OSMAN SXXXX636E  OUTDOM SXXXX636E  OUTDOOR 24/04/1985  STEARS AND 5 MONTHS Sender MALE Mobile Number  (LOCAL) +65-98509562   | Name of Insurance Company  | AIG ASIA PACIFIC INSURANCE PTE. LTD.   |
| 1800042986   1800042986   20   20   20   20   20   20   20   2   | Type Of Coverage   | COMPREHENSIVE  |
| Cover Note Number  Oriver  Name of Driver  Name of Driver  SAMSURI BIN OSMAN  SXXXX636E  Date Of Birth  Cocupation  OutDoor  Date Of Driving Pass  Oriving Experience  35 YEARS AND 5 MONTHS  Gender  MALE  Mobile Number  (LOCAL) +65-98509562  | Fleet Policy   | NO   |
| Alame of Driver  SAMSURI BIN OSMAN  NRIC No SXXXX636E Date Of Birth Decupation OutDoor Date Of Driving Pass Driving Experience STATE AND 5 MONTHS Gender Mobile Number  (LOCAL) +65-98509562   | Policy Number  | 1800042986   |
| Name of Driver  SAMSURI BIN OSMAN  SXXXX636E  Date Of Birth  Decupation  OutDOOR  Date Of Driving Pass  Driving Experience  35 YEARS AND 5 MONTHS  Gender  Mobile Number  (LOCAL) +65-98509562   | Cover Note Number  |  |
| NRIC No SXXXX636E Date Of Birth 16/06/1958 Occupation OUTDOOR Date Of Driving Pass 24/04/1985 Oriving Experience 35 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-98509562  | Driver   |  |
| Date Of Birth  16/06/1958  Occupation  Oate Of Driving Pass  24/04/1985  Oriving Experience  35 YEARS AND 5 MONTHS  Gender  MALE  Mobile Number  (LOCAL) +65-98509562  | Name of Driver   | SAMSURI BIN OSMAN  |
| Occupation OUTDOOR Date Of Driving Pass 24/04/1985 Oriving Experience 35 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-98509562   | NRIC No  | SXXXX636E  |
| Pate Of Driving Pass  24/04/1985  35 YEARS AND 5 MONTHS  Gender  MALE  Mobile Number  (LOCAL) +65-98509562   | Date Of Birth  | 16/06/1958   |
| Oriving Experience 35 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-98509562 Fax Number   | Occupation   | OUTDOOR  |
| Gender MALE Mobile Number (LOCAL) +65-98509562 Fax Number  | Date Of Driving Pass   | 24/04/1985   |
| Mobile Number (LOCAL) +65-98509562 Fax Number  | Driving Experience   | 35 YEARS AND 5 MONTHS  |
| ax Number  | Gender   | MALE   |
|  | Mobile Number  | (LOCAL) +65-98509562   |
| Contact Number   | Fax Number   |  |
|  | Contact Number   |  |

NOEMAIL

Address

BLK 355A SEMBAWANG WAY #07-102

Postcode

751355

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

d OTHER - FAMILY DRIVER

Vehicle Registration Number of Driver's Own

-

Vehicle

Insurance Company of Driver's Own Vehicle

-

# General Information of the Accident

Type Of Accident

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

#### Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

3

involved in the accident

.....

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

NO

ambalanoo.

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

2.255

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

SLW7275P

Vehicle Make/Model/Colour

HONDA SHUTTLE

**Details Of Properties** 

FRONT OF CAR

Vehicle Category

PRIVATE CAR

Name of Driver

TAN CHENG HUAT

NRIC/Passport Number

SXXXX966H

Contact Number

\*\*\*\*\*

Address

Postcode

· cottoodo

Insurance Company Name

Nature Of Damage

FRONT DAMAGE

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

**SLT1387E** 

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR ANDREW ONG

97476081

#### Sketch Plan

#### SKETCH PLAN

# IMPORTANT NOTICE

- Please report <u>correctly</u> 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
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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
- 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
- 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)
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary
  - (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
- (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
- 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.
- 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 #2

| SKETCH PLAN  | HELLING  |  |
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| and to regular part  | acuters are true in every respect.   |  |
|  | 21   |  |
|  |  |  |
| vholder's Signature<br>& Time:   | Driver's Signature   |  |
| w same:  | (If driver is not the policyholder)  | Reporting Centre Personnel's Signature Name: |
| AC Statistifications, V3   | Date & Time:   | NRIC/FIN No.:                                |



# CERTIFICATE OF INSURANCE

#### KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: LIM CHIEW ENG (LIN QIUYING)

Period of Insurance

: 07 May 2020 To 06 May 2021

Engine No.

: D4HBJH364677

Chassis No.

: KNAPH81BMJ5448538

Vehicle No. Policy No.

: SMT8966B

Endorsement No.

: 1800042986-01 : 000000000353175

**Issued Date** 

: 26 Aug 2020

#### ABOUT THE COVER

Make/Model

: KIA SORENTO 2.2 A DIESEL

Engine Capacity/Tonnage: 2,199.00 CC

Sum Insured : Market Value

First Year of Registration : 2018

**Driver Restriction** 

: NA

Off Peak Car : No

Insuring with COE/PARF : 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

Mileage Condition

: Unlimited Mileage

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), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

#### EXCESS

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

LIM CHIEW ENG (LIN QIUYING) - \$600 (Own Damage), \$600 (Flood Cover)

# 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 (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000 3.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800

4.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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.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: NA

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 the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504622216

C&CKICP2 - KEENG

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSC



