

ASS. REC. BY: Tang

REF: CS/ALG20010816/Tiva3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: 169

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

<input checked="" type="checkbox"/>	
N/S	O/S

Bal. or Market Value: 960K.

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: Edwin Vehicle: IN / OUT

Veh No: SMA3429T Yr Regn: 2018, June

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Kia Forte. c.c. 1591

Colour: Grey A/C: Insured / Std / NI / NA

Sp. Reading: _____ T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KWAFJ411 MJ 5764930.

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 205/55R16

R: ~ ~

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Nexen

Front _____ Rear _____

R/Bal. 0 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. _____ D.O.I. 7/10/20

Survey held at C&C Pandan Jaya

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Frt N/S

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction

Date/Time, File Pass to? : Preli. Report

1) : Final Report

Date/Time, File Return to?

2) 19/10/20-Typist

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee: _____

Transportation: _____ \$ + RS. _____ \$

Photos _____

Others _____

TOTAL _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)

Rep. Format: Merimen

Lump Sum / L.S. (\$) \$3150.80



CYCLE & CARRIAGE

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



ESTIMATE

GST Reg No : MR-8500111-X

Co Reg No : 199405410K

Table with 2 main columns: Invoice Name & Address (AIG Asia Pacific Insurance Pte. Ltd.) and Owner Name & Vehicle Info (Tan Hui Lee, KIA/FORTE K3 1.6 A L 189).

Table with 4 columns: Account No (LAX00000), Terms (Credit), Date/Time Printed (06/10/2020/ 13:13), CSE (QUE), Operator (261 / Edwin Caina), and WIP No (22253).

Main items table with columns: Description of Goods / Services, Qty, Unit Price, Disc%, and Amount. Includes items like RENEW FRT BUMER & LHF FENDER, RESPRAY FRT BUMPER & LHF FENDER, etc.

Estimate

SURVEYOR NAME: Tan Hui 97495799
SURVEYOR SIGNATURE: [Signature]
DATE: 7/10/20 @ 3pm
REMARKS: Not authorized, Revert 04 days
Resurvey before paint Ex: to be advise.
tanphui@kkhauto.com

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:

Confirm & accepted by

7% GST on 4042.00 Net 4,042.00 282.94
Total Payable 4,324.94

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. You must also advise us if you are unable to pay the deposit.

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	06/10/2020 11:06
Date Of Accident	05/10/2020 21:40
Exact Location Of Accident	TURNING LEFT ONTO PASIR RIS DR 8
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA3429T
Insured/Policyholder	
Name Of Registered Owner	TAN HUI LEE
NRIC No	SXXXX597G
Email Address	TAN.HUILEE@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91809456
Alternative Phone No	OTHERS-97730120
Vehicle Particulars	
Manufacturer	KIA
Model	FORTE K3-1.6 EX (A)
Exact Purpose for which vehicle was being used at time of accident	RETURNING HOME FROM DINNER WITH WIFE & DAUGHTER
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
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	1800063172-02
Cover Note Number	

Driver

Name of Driver	WILLIAM WONG
NRIC No	SXXXX875I
Date Of Birth	27/08/1985
Occupation	INDOOR
Date Of Driving Pass	28/07/2009
Driving Experience	11 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97730120
Fax Number	
Contact Number	
E Mail Address	WILLIAMWONG1985@HOTMAIL.COM

Address BLK 294 PUNGGOL CENTRAL #05-527
 Postcode 820294
 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 COLLIDED INTO MOTORCYCLIST
 Weather Conditions NIGHT,DARK
 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? YES
 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) 3
 Passenger 1 NAME: : TAN HUI LEE
 GENDER: : FEMALE
 Passenger 2 NAME: : DRIVER'S DAUGHTER
 GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name 569784
 Police Station Address ROAD: 51 ANG MO KIO AVENUE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: - 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? YES
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1:

Vehicle Registration Number FBQ7585U
 Vehicle Make/Model/Colour YAMAHA/BLACK
 Details Of Properties MINOR SCRATCHES ON LEFT HAND SIDE BODY & SCRATCHES AT EXHAUST
 Vehicle Category MOTORCYCLE
 Name of Driver JIMMY YEE

NRIC/Passport Number	SXXXX738I
Contact Number	97893875
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	SCRATCHES
No. Of Passenger (Including Driver)	

: DETAILS OF INJURED PERSON 1:

Name	JIMMY YEE
Approximate Age	
Injuries Sustain	BACK PAIN,FINGER SWOLLEN PER CONVERSATION
Injured person in which vehicle?	FBQ7585U
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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.
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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)**

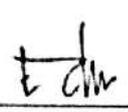
I understand, acknowledge, agree and consent that:

- (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:



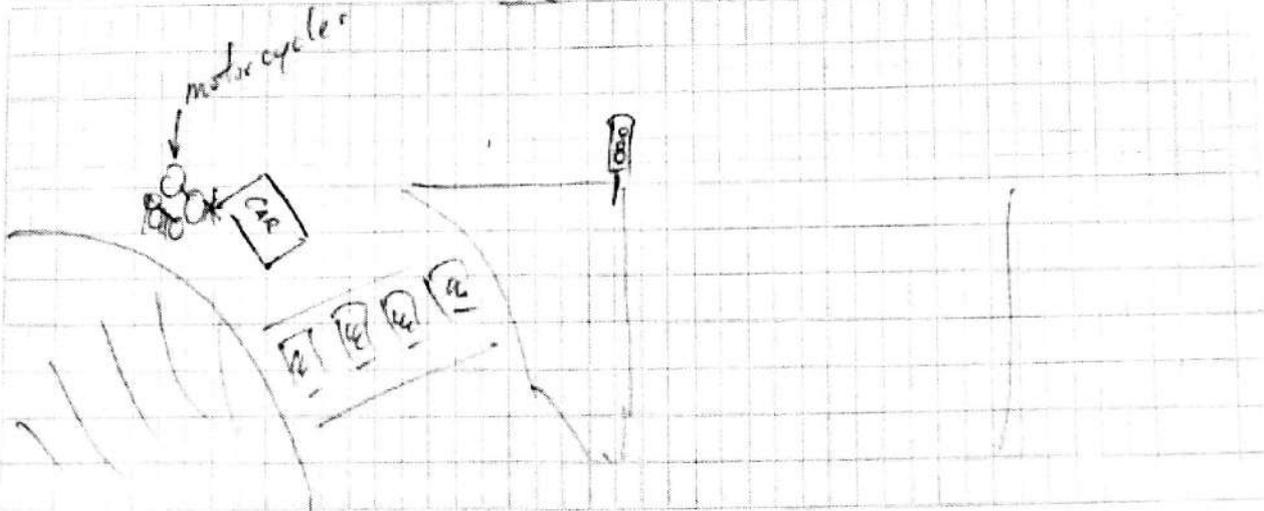
Driver's Signature
(If driver is not the policyholder)
Date & Time: 6 Oct 2020
1227



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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 5-Oct-2020 at 9:40pm, I William Henry was driving turning left onto Paris Riv Dr B.

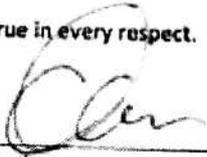
While turning left, I slow down and look towards the right side for oncoming traffic (no cars) and unknowingly knock a stationary bike at the left hand side of my car - Capture in Front camera.

The rider fell off the bike upon impact and got up immediately. Capture in Rear camera.

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: 6-Oct-2020
12:53


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

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S85708751**
 Name
WILLIAM WONG

Birth Date **27 Aug 1985**
 Issue Date **28 Jul 2009**

D01767641J

FOR C&C USE ONLY

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. **S85708751**



Name
WILLIAM WONG

Race
CHINESE

Date of birth
27-08-1985

Country/Place of birth
HONG KONG

Sex
M

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

Class 3 Motor Cars=<3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =<2500kg

PASS DATE
28 Jul 2009

FOR C&C USE ONLY

Licence No: S85708751

NF 428A

5380956

FOR C&C USE ONLY

NRIC No. **S85708751**

Date of issue
17-09-2015

Address
**APT BLK 294 PUNGGOL CENTRAL
 #05-527
 SINGAPORE 820294**

Kia Cerato K3 1.6A

- Overview
- Financial
- Accessories
- Similar
- Research
- Photos
- Map

PREMIUM AD



Price	\$60,800		
Depreciation ⓘ	\$7,120 /yr View models with similar depre	Reg Date	26-Jun-2018 (7yrs 8mths 18days COE left)
Mileage	40,800 km (17.9k /yr)	Manufactured ⓘ	2017
Road Tax ⓘ	\$738 /yr	Transmission	Auto
Dereg Value ⓘ	\$38,780 as of today (change)	OMV ⓘ	\$11,620
COE ⓘ	\$38,941	ARF ⓘ	\$11,620
Engine Cap	1,591 cc	Power	95.3 kW (127 bhp)
Curb Weight ⓘ	1,295 kg	No. of Owners ⓘ	1
Type of Vehicle	Mid-Sized Sedan		

Features

Smooth & Responsive 1.6L 4 Cylinders Dual CVVT Engine Matted With 6 Speed Transmission, Fuel Consumption 8.9 Litre/100km Or 11.18km/litre.

Accessories

Factory Fitted Infotainment System With Reverse Camera & Sensors, Leather Seats, Sports Rims, Remote Alarm With Key.

Description

1 Owner Come & Cycle And Carriage Unit! Non-PHV UNIT! Well Maintain By His Meticulous Owner. Full Agent Service With 10 Year Warranty! Best Cost Effective Family Saloon In Its Class Spacious & Economical On Running Cost! 100% Accident-Free Evaluation Welcome. We Offer Trade In And Flexible Loan Services. Hurry Call Us! To Secure A Viewing By Appointment Only!

Category

PARF Car, Premium Ad Car

Status

Available

Resources



Car Valuation - Free
Find out the market value of your existing car for free. Get started



Vehicle Evaluation
Afraid of lemons? Request to have this car evaluated professionally. Find out more



sgCarMart Used Car Warranty
Get our warranty for \$0 future car repair bills. Learn more

Posted on: 08-Sep-2020 | Last Updated on: 11-Sep-2020

Upfront Payment

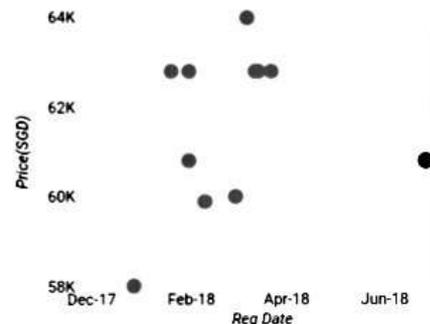
» more Financial Info

Transfer Fee	\$25	
Down Payment ⓘ	\$18,240 (change)	Maximum 70% Loan
1st Instalment ⓘ	\$612	Based on 2.98% interest rate
Total Upfront Payment ⓘ	\$18,877 (excluding insurance)	Check with seller for exact figure



Price Chart

Summary



Click on the point to view the vehicle

- ☆ Shortlist
- 📄 Compare
- 📄 Report Error
- ⚙️ More Actions

Seller Information

ACM Automobiles Pte Ltd

14 vehicles for sale 17 sold in past 3 mths



📍 3 Ang Mo Kio Street 62 #01-30
Link @ AMK
Search cars nearby

- 👤 Alan 83394537
- 👤 Arthur 96527887
- 👤 Brad Boo 90963087

