ASS REC. BY: STEVE ALU.	<u>,                                    </u>
ASSI	GNMENT 10/7/19
From: Dale:	Veh No: SMM 6890 K Yr Regn: 10/7/19
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry /- Text / Prime Mover /
OD/ TP / WS / TP RES / OD RES / EVA / INV / MY	Truck / Trailer or
To Inspect Vehicle No:	Make: Mit Subishi Attraye c.c Tay
at Workshop m/s	Colour A/C: Insured / Std / NI / N
500 MARK CANADA CONTROL OF CONTRO	Sp.Reading : 73732 T/Radio; Insured / Std / NI / N
Insured:	Eng/No:
Policy No.	CNO: MMBSTABAKHUUZ163
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inforder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NII I SIRIM I STO AIRIM OF
~ <del>~ ~ ~ ~</del>	Tyre Size: F: 185/55R15
(Policy Condition)	R:
Remark: The veh had commenced its N/S 10/S	BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or B
Bal. or Market Value:	Fron Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. S : mm . R/Bal. S mr
Consistent : Yes or No	U/Bal. 5 mm V/Bal. 3 mr
Por : Yes of No	D.O.A. 30/12/79
SV. Repairs.	Survey held BI (ycle & Call gyp
Lum Sum: % 3 Val.: Yes of No	Des. of Damages Frt Rear I O/S I N/S I U/C I Rooftop or
CA / REV / REP. / 24 HRS	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time   Action / Instruction	
MV- 56K	
	Days Of Repair:
	Resurvey No. of Trip: Survey Fee:
ale/Tuns, File Return to?	Transportation:
Add Fee	: Site Insp (\$)_s -RS_Si
	: Interview (\$) Photos
no — A Council I	: Tech. Invs (8 ) Others
apropriorities :	:Weetend (#
100 Sun 11.8.1: (*	YOTAL

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### CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED PANDAN GARDENS CUSTOMER SERVICE CENTRE

MITSUBISHI MOTORS

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

#### **ESTIMATE**

GST Reg No : MR-8500111-X

	T	Date/Time Printed	CSE	Operator		WIP No			
Account No	Terms	31/12/2020/ 08:54	QUE	261 / Edwin Caina		61336			
FAX00001	Credit	Description of Good	/W/201711		Qty	<b>Unit Price</b>	Disc%	Ar	nount
E PNT88000 RENEW FRT	BUMPER	, FRT BUMPER BODY K	1		450 X 2			921	2700.00
PNT98000 RESPRAY F	RT BUMPE	R & RHF FENDER	KIT , BON	NET , FRT SUPPORT ,	350 × 3			1050	
LHF FENDE PNT88000	R & RHF	FENDER						7	100.0
REMOVE &	REFIT AC	C COND & RADIATOR						!	80.0
	RCON GAS	5	-	П	п				30.0
CHECK WIR 10028901 TO CARRY	OUT DIAG	CTRICAL SYSTEM & ADV	UST HEADUA HI-SCAN BR	ima	91	7			120.0
USING HI-	SCAN PRO	TEST	N <del>ot</del> es						50.0
SUPPLY FR	T NUMBER	R PLATE WITH CASING						60	80.0
SUPPLY BO SUPPLY BO SUNDRY	DY KIT S	SEALANT							120.0
APPLY ANT	I CORROS	SION ON AFFECTED ARE	AS					20	30.0
Sundries M FACE,FR B M CLIP,FR B M COVER,FR M COVER,HEA M MARK,THRE	BUMPER BUMPER ADLAMP SI EE-DIA	7/108			1.00 5.00 1.00 1.00 1.00	12.00 62.00 69.00 165.00	23.00 23.00 23.00 23.00 23.00		541.3 15.4 9.2 47.7 53.1 127.0
M GRILLE,FR M BRACKET,F M BRACKET,F M GARNISH,F	FR BUMPE	R, LH / DK			1.00 1.00 1.00	13.00 127.00			10.03 10.03 97.79
M GARNISH, F	FR BUMPE	R,RH X			1.00	127.00	23.00		97.79

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.



### CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

### **ESTIMATE**

GST Reg No : MR-8500111-X

: 197701469G		Owner Name & Vehicle Info
Invoice Name & Address  AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPARTMENT 78 SHENTON WAY #08-16 AIG BUILDING SINGAPORE 079120 Contact No 6419 1000	Reg No/Reg Date	KCV11692/Mr Tan Han Qi SMM6890K*DC17/ 10/07/201 / 23032
	Date In/Mileage Chassis No	MMBSTA13AKH002063
	Engine No	3A92UHT5347
		MIT/19MY ATTRAGE 1.2 CVT UO1 TITANIUM GREY M/ BK BLACK

	Ŧ	Date/Time Printed	CSE	Operator		WIP No		
Account No	Terms	31/12/2020/ 08:54	OUE	261 / Edwin Caina		61336	-1971	
-AX00001	Credit	Description of Good			Qty	Unit Price		Amount
			37 Del Vices		1.00	554.00		426.5
M GRILLE, RA		/ UK			1.00	734.00		565.1
	00	,			1.00		23.00	43.1
HINGE, HO	D RH >	7			1.00	56.00	23.00	43.
HINGE, HOC	, , , ,	All			8.00	3.00	23.00	18.
CLIP, HOOD	INSULAT	TOR / IT			1.00		23.00	53.
LATCH, HOC	D X	1			1.00	1055.00	23.00	812.
PANEL ASS	Y, FR END	)			1.00	65.00	23.00	50.
PANEL, HEA	DLAMP SU	IPPORJ, UPR X			1.00	11.00	23.00	8.
PANEL, AIR	GUIDE,L	.н - л			1.00		23.00	8.
PANEL, AIR	GUIDE, R	RH - 1		•	m1.00	758.00		583.
CONDENSER	ASSY,A/	C REFRIGE	ᆺᇧᇦ		5.00		23.00	86.
PANEL, AIR	GUIDE	" 15	2571	1120121			23.00	744.
RADIATOR	ASSY '-		2111	ima			23.00	59.
FAN, COOLI	NG X		$\mathcal{D}$		1.00		23.00	100.
SHROUD, CO	OLING FA	IN X			1.00		23.00	368.
MOTOR, COO	LING FAN				1.00		23.00	508.
HEADLAMP		CUT				660.00	23.00	508.
HEADLAMP		'!			1.00	1643.00	20.00	1314.
UNPAINTED		s / BR			1.00		23.00	20.
LLC 4L					1.00		00.00	17.
EMBLEM EC	0 X				1.00	17.00	00.00	1/.
Liberii es	~							
			Steve CL	KK) 31/12/20 - NM AL	,11-1000			
		SURVEYOR NAME: _	00	Ni.A Al			1	
		SURVEYOR SIGNATUR	$e_{F}$ : $OV$	- NPI AL				
		00111210110101010101	Ex	(cess - 1				
		DATE:						
		NORTH NEW AND ADMINISTRA	U	dus			1	
		REMARKS:	1/0					
			p/p	Wayse in the cook of Anna Anna Anna Anna			- 1	
			<i>p</i> (	),,				
Confirm & a	econtad b	W	11	ac sm				
KK Auto Cons			1	9/1		Net	t	12,758.
he Repairer of				9.3	% GST on	12758.9		893.
To resurvey before	re/after spray	painting		3.6	4 031 VII	22,000	10T/2	
To display damag	ged part(s) du	uring resurvey			To	tal Payabl	e	13,652.
Parts prices are:		16 MARK MATERIAL STATE OF THE S			10		· · ·	1724525 <del>4</del> 256655- <del>2</del> 25665
Third narty surve	y is on a "Wit	hout Prejudice" basis						

Validity of this estimate 48-14 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 any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered any additional parts or labour which may be required after repair work has commenced. 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.

\$C1A20CU0004 / CYCLE & CARRIAGE AUTOMOTIVE PTE LTD ENTRY DATE & TIME: 30/12/2020 17:13 (SGT) SUBMITTED BY: TAN SHIEH YUEN VERSION. 1 (30/12/2020 17:13 (SGT))



## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process

- 1. Flease report correctly the details of the accuse it is speed by the Policyholder and/or the Authorised Drivet
  2. This Form must be completed by the Policyholder and/or the Authorised Drivet
  3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to require the provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to require the provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to require the provided must be as truthful and accurate as possible.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies. policy liability.

Any false reporting may be referred to the Police for Investigation.

Any false reporting may be referred to the Police for Investigation.

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 logement 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 afcressid.

#### ACCIDENT STATEMENT

30/12/2020 17:13 (SGT) Date of Submission 30/12/2020 15:30 (SGT) Date of Accident Boon Lay Way, Singapore 649846 **Exact Location of Accident** Additional Location Information **BOON LAY WAY** Country/State of Loss Singapore

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number SMM6890K

#### INSURED/POLICYHOLDER

Is company? Name Of Registered Owner TAN HAN QI NRIC No SXXXX913F Email Address HANQI1984@GMAIL.COM Mobile Phone No (Phone) +65-91154908 Alternative Phone No +65-91154908

#### VEHICLE PARTICULARS

Manufacturer

Mitsubishi Model Attrage Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Yes Vehicle Category Private car

#### INSURANCE COMPANY

Name of Insurance Company AIG Type of Coverage Comprehensive Fleet Policy No Policy Number 1900117812 Cover Note Number

#### DRIVER

Name of Driver TAN HAN QI NRIC No SXXXX913F Date Of Birth 10/02/1984 Occupation Indoor

/	
ate Of Driving Pass	01/08/2005
riving experience	15 YEARS AND 4 MONTHS
	Male
A LETA NI MARIANA	(Phone) +65-91154908
	+65-91154908
	HANQI1984@GMAIL.COM
	BLK 93B TELOK BLANGAH STREET 31 #12-181
NO SOCIETA DE CONTRACTOR DE CONTRACTOR DE CONTRACTOR DE LA CONTRACTOR DE	
	102093
	Yes
	•
If No, Relationship of the Driver With the Driver Own Other Vehicles?  Does Driver Own Other Vehicles? Vehicle Owned by Driver	No
- Limber of Office Verice	
Vehicle Registration Number of State	
Insurance Company of Other Vehicle Owned by Driver	•
GENERAL INFORMATION OF THE ACCIDENT	
	V 1. 2
Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Wet
and the second of the second of	
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	Ū
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Soliciting/offering accident claims assistence.	
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	:=
and the second s	
CIRCUMSTANCES OF ACCIDENT	
REFER TO ATTACHMENT	
ATTACHMENT(S)	
ATTACHMENT(6)	
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	R VEHICLE PROPERTY 11
Vehicle Registration Number	SLU4077A
Vehicle Manufacturer Vehicle Model	Toyota Sienta
Vehicle Model Vehicle Variant	- Sierra
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	Tig.
Contact Number	(Phone) +65-81811108
Address	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
Address complement	•
Postcode	<del>-</del>
Insurance Company Name	•

ture Of Damage

etails of property damaged in accident

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.
- 2. This rotter as a truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 3. Information provided must be as truthful and accurate as possible. allow insurance companies to repudiate policy liability.
- allow 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

- (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan 5mm6809k BT 45 MUZE

Cir	rcumstances of the Accident
_	- turn on slight Right toward Jumy Part
_	- ore vectore and infant of me.
_	- Buth mechacle assis stopped before more off.
	- subtenly, front we charte more oldit and follow too dos ont cracket on year whoels of the weekere.
_	- subdenly, front we choice more of the vectore.
	and cracked on year when
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SA VE	
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_	
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#### Declaration

We declare the foregoing particulars are true in every respect.

13

Policyholder's Signature / Date & Time

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

E M

Witnessed by Reporting Centre Personnel



# Trieb Land

## Complete Com CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Tan Han Qi

programme and the second sections

Period of Insurance

: 10 Jul 2019 To 09 Jul 2021

Engine No.

: 3A92UHT5347

: MMBSTA13AKH002063 Chassis No.

Vehicle No.

: SMM6890K

Policy No.

: 1900117812

Endorsement No. **Issued Date** 

: 22 Aug 2019

## ABOUT THE COVER

Make/Model

: MITSUBISHI ATTRAGE 1.2 CVT

Engine Capacity/Tonnage : 1,193.00 CC

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2019

Insuring with COE/PARF : Yes

Driver Restriction

: NA

Person or Classes of Persons Entitled to Drive\*:

a) The Pull younger.
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

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 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.

\* 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 - \$0 Section 1

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Tan Han Qi - \$600 (Own Damage)

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

1.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add; 600 Sin Ming Ave Singapore 575733 69328000 2 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add; 20 Leng Kee Rd Singapore 159094 64708688 3 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add; 330 Ubi Rd 3 Singapore 408650 67461000 4.Cycle & Carriage Body & Paint Centre Add; 209 Pandan Gardens Singapore 609339 65684501

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency holline at +65 6338 6200. Alternatively, you may refer to AIG website 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: DBS BANK LTD

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

0504623206

FULCOMICP2 - JN

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE