

ASS. REC. BY:

REF:

CC4/AIG 21000850/PA3

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

00/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: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_

Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_

Consistent? : Yes or No

ESL Repairs: \_\_\_\_\_

days

Res.: Yes or No

Turn Sum: \_\_\_\_\_

%

3 Val.: Yes or No

QA / REV / REP. / 24 HRS

Date: \_\_\_\_\_

Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: \_\_\_\_\_

SMK 6309T

Yr Regn: \_\_\_\_\_

17/4/19

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

Truck / Trailer or

Make: \_\_\_\_\_

Mitsubishi Attrage

c.c. 1193

Colour: \_\_\_\_\_

Red

A/C: Insured / Std / NI / N

Sp. Reading: \_\_\_\_\_

2383

T/Radio: Insured / Std / NI / N

Eng/No: \_\_\_\_\_

C/No: \_\_\_\_\_

MMRSTAJBAKH 901161

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: \_\_\_\_\_

F: \_\_\_\_\_

185/55R15

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or

Front

Rear

R/Bal. \_\_\_\_\_

S

mm

R/Bal. \_\_\_\_\_

S

mm

L/Bal. \_\_\_\_\_

S

mm

L/Bal. \_\_\_\_\_

S

mm

D.O.A. \_\_\_\_\_

11/1/21

D.O.A. \_\_\_\_\_

26/1/21

Survey held at \_\_\_\_\_

cycle &amp; carriage

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

The UIC / Chassis frame / Body Structure affected due to collision

Date / Time

Action / Instruction

MV-SSK

Date/Time, File, Pass to?

☐

: Prel. Report

☐

: Final Report

Date/Time, File Return to?

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S - RS - SI

Police

Others

TOTAL

Add Fee: \_\_\_\_\_

☐

: Site Insp (\$ \_\_\_\_\_)

☐

: Interview (\$ \_\_\_\_\_)

☐

: Tech. Invs (\$ \_\_\_\_\_)

☐

: Weekend (\$ \_\_\_\_\_)



CYCLE &amp; CARRIAGE

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

Job Reg No : 1977014696

Invoice Name & Address	Owner Name & Vehicle Info
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPT 78 SHENTON WAY #08-16 AIG BUILDING SINGAPORE 079120 Contact No 6419 1892	Cust No/Name KCV11044/KARUPPIAH VELU Reg No/Reg Date SMK6309J*DC17/ 17/04/201 Date In/Mileage / 0 Chassis No MMBSTA13AKH001161 Engine No 3A92UHN8829 Make/Model MIT/19MY ATTRAGE 1.2 CVT Colour/Trim PO1 RED METALLIC / BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
KAX00008	Credit	12/01/2021/ 15:44	QUK	282 / Kevin Leong	61742		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000 REPLACE REAR BUMPER, BOOT, END PANEL & AFFECTED AREA REPAIR ON REAR RH FENDER				450 X 2	900		2250.00
E PNT98000 PAINT WORK ON REAR BUMPER, BOOT, REAR RH FENDER, END PANEL & BODY KIT				350 X 3	1050		1750.00
E PNT88000 REMOVE & INSTALL REAR PARKING ASSIST							120.00
E PNT88000 TO REMOVE & INSTALL REAR BOOT COMPARTMENT FOR FACILITATE REPAIR					(photo)	?	120.00
M SUNDRY TO APPLY BODY SEALANT							40.00
M SUNDRY PERFORM RUST PREVENTION						?	40.00
A 54900099 CHECK WIRING & CHASSIS ELECTRICAL SYSTEM							30.00
A 10028901 TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST USING HI-SCAN PRO TEST							120.00
M SUNDRY TO SUPPLY C & C EMBLEM						40	50.00
M SUNDRY SUNDRIES						20	50.00
M LAMP ASSY, COMB, RR RH				1.00	335.00	23.00	257.95
M FACE, RR BUMPER				1.00	748.00	23.00	575.96
M BRACKET, RR BUMPER, RH				1.00	28.00	23.00	21.56
M PANEL, RR END				1.00	425.00	23.00	327.25
M WEATHERSTRIP, TRUNK LID				1.00	157.00	23.00	120.89
M PANEL, TRUNK LID				1.00	791.00	23.00	609.07
M HINGE, TRUNK LID, RH				1.00	203.00	23.00	156.31
M HINGE, TRUNK LID, LH				1.00	203.00	23.00	156.31
M LATCH, TRUNK LID				1.00	218.00	23.00	167.86
M MARK, THREE-DIA				1.00	69.00	23.00	53.13
M MARK, ATTRAGE				1.00	21.00	23.00	16.17

Confirm &amp; 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

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

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



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GST Reg No : MR-8500111-X

Co Reg No : 197701469G

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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
KAX00008	Credit	12/01/2021/ 15:44	QUK	282 / Kevin Leong	61742			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
					1.00	66.00	23.00	50.82
					1.00	1643.00	20.00	1314.40
M TRIM,RR END X								
M UNPAINTED BODYKITS / OR								

# Estimate

Steve (LKK) 00-AM AIL  
26/1/21, 2:30pm EXAM - ?  
p/p  
My BL SM  
4 dys

- 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

Confirm & accepted by

Signature:  
Date:

7% GST on **8,397.68** **587.84**  
**Nett 8,397.68**  
**Total Payable 8,985.52**

Authorized signatory and company stamp

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## 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 Submission	11/01/2021 18:35 (SGT)
Date of Accident	11/01/2021 07:20 (SGT)
Exact Location of Accident	Jln Boon Lay - Bef Boon Lay Way, Singapore
Additional Location Information	JLN BOON LAY TOWARDS AYE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK6309J
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KARUPPIAH VELU
NRIC No	SXXXX577D
Email Address	VELKRM@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-93834565
Alternative Phone No	+65-93834565

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?	No - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY	
Name of Insurance Company	AGI
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10376530R00
Cover Note Number	-

DRIVER	
Name of Driver	KARUPPIAH VELU
NRIC No	SXXXX577D
Date Of Birth	05/05/1970
Occupation	Outdoor

Years Of Driving Pass	20/06/2009
Driving experience	11 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93834565
Alt. Phone Number	+65-93834565
Email Address	VELKRM@YAHOO.COM.SG
Address	BLK 268B BOON LAY DRIVE #02-568
Address complement	-
Postcode	642268
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

#### 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?	-
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

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	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

Vehicle Registration Number	SMR7553B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-93834565
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-

Amount Of Damage  
Details of property damaged in accident  
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.
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 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)**  
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.
  - (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.

Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

To  
Jln Tulkang

To  
Tues



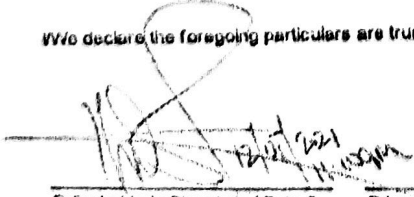


**Describe Circumstances of the Accident**


On or about 4 (four) January 2016, I was travelling along Margaret Road in my lane. Suddenly I felt an impact on my right hand side. I realised that that vehicle B, SLV 2385H without signal cut into my lane and hit on to my car.

**Declaration**

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

  
Witnessed by Reporting Centre Personnel





It pays to choose

**Budget  
Direct  
insurance**

## Certificate of Insurance

Comprehensive Car Policy  
Policy Number: P10376530R00

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

**Certificate Number P10376530R00 (Comprehensive / Named Driver Plan)**

- |  |   |                    |
|--|---|--------------------|
| 1) Vehicle Registration Number   | : | SMK6309J           |
| Chassis Number   | : | MMBSTA13AKH001161  |
| 2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act | : | 17/04/2020 (00:00) |
| 3) Date / Time of Expiry of Insurance  | : | 16/04/2021 (23:59) |
| 4) Excess (i) Policy   | : | S\$ 600.00         |
| (ii) Windscreen  | : | S\$ 100.00         |
| 5) Policyholder  | : | Karuppiyah Velu    |
| 6) Persons or Classes of Persons Entitled to Drive*                              | : |                    |

Drivers named as a Main / Named Driver in this Certificate of Insurance only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.

Main Driver / Date of Birth : Karuppiyah Velu(05/05/1970)

Named Driver(s) / Date of Birth : None

**7) Limitation as to use\***

Use only for social, domestic and pleasure purposes and for the occasional business purposes of the drivers listed above. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.

8) Finance Company : United Overseas Bank Limited

I / We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on  
11/01/2021

**Auto & General Insurance (Singapore) Pte. Limited**  
Trading as Budget Direct Insurance



Simon Birch  
Chief Executive Officer