

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

ESTIMATE

Co Reg No : 197701469G

Invoice Name & Address

TEO KIAN MIN (ZHAO JIANMIN)

Contact No Mobile: 92377571

64 FLORA DRIVE #07-52 PARC OLYMPIA SINGAPORE 506860

E	STIMATE	GST Reg No : MR-8500111-X					
1		Owner Name & Vehicle Info					
	Cust No/Name	/TEO KIAN MIN (ZHAO JIANMIN)					
	Reg No/Reg Date	SGW5809Y / 28/06/201					
	Date In/Mileage	/ 0					
	Chassis No	MMBSTA13AKH001416					
	Engine No	3A92UHR4490					
	Make/Model	MIT/19MY ATTRAGE 1.2 CVT					
	Colour/Trim	TO6 / BK BLACK					

Account No	Terms	Date/Time Printed	CSE	Operator	15.1921		WIP No			
CSM00041	Cash	20/01/2021/ 11:49		442 / CocoLu	ı		62098		and a second	
		Description of Goods	s / Services			Qty I	Unit Price	Disc%	An	nount
E PNT88000		. 1			· cox ()			900	1800.00
RENEW RE	AR AIRDA	M, REAR BUMPER, BOOTL	ID, REAR E	ND PANEL,	459 X 2	_			120	60.00
E PNT88000		922 *								00.00
REMOVE &	INSTALL	PARKING SENSOR							10.00	1400.00
E PNT98000		REAR BUMPER, REAR AIR		END DANE!	350 X3				1050	•
		REAR BUMPER, REAR AIR	RDAM, REAK	END PANEL	42.12				1	
BOOTLID,				٠.					?	200.00
E PNT88000	THOTAL	DEAD COMPARTMENT TO	IMS (120)	phil						
	INSTALL	REAR COMPARTMENT TR	The Axes	V					80	100.00
E PNT88000	TNCTALL	REAR AIRDAM				ı			١ ۵	
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A 10028901			<u>ى لا ا</u>		CAI C		•			120.0
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USING HI	-SCAN PR	O TEST								40.0
M SUNDRY										,,,,,
C&C LOGO									40	80.0
M SUNDRY		DODTION							'`	
	ALANT FO	OR ACCIDENT PORTION								20.0
M SUNDRY										
Sundry	DUMBED	/ RR				1.00	748.00			748.0
M FACE, RR M BRACKET,						1.00		00.00		28.0
M BRACKET,	RR BUMPE	R.LH 1				1.00		00.00		28.00
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M LATCH, TR		~ × 00				1.00		00.00		791.0
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M GARNISH,						1.00 1.00		00.00		69.0
M MARK, THE						1.00		00.00		21.0
M MARK, ATT		- nec				1.00		00.00		66.0
M TRIM,RR		,				1.00		00.00		23.0
M REFLECTO	ж Э	Χ								

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 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. any auditional 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 renair requiring the removal of the windscreen the rubber seal or other repair requiring the removal of the windscreen. Page 1 of 2



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Account No	Terms	Date/Time Printed	CSE	Operator		WIP No		
SM00041	Cash	20/01/2021/ 11:49		442 / CocoLu		62098		
31100071	QUSIII	Description of Good	s / Services		Qty	Unit Price	Disc%	Amount
M REFLECTOR	2 X	Dood in page 11 of the same			1.00		00.00	23.0
LAMP ASS		R RH 人			1.00	335.00		335.0
M LAMP ASS	Y.COMB.R	R LH X			1.00	335.00		335.00
		PERATIO,RR			1.00		00.00	91.00
ANT, KEYL					1.00		00.00	96.00
M DUCT,RR		$or \theta$			1.00		00.00	30.00
M COVER,RR					1.00		00.00	40.00
		E, T69 / JK			1.00	1643.00	00.00	1643.00
		Steve 20/1/21, 1	CLKE) 12.191-	OF Not Al Exars -? P/P My BL. 4 dys	JN			

Confirm & accepted by

Nett 9,196.00 7% GST on 9196.00 643.72

Total Payable 9,839.72

Authorized signatory and company stamp

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Page 2 of 2



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

- 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

20/01/2021 13:26 (SGT) Date of Submission 20/01/2021 09:05 (SGT) Date of Accident 5 Tampines Ave, Singapore **Exact Location of Accident** TAMPINES AVE 5 TOWARDS PIE Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

SGW5809Y Vehicle Registration Number

INSURED/POLICYHOLDER

Nο Is company? Name Of Registered Owner **TEO KIAN MIN** WEIGHT THE PERCENTAGE OF THE PROPERTY OF THE P SXXXX840B NRIC No KIANMIN@MAXZHAOMARKETING.COM Email Address (Phone) +65-92377571 Mobile Phone No +65-92377571 Alternative Phone No

VEHICLE PARTICULARS

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

INSURANCE COMPANY

Name of Insurance Company AIG Type of Coverage Comprehensive Fleet Policy 1900107744 Policy Number Cover Note Number

DRIVER

TEO KIAN MIN Name of Driver SXXXX840B NRIC No 27/09/1976 Date Of Birth indoor Occupation

Date Of Driving Pass 12/08/2003 Driving experience 17 YEARS AND 5 MONTHS Gender Male Mobile Number (Phone) +65-92377571 Alt, Phone Number +65-92377571 Email Address KIANMIN@MAXZHAOMARKETING.COM Address 76 FLORA ROAD #03-34 Address complement 506917 Postcode 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 Collision - Change/cross lane Type of Accident Clear Weather Conditions Road Surface Dry 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? Yes Was any other material or property damaged? Number of Passengers (Including Driver) 3 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 **CHANG HUI LIH** Name Female Gender PASSENGER 2 **TEO SIAT LING** Name Female Gender DETAILS OF POLICE ACTION No Was the accident reported to the police? 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 Yes Was there any video captured by Car Camera? No Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1 FBN5116U Vehicle Registration Number

Vehicle Model Vehicle Variant

Vehicle Manufacturer

Vehicle Colour	Red
Vehicle Category	Motorcycle
Name of Driver	MUHAMMAD DINI BIN SHAF'EE
Contact Number	(Phone) +65-87877045
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Sompo
Nature Of Damage	-
Details 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.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

Lunderstand, 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' 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 & Driver's Signature (If driver is not the policyholder) / Date Reporting Centre Personnel

Sketch Plan

Tampw Es Ave 5.

Describe Circumstances of the Accident
As I was dring to words Tampines Have 5 @ about 0905 hrs, 20/Jan A red car (Vehical C) move out for little lane vitrout stopping.
A red car (Vehical e) move out for fifter land vitrout stopping.
As it was quite concested at that time and the speed I was moving was about 18-km/h. I sloved down to aviod accident.
was about 18-km/h. I sloved down to aviod accident.
Vehicle B knocled on to my back Jub sequetly.
J 1

Declaration

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

10- Foam

\cust 70/01/21

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



COVER NOTE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder.

Name of Policyholder Period of Insurance 2:26 Jun 2019 to 25 Jun 2021

: TEO KIAN MIN (ZHAO JIANMIN)

Engine No.

: 3A92UHR4490/

: MMBSTA13AKH001416/

Chasis No.

Vehicle No. Cover Note No. Endorsement No.

Issued Date

: Saw5809 : 1900107744

: 26 Jun 2019



ABOUT THE COVER

Make/Model

: MITSUBISHI ATTRAGE 1.2 CVT/

Driver Restriction

Engine Capacity/Tonnage: 1,193.00 CC/ : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2019

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

a) The Policynoser 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

Age Condition

: All Age Condition

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 randered inoperative by Section 8 of the Motor Vehicles (Third-Perty Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

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

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable) TEO KIAN MIN (ZHAO JIANMIN) - \$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 159084 64708688

3.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67451000

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 hotline 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

If you do not receive your Certificate of Insurance and policy documents within 30 days from the Inception date stated on this cover note, please contact AIG immediately.

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CYCLE & CARRIAGE - PCHEN

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AlG Asia Pacific Insurance Pte. Ltd.

8 Sherkin Way 807-16 AtG Building \$079120 | 1 +65 6419 4000 | www.lings

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE