

CYCLE & CARRIAGE KIA PTE LTD PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info			
AIG Asia Pacific Insurance Pte.	Cust No/Name	/LEOW KOK CHIEN (LIAO GUOQUAN)		
Ltd.	Reg No/Reg Date	SLF3854J / 25/08/201		
MOTOR CLAIM DEPARTMENT	Date In/Mileage	/ 0		
78 SHENTON WAY #09-16 AIG BUILDING SINGAPORE 079120 Contact No 64191000	Chassis No	KNAFZ411MH5638347		
	Engine No	G4FGGH623508		
	Make/Model	KIA/FORTE K3 1.6 A SX HADQ		
	Colour/Trim	D7U PLANET BLUE / WK SATURN BLACK		

Account No	Terms	Date/Time Printed	CSE	Operator	18065736	WIP No		
LAX00000	Credit	28/01/2021/ 12:20	QUD	247 / DonBong		28203		
		Description of Good	s / Service	S CONTROL CONT	Qty	Unit Price	Disc%	Amount
E PNT88000								2000.00
		MAGED PARTS ON REAR						
,	REAR END) PANEL, REPAIR REAR	FLOOR PA	NEL				60.00
E PNT88000	ND THETAL	L PARKING ASSIST						60.00
E PNT88000	NO INSTAL	L PARKING ASSIST						80.00
	IATZWI OM	L REAR SPOILER						00.00
E PNT88000	ND INSIAL	LE REAR STOTEER						120.00
	ND INSTAL	L REAR CABIN TO FAC	ILITATE R	EPAIR WORK				
E PNT98000								2100.00
PAINT WO	RK SPRAY	REAR FLOOR PANEL, R	EAR END⊤P.	A <u>NE</u> L,				
	T LID, RE	AR SPOILER, REAR BU	MPER FACE	AND AFFECTED PORTTO	NE 5		l	
M SUNDRY			2					120.00
APPLY BO	DY SEALAN	IT L	96			7		20.00
A 54900099	DING AND	CHACCIC ELECTRICAL	CVCTEN				1	30.00
M SUNDRY	KING AND	CHASSIS ELECTRICAL	2121FM					120.00
PERFORM	DUCT DDE	FNTION						120.00
A 10028901	NUSI INLI	LITTOIT						120.00
	OUT DIAG	NOSTIC CHECK USING	HI-SCAN P	RO TEST			l	
USING HI								
M SUNDRY							İ	40.00
SUPPLY C	&C LOGO							
M SUNDRY								50.00
	EAR NUMBE	R PLATE WITH FRAME						F0 00
M SUNDRY								50.00
SUNDRIES M PANEL AS:	כא פענה				1.00	324.00	20 00	259.20
M TRIM-TRAI		P.R			1.00		20.00	46.40
M PANEL AS:					1.00	1365.00		1092.00
M LOGO ASS					1.00		20.00	29.60
M EMBLEM-CI					1.00		20.00	28.00
M FORTE EM	BLEM				1.00	40.00	20.00	32.00

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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ESTIMATE

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LAX00000 Credit 28/01/2021/ 12:2	O QUD	247 / DonBong		28203		
Description of Go	ods / Services			Unit Price	A STATE OF THE STA	Amount
M EMBLEM K3			1.00		20.00	12.00
M LATCH ASSY-TRUNK LID			1.00		20.00	18.40
M STRIKER ASSY-TRUNK LID			1.00		20.00	14.40
M W/STRIP-TRUNK LID OPNG			1.00	100.00		80.00
M BRACKET-RR BUMPER SIDE MTG,LH			1.00		20.00	23.20
M BRACKET-RR BUMPER SIDE MTG,RH M GUARD-BUMPER REAR,RH			1.00		20.00	23.20 13.60
M STAY-RR BUMPER LH			1.00	120.00		96.00
M STAY-RR BUMPER RH			1.00	120.00		96.00
M BRACKET-RR BEAM UPR MTG			1.00		20.00	2.40
		1 -	1.00		20.00	2.40
M ANTENNA ASSY-SMARTKEY		imat	1.00		20.00	55.20
M BEAM-RR BUMPER	911		1.00	318.00		254.40
M BRACKET-RR BEAM LWR MTG	170)[4]		21.00	5.00	20.00	8.00
M BRACKET-RR BEAM LWR,CTR			1.00	5.00	20.00	4.00
M RETAINER			4.00		20.00	6.40
M RETAINER-BUMPER SIDE MTG			2.00		20.00	1.60
M CLIP			10.00		20.00	16.00
M COVER-RR BUMPER			1.00	688.00		550.40
M COVER-RR BUMPER,CTR			1.00	315.00		252.00
M COVER-RR BPR UNDER			1.00		20.00	33.60
M WIRING HARNESS-BWS EXT			1.00	216.00		172.80
M ULTRASONIC SENSOR ASSY-P.A.S			1.00	177.00		141.60
M ULTRASONIC SENSOR ASSY-P.A.S M ULTRASONIC SENSOR ASSY-P.A.S			1.00	177.00 177.00		141.60 141.60
M ULTRASONIC SENSOR ASSY-P.A.S			1.00	177.00		141.60
M SPOILER-RR			1.00	590.00		472.00
• •	OR NAME:			330.00	20.00	472.00
			•			
			-			
			•			
Confirm & accepted by	S:		•			
and week)—————————————————————————————————————	The second secon	•	Net	.+	9,151.6
		7%	GST on	9151.6		640.6
			To	tal Payabl	e	9,792.2
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 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.

ACCIDENT STATEMENT

Date of Submission 28/01/2021 11:03 (SGT) Date of Accident 27/01/2021 19:20 (SGT) **Exact Location of Accident**

Alexandra Rd & Lower Delta Rd, Singapore

Additional Location Information JUNCTION AT ALEXANDRA RD & LOWER DELTA RD

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Yes

Vehicle Registration Number SLF3854J

INSURED/POLICYHOLDER

Is company? No

Name Of Registered Owner **LEOW KOK CHIEN** NRIC No SXXXX473D **Email Address** TONY_LEOW@YAHOO,COM

Mobile Phone No (Phone) +65-98195393

Alternative Phone No. +65-98195393

VEHICLE PARTICULARS

Manufacturer Kia Model Forte

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?

Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Comprehensive

Fleet Policy

Policy Number 2100479160

Cover Note Number

DRIVER

Name of Driver **ENG TIEN LIN** NRIC No SXXXX396A Date Of Birth 24/09/1976

Occupation Indoor Date Of Driving Pass 10/04/1995

Driving experience 25 YEARS AND 9 MONTHS

Gender Female

Mobile Number (Phone) +65-96190789

Email Address YVONNEETL@YAHOO.CO.UK
Address BLK 22 JALAN MEMBINA #26-70

Address complement _____

Postcode 166022
Is the driver the policyholder? No
If No, Relationship of the Driver with the Insured Spouse

Does Driver Own Other Vehicles?

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 Clear Road Surface Dry

OTHER INFORMATION

Alt. Phone Number

Was any foreign vehicle involved in the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

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?

DETAILS OF POLICE ACTION

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?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

SMG3671C

Honda

Vehicle Variant

Vehicle Colour Blue
Vehicle Category Private car
Name of Driver LINUS CHING

Contact Number (Phone) +65-98219525

Address complement

Postcode

Insurance Company Name Liberty Insurance

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.
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- 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' 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;

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- (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.

T

(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 &

Alexandra Rd

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

Ganges

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident
- ON 27 01/21 ABOUT LAZOHRS, NEHICLE A CSLF39545) WAS
FIRST-IN-LINE ON THE RIGHT-THEN DNLY LANG ON ALEXANDRA RD
ANAITING TO TURN RIGHT INTO LOWER DELTA RD.
(TRAFFIC LIGHZS WERE GOREDS AT THAT TIME, AND THERE WERE
STILL TRAFFIC ON THE EPPORITE LANGS).
- VEHICLE B (SMG 3671C) COLLIDED IMO VEHICLE A'S REAR
WHILE A WAS STILL WAITING FOR TRAFFIC ON THE OPPOSITE
LINES TO ABATE.
The state of the s
- DRIVERS OF SOM NEWICLES THEN MOVED TO LOWER DELTA RD
CNEAR RIK 48) TO EXCHANGE DETAILS. THIS WAS WHEN IT
STARTED TO RAIN ,

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

Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Leow Kok Chien (Liao GuoQuan) Vehicle No. : SLF3854J Period of Insurance : 25 Aug 2020 To 24 Aug 2021 Policy No. 2100479160-04

Engine No. : G4FGGH623508 **Endorsement No.**

Chassis No. : KNAFZ411MH5638347 **Issued Date** : 24 Jul 2020

ABOUT THE COVER

Make/Model : KIA FORTE K3 1.6 A SX

Engine Capacity/Tonnage: 1,591.00 CC Sum Insured : Market Value First Year of Registration : 2016 **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

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 that 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

Section 1
Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Leow Kok Chien (Liao GuoQuan) - \$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 hotiline 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: MayBank

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

0500709912

CYCLE & CARRIAGE - GARYQ(KIA)

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

AIGSGMOBILEAPP