



CYCLE & 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

Co Reg No : 197701469G

Table with 2 main columns: Invoice Name & Address, Owner Name & Vehicle Info. Includes details for CHEN YOUSHENG and vehicle SMV9968D.

Table with 5 columns: Account No, Terms, Date/Time Printed, CSE, Operator, WIP No. Includes account CSM00041 and operator 442 / CocoLu.

Main items table with columns: Description of Goods / Services, Qty, Unit Price, Disc%, Amount. Lists various repair items like bumper, paint, sensors, and electrical work.

Estimate

Handwritten notes: Steve (LKK), OO-NM AL, Excess-?, PIP, My Bel Sp

LKK Auto Consultants hence notify the Repairer of the following: To resurvey before/after spray painting, To display damaged part(s) during resurvey...

Handwritten: 29/1/21, 10.00am, 4 days

Summary table: 7% GST on 4134.00, Total Payable 4,423.38

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.

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 willful 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 28/01/2021 13:17 (SGT)
Date of Accident 27/01/2021 14:30 (SGT)
Exact Location of Accident 237 Pandan Loop, #08-05 Westech Building, Singapore 128424
Additional Location Information WESTECH BUILDING #01-06, 237 PANDAN LOOP
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMV9968D

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHEN YOUSHENG
NRIC No SXXXX779A
Email Address 1061662699@QQ.COM
Mobile Phone No (Phone) +65-91928868
Alternative Phone No +65-91928868

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Eclipse cross
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 2070119602
Cover Note Number -

DRIVER

Name of Driver CHEN YOUSHENG
NRIC No SXXXX779A
Date Of Birth 23/01/1978
Occupation Indoor

Driving Pass
 experience
 er
 Mobile Number
 Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

15/08/2012
 8 YEARS AND 5 MONTHS
 Male
 (Phone) +65-91928868
 +65-91928868
 1061662699@QQ.COM
 BLK 640 WOODLANDS RING ROAD #08-09
 -
 730640
 Yes
 -
 No
 -
 -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Collided into Property
 Clear
 Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
 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?
 Number of Passengers (Including Driver)
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No
 1
 No
 -
 No
 1
 No
 No

DETAILS OF POLICE ACTION

Was the accident reported to the police?
 Was notice of intended Prosecution given?
 If yes, against whom?

No
 No
 -

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

ATTACHMENT(S)

Are accident photos available for attachment?
 Was there any video captured by Car Camera?
 Was there any audio recorded?

Yes
 No
 No

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 willful 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.

(collectively the "Purposes")

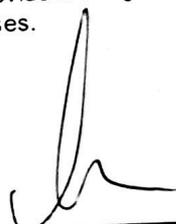
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.



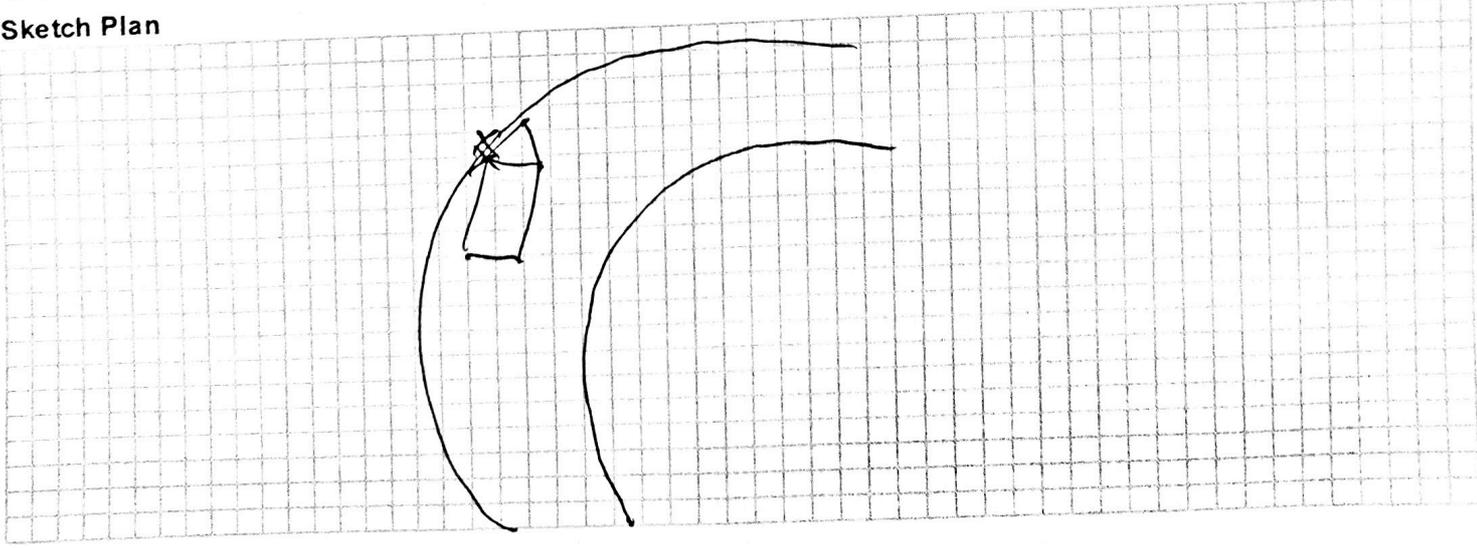
 Policyholder's Signature / Date & Time

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



 Witnessed by Reporting Centre Personnel

Sketch Plan



Circumstances of the Accident

不小(車)在場下來撞到牆上

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

CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : CHEN YOUSHENG
 Period of Insurance : 09 Sep 2020 To 08 Sep 2022
 Engine No. : 4B40HM5805
 Chassis No. : JMAXTGK1WLZ001702

Vehicle No. : SMV9968D
 Policy No. : 2070119602
 Endorsement No. :
 Issued Date : 22 Sep 2020

ABOUT THE COVER

Make/Model : MITSUBISHI Eclipse Cross 1.5
 Engine Capacity/Tonnage : 1,499.00 CC
 Driver Restriction : NA
 Person or Classes of Persons Entitled to Drive* :
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2020
 Insuring with COE/PARF : Yes

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 than 2 years' driving experience.

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 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 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 - \$800 Theft - \$0 Flood Cover - \$800
Section 2
 Property Damage - \$0
Windscreen : \$100

Named Driver and Excess (where applicable)
 CHEN YOUSHENG - \$800 (Own Damage), \$800 (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: 20 Leng Kee Rd Singapore 159094 64708688
 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 hotline 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

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, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504675224
 CYCLE & CARRIAGE - ANYONG
 239 ALEXANDRA ROAD
 SINGAPORE 159930

AIG Asia Pacific Insurance Pte. Ltd.
 This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

SSCASB

Copyright © 2019 AIG Asia Pacific Insurance Pte. Ltd.

1003682104/ACI/Decal/LHC_Benefits_Summary