

CYCLE & CARRIAGE KIA PTE LTD PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

Co Reg No : 199405410K

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info			
AIG Asia Pacific Insurance Pte.	Cust No/Name	LCV08305/LAU YIH CHIA		
Ltd.	Reg No/Reg Date	SMH4856A / 25/01/201		
MOTOR CLAIM DEPARTMENT	Date In/Mileage	/ 0		
78 SHENTON WAY #09-16	Chassis No	KNAF3416MK5025338		
AIG BUILDING SINGAPORE 079120	Engine No	G4FGJH714180		
Contact No 64191000	Make/Model	KIA/CERATO 1.6 A EX G333		
	Colour/Trim	SWP SNOW WHITE PEAR/ WK SATURN BLACK		

Account No	Terms	Date/Time Pr	inted	CSE	Operator		WIP No		
LAX00000	Credit	18/01/2021/	09:25	QUK	282 / Kevin Leong)	27538		
		Description	of Goods	s / Services		Qty	Unit Price	Disc%	Amount
E PNT88000	DT DUNDS	-							800.00
E PNT98000	KI ROWAF	ER PANEL & AF	FECTED A	AREA					700.00
	RK ON FRI	F BUMPER PANE	L					1	700.00
A 54900099			_					- 1	30.00
	RING & Ch	ASSIS ELECTR	ICAL SYS	TEM					
A 10028901	OUT DIAC	SMOSTIC CUTCK	LICTNO I	IT COAN DOO	TECT			- 1	120.00
USING HI-		GNOSTIC CHECK	USING F	II-SCAN PRO	1521			- 1	
M SUNDRY	00/111 / 110	, 1231						ì	50.00
	FRT NUM	BER PLATE WIT	TH FRAME	n E]	П			5.5 5.5
M SUNDRY			-	7476	ima	57	١		50.00
SUNDRIES M LAMP ASSY	LICAD III	,		2011	11111161) - 1010 00	00 00	075 00
M HORN ASSY		CH				1.00	74.00	20.00	975.20 59.20
M COVER-FR		CII				1.00	633.00		506.40
M GRILLE-FR	ONT BUMP	PER				1.00	262.00		209.60
M GRILLE AS	SY-RADIA	TOR				1.00	328.00		262.40
M GARNISH-R						1.00		20.00	30.40
M MOULDING-						1.00		20.00	28.80
M LAMP ASSY M ABSORBER-		-				1.00	143.00	20.00	114.40
M AIR DUCT-						1.00 1.00		20.00	67.20 11.20
M STIFFNER-						1.00	114.00		91.20
		UPR SIDE MT	G			1.00		20.00	17.60
M ORNAMENT-	KIA NO.1	15				1.00	32.00	20.00	25.60
								1	
Confirm & ac	cepted by	y						•	
							Net	+	4,149.20
						7% GST on	4149.2	-	290.44
						Tot	tal Payabl	е	4,439.64
Authorized s	ignatory	and company s	tamp				-		-
V-14444. AF ALS			- winh				.44 1		

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.

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
- 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

09/01/2021 12:00 (SGT) 08/01/2021 16:00 (SGT) Paya Lebar, Singapore PAYA LEBAR ROAD TO UBI AVE 3 (SLIP RD) Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMH4856A

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No.

No

LAU YIH CHIA

SXXXX355D

YIHCHIA87@GMAIL.COM (Phone) +65-82449553

+65-82449553

VEHICLE PARTICULARS

Manufacturer

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

your vehicle?

Vehicle Category

Kia

Cerato

Yes

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

AIG

Comprehensive

1900009630

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Accident report SC1A21190004

LAU YIH CHIA SXXXX355D 20/08/1987 Indoor

Date Of Driving Pass Driving experience Gender Mobile Number

Alt. 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collision - Head to Rear

Raining Wet

27/01/2012

+65-82449553

(Phone) +65-82449553

YIHCHIA87@GMAIL.COM

BLK 328 CLEMENTI AVE 2 #03-216

9 YEARS

Male

120328

Yes

Νo

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

No

2

No

Yes

1

DETAILS OF POLICE ACTION

Was the accident reported to the police? Police Station Name

Police Station Phone No Alt. Police Station Phone No Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

Yes

Traffic Police

(Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

No

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

ATTACHMENT(S)

Contact Number

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

Yes Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBF3993J Vehicle Manufacturer Citroen Vehicle Model Berlingo Vehicle Variant Vehicle Colour Vehicle Category Name of Driver

Commercial vehicle CHAN GWAN TAT (Phone) +65-90018662

Address	_
Address complement	_
Postcode	_
Insurance Company Name	NTUC
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)

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' 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' law yers/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.

09/01/21 10.50 am

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Cubi Ave 3

Cubi A

Describe Circumstances of the Accident I was travelling along Paya Lebar Road on the left lane, slip road into US) Are 3 There was a vehicle in front of me. I did not manage to brake in time due to net surface and there were puddles of notor therefore collided with the vehicle, my left fort bumper collided outs his rear partytion of the vehicle. We more oft to "vertex" to exchange particulars. There were no injunes. That all.

Declaration

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

09/01/31 10.50am

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20210108/2125

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/01/2021 20:08			Vide Report No.:	Station Diary No.:	
Informant	's Partic	ulars			
Name of Ir	CHIA		Address: 379 CLEMENTI AVENUE 5 #	03-356 SING	GAPORE 120379
ID Type / ID No.: NRIC NO / See 355D			Contact No.: Home/Office: Mobile: 82449553		
Nationality	4 b		Email:		
Sex: Male	Age: 33	Date of Birth: 20/08/1987	Type of Informant: Driver		
Race:			Language:	Institution /	School Name:
Occupation: Interior designer			Driving Licence Information: Class: 3	Date of Ex	piry:

General Informat		ent			
Type of Accident:	Non-Injury	D	rink rive: o	Date/Time of Accident: 08/01/2021 16:00	Type of Location:
Location:					
UBI AVENUE 3					
Weather: Raining		Road Sur Wet	face:	-	Road Speed Limit:
Traffic Flow:		Traffic Co	ontrol:	-	Traffic Volume:
Type of Collision:				a	Anyone conveyed by ambulance:

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBF3993J	Van				Condition	0
SMH4856A	Car	KIA	CERATO 1.6(A) EX	White		0

Details of Ve	ehicle Insurance	The special section is	TO THE RES	
	Insurance Company	Insurance No	Effective	Expiry Date
SMH4856A	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900009630	25/01/2019	24/01/2021





2 of 3

Report No. T/20210108/2125

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian II	nvolved: No			4		
No. of Pedestrian	s Injured: NIL		Use of Ped	destrian	Cross	ing: NA
Driver						
Name	LAU YIH CHIA	<u> </u>		ID No		S 355D
Related Vehicle	SMH4856A (Car)			Conta	ct No.	82449553
Hospital/Clinic	NIL		-	Class Driving Licent Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discl		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION,

I WAS TRAVELING ALONG PAYA LEBAR ROAD ON THE LEFT LANE, SLIP ROAD INTO UBI AVE 3. THERE WAS A VEHICLE INFRONT OF ME, I DID NOT MANAGED TO BRAKE IN TIME DUE TO WET ROAD SURFACE AND THERE WERE PUDDLES OF WATER THEREFORE, COLLIDED WITH THE VEHICLE. MY LEFT FRONT BUMPER COLLIDED ONTO HIS REAR PORTION OF THE VEHICLE. WE THEN MOVE OFF TO "VERTEX" TO EXCHANGE PARTICULARS. THERE WERE NO INJURIES. THATS ALL.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20210108/2125

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:	Signature Of Informant:
SC SAIFUL ILHAM BIN ZAHARI	
Signature Of Interpreter:	Date/Time:
Not applicable	08/01/2021 20:08
Officer In Charge Of Case: TP / GIA /	Classification Of Case:
Staff Sgt WONG SIEU LUI	All the same of th
Contact No.: 65476151	SE STATE OUTS
Authentication Stamp	COLEGO FILLE OF TE
NP168	11



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: LAU YIH CHIA

Period of Insurance

: 25 Jan 2019 To 24 Jan 2021

Engine No.

: G4FGJH714180

Chassis No.

: KNAF3416MK5025338

Vehicle No.

: SMH4856A

Policy No.

: 1900009630

Endorsement No. **Issued Date**

: 07 Feb 2019

ABOUT THE COVER

Make/Model

: KIA Cerato

Engine Capacity/Tonnage : 1,591.00 CC

Sum Insured : Market Value

First Year of Registration : 2019

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 than 2 years' driving experience.

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 rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be

EXCESS

Section 1

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

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

LAU YIH CHIA - \$660 (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 & Carnage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

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: 330 Ubi Rd 3 Singapore 408650 67461000

Approved Reporting Centres/AlG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may rofer to AlG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Ptay.

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 35 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504622227

C&CKICP2 - ALVIN

239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. **AUTHORISED REPRESENTATIVE**