





CYCLE &amp; CARRIAGE

**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. Ltd. MOTOR CLAIM DEPARTMENT 78 SHENTON WAY #09-16 AIG BUILDING SINGAPORE 079120 Contact No 64191000	Cust No/Name	/Angelika Gottfriede Maria Saake
	Reg No/Reg Date	S1528CD / 20/10/201
	Date In/Mileage	/ 0
	Chassis No	KNAPN81AMG7132438
	Engine No	G4NAGH879467
	Make/Model	KIA/SPORTAGE 2.0 A G416
	Colour/Trim	KCS SPARKLING SILVE/ WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
LAX00000	Credit	28/01/2021/ 17:55		261 / Edwin Caina	23347			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
E PNT88000				TO REPLACE FRT LH DOOR, REAR LH DOOR, LH SIDE SILL MOULDING & AFFECTED AREA	80	2000		1600.00
E PNT98000				PAINT WORK FRT LH FENDER, REAR LH FENDER & REAR BUMPER	350x2			1050.00
E PNT88000				TO REMOVE & INSTALL REAR PARKING ASSIST FOR FACILITATE REPAIR				120.00
E PNT88000				TO TRANSFER FRT LH DOOR ATTACHMENT TO NEW PANEL				120.00
E PNT88000				TO TRANSFER REAR LH DOOR ATTACHMENT TO NEW PANEL				120.00
M SUNDRY				PERFORM RUST PREVENTION				150.00
M SUNDRY				TO APPLY SEALANT ON AFFEDTED AREA				80.00
A 54900099				CHECK WIRING & CHASSIS ELECTRICAL SYSTEM				80.00
A 10028901				TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST USING HI-SCAN PRO TEST				120.00
M SUNDRY				TO TRANSFER REAR LH RIM INCLUDING BALANCING				30.00
A WHEELALIGNMENTBP				To Conduct Computerize Full Wheel Alignment				120.00
M SUNDRY				SUNDRIES				20.00
M				PANEL ASSY-REAR DOOR, LH	1.00	819.00	20.00	655.20
M				PANEL ASSY-FRONT DOOR, LH	1.00	970.00	20.00	776.00
M				GARNISH ASSY-QTR SIDE, LH	1.00	128.00	20.00	102.40
M				GARNISH ASSY-FNDR SIDE LH	1.00	156.00	20.00	124.80
M				COVER-RR BUMPER LWR	1.00	457.00	20.00	365.60
M				GUARD ASSY-REAR WHEEL, LH	1.00	255.00	20.00	204.00
M				WHEEL ASSY-ALUMINIUM	1.00	1105.00	20.00	884.00

# Estimate

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.



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LAX00000	Credit	28/01/2021/ 17:55		261 / Edwin Caina	23347

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M MOULDING ASSY-SIDE SILL,LH ✓ CUT	1.00	265.00	20.00	212.00

# Estimate

SURVEYOR NAME: Steve (LKK) 1/2/21, 10.50am

SURVEYOR SIGNATURE: OO-AM Acl

DATE: EXOSI - ?

REMARKS: PIP

By Bel SM

5 days

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

Confirm & accepted by \_\_\_\_\_ 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

Acknowledged by Repairer  
Signature: \_\_\_\_\_

Authorized signatory and company stamp

	Nett	7,224.00
7% GST on	7224.00	505.68
<b>Total Payable</b>		<b>7,729.68</b>

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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 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 ..... 23/10/2020 17:37 (SGT)  
Date of Accident ..... 23/10/2020 09:20 (SGT)  
Exact Location of Accident ..... 6 Battery Rd, Singapore 049909  
Additional Location Information ..... BATTERY RD TOWARDS SINGAPORE LAND TOWER  
CARPARK  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... S1528CD

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... SAAKE ANGELIKA GOTTFRIEDE MARIA  
Passport No/FIN ..... GXXXX952K  
Email Address ..... ANGELIKA.SAAKE@YAHOO.DE  
Mobile Phone No ..... (Phone) +65-90538935  
Alternative Phone No ..... +65-90538935

### VEHICLE PARTICULARS

Manufacturer ..... Kia  
Model ..... SPORTAGE 2.0 (A)  
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 ..... 2100486884  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... SAAKE ANGELIKA GOTTFRIEDE MARIA  
Passport No/FIN ..... GXXXX952K  
Date Of Birth ..... 14/09/1967

Address 37 NASSIM ROAD,NASSIM REGENCY #10-01  
 Postcode 258423  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured OWNER  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

**General Information of the Accident**

Type Of Accident COLLISION - HEAD TO REAR  
 Weather Conditions CLEAR  
 Road Surface DRY

**Other Information**

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles (including own vehicle) involved in the accident 2  
 Was any body injured in the Accident? NO  
 Was any injured conveyed to hospital by ambulance? NO  
 Was any other material or property damaged? YES  
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
 Number of Passengers (Including Driver) 1

**Details of Police Action**

Was the accident reported to the police? NO  
 If Yes,Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes,against whom?

**Circumstances of Accident**

REFER TO ATTACHMENT COLLISION-HEAD TO SIDE

**Attachment(s)**

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? NO  
 Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1:**

Vehicle Registration Number SHC595P  
 Vehicle Make/Model/Colour TOYOTA  
 Details Of Properties  
 Vehicle Category TAXI  
 Name of Driver TAN MAH SENG  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

Sketch Plan

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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

*Coalee*

Singapore, 23 Oct 2020, 15:35

Policyholder's Signature  
Date & Time:

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

*[Signature]*

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I passed by the taxi stand, I had set the indicator to the left before and turned left in order to enter the parking of Singapore Land Towers. After I turned left the taxi started to move and crashed into the left side of my car, damaging both doors

DECLARATION

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

Cuallee  
Policyholder's Signature  
Date & Time: 23 Oct 2020, 15:40

Cuallee  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 23 Oct 2020, 15:40

[Signature]  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# CERTIFICATE OF INSURANCE

## AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Angelika Gottfriede Maria Saake  
Period of Insurance : 20 Oct 2020 To 19 Oct 2021  
Engine No. : G4NAGH879467  
Chassis No. : KNAPN81AMG7132438

Vehicle No. : S1528CD  
Policy No. : 2100486884-04  
Endorsement No. :  
Issued Date : 10 Oct 2020

### ABOUT THE COVER

Make/Model : KIA Sportage 2.0A  
Engine Capacity/Tonnage : 1,999.00 CC  
Driver Restriction : NA  
Person or Classes of Persons Entitled to Drive\* :  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2016  
Insuring with COE/PARF : No

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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Angelika Gottfriede Maria Saake - \$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 hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.sg](http://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: NA

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).

0500709927

CYCLE & CARRIAGE - JUSTIN

239 ALEXANDRA ROAD  
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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

This computer generated document does not require a signature.

AIGSGMOBILEAPP