

ASS. REC. BY:

REP:

## ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

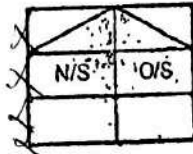
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

SIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Cum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SFT 7710L

Yr Regn:

7/12/18

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

KIA Cerato

c.c. 1591

Colour:

Blue

A/C: Insured / Std / NI / N

Sp. Reading

25881

T/Radio: Insured / Std / NI / N

Eng/No:

C/No:

KNAF 3416 MK 5021966

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

225/55R16

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Kumho

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

9/2/21

D.O.I.

9/2/21

Survey held at

Cycle &amp; Carriage

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision

Date / Time

Action / Instruction

MV-66K

Date/Time, File, Pass to?

☐

: Prel. Report

☐

: Final Report

Date/Time, File Return to?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Add Fee:

☐

: Site Insp

(\$

☐

: Interview

(\$

☐

: Tech. Invs

(\$

☐

: Weekend

(\$

Special Forms:

Imp Sum / L.E. / C



CYCLE &amp; CARRIAGE

**CYCLE & CARRIAGE KIA PTE LTD**  
**PANDAN GARDENS CUSTOMER SERVICE CENTRE**

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

**ESTIMATE**

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

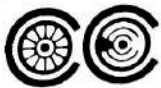
Invoice Name & Address	Owner Name & Vehicle Info
TAN BOON SOO	Cust No/Name /TAN BOON SOO
39 CROWHURST DRIVE	Reg No/Reg Date SFT7710L / 07/12/201
SINGAPORE 557918	Date In/Mileage / 0
Contact No Mobile: 96561596	Chassis No KNAF3416MK5022966
	Engine No G4FGJH712643
	Make/Model KIA/CERATO 1.6 A EX G333
	Colour/Trim B4U GRAVITY BLUE / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
CSM00081	Cash	09/02/2021/ 12:24		442 / CocoLu	28799		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000							1600 2000.00
RENEW FRT' FENDER LH, FRT' DOOR LH, REAR' DOOR LH, WINDMIRROR LH				4 X 400			
REPAIR SIDE' SILL LH, REAR FENDER LH, REAR' BUMPER							120 150.00
E PNT88000							120 150.00
REMOVE & INSTALL FRT DOOR TRIMS AND GLASS							
E PNT88000							2450.00
REMOVE & INSTALL REAR DOOR TRIMS AND GLASS							
E PNT98000							
SPRAY PAINT FOR FRT' FENDER LH, FRT' DOOR LH, REAR' DOOR LH, SIDE' SILL LH				7 panel + 80			
REAR' FENDER LH, REAR' BUMPER, WINDMIRROR LH - 80				add front' pillar LH - 350			
B WHEELALIGNMENT							120.00
To Conduct Computerize Full Wheel Alignment							60.00
M SUNDRY							80.00
TRANSFER FRT LEFT AND REAR LEFT RIM							30.00
M SUNDRY							120.00
APPLY SEALANT FOR ACCIDENT PORTION							20.00
A 90000001							300.00
CHECK WIRING & ELECTRICAL SYSTEM							360.00
A 10028901							360.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST							
USING HI-SCAN PRO TEST							
M SUNDRY							
Sundry							
A 90000001							
RENEW FRT UNDER CARRIAGE							
M SUNDRY							
SUPPLY FRT RIM LEFT							
M SUNDRY							
SUPPLY REAR RIM LEFT							
P PANEL-FENDER, LH				1.00	430.00	00.00	430.00
M INSULATOR-FENDER LH				1.00	27.00	00.00	27.00
M MIRROR ASSY-OUTSIDE RR VIEW, LH				1.00	559.00	00.00	559.00
P PANEL ASSY-FRONT DOOR, LH				1.00	1277.00	00.00	1277.00

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.



CYCLE &amp; CARRIAGE

**CYCLE & CARRIAGE KIA PTE LTD**  
**PANDAN GARDENS CUSTOMER SERVICE CENTRE**  
 209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

**ESTIMATE**

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
TAN BOON SOO	Cust No/Name /TAN BOON SOO
39 CROWHURST DRIVE	Reg No/Reg Date SFT7710L / 07/12/201
SINGAPORE 557918	Date In/Mileage / 0
Contact No Mobile: 96561596	Chassis No KNAF3416MK5022966
	Engine No G4FGJH712643
	Make/Model KIA/CERATO 1.6 A EX G333
	Colour/Trim B4U GRAVITY BLUE / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00081	Cash	09/02/2021/ 12:24		442 / CocoLu	28799

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M HINGE ASSY-FRONT DOOR,LH	1.00	30.00	00.00	30.00
M HINGE ASSY-DOOR LOWER,LH	1.00	27.00	00.00	27.00
M MOULDING ASSY-FRT DR FRAME,LH	1.00	37.00	00.00	37.00
M W/STRIP ASSY-FR DR BELT O/S LH	1.00	64.00	00.00	64.00
M W/STRIP ASSY-FR DR SIDE LH	1.00	102.00	00.00	102.00
M HANDLE ASSY-DOOR OUTSIDE,LH	1.00	164.00	00.00	164.00
M PAD-FR DR O/S HDL HINGE,LH	1.00	5.00	00.00	5.00
M COVER-FR DR O/S HDL LH	1.00	14.00	00.00	14.00
M PAD-FR DR O/S HDL COVER,LH	1.00	5.00	00.00	5.00
M BASE ASSY-FR DR O/S HANDLE LH	1.00	52.00	00.00	52.00
M CHECKER ASSY-FRONT DOOR,LH	1.00	44.00	00.00	44.00
M LATCH ASSY-FRONT DOOR,LH	1.00	400.00	00.00	400.00
M GLASS ASSY-FRONT DOOR,LH	1.00	207.00	00.00	207.00
M PANEL ASSY-FRONT DR MODULE,LH	1.00	241.00	00.00	241.00
M PANEL ASSY-REAR DOOR,LH	1.00	1377.00	00.00	1377.00
M GUARD ASSY-FRONT WHEEL,LH	1.00	95.00	00.00	95.00
M HUB ASSY-FR WHEEL	1.00	436.00	00.00	436.00
M BLACK TAPE-FR DR RR,LH	1.00	13.00	00.00	13.00
M BLACK TAPE-RR DR FR,LH	1.00	13.00	00.00	13.00
M BLACK TAPE-RR DR FRAME RR OTR.	1.00	8.00	00.00	8.00
M GLASS ASSY-REAR DOOR,LH	1.00	181.00	00.00	181.00
M MOULDING ASSY-RR DR FRAME,LH	1.00	44.00	00.00	44.00

Steve (CLKK) 9/2/21, 2:00pm

DD-NM ALL

EXCIS -?

P/P

M P/L SY

9 days

**Confirm & accepted by** are subject to confirmation

- Third party 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

Authorized signatory and company stamp

	<b>Nett</b>	<b>12,052.00</b>
<b>7% GST on</b>	<b>12052.00</b>	<b>843.64</b>
<b>Total Payable</b>		<b>12,895.64</b>

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 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	09/02/2021 13:23 (SGT)
Date of Accident	09/02/2021 10:00 (SGT)
Exact Location of Accident	Ang Mo Kio Ave 3 & Ang Mo Kio Ave 6, Singapore
Additional Location Information	NEAR JUNCTION OF ANG MO KIO AVE 3 & 6
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFT7710L
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TAN BOON SOO
NRIC No	SXXXXX028D
Email Address	ADELENE1122@YAHOO.COM
Mobile Phone No	(Phone) +65-96561596
Alternative Phone No	+65-96561596

### VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
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	1800145347
Cover Note Number	-

### DRIVER

Name of Driver	TAN BOON SOO
NRIC No	SXXXXX028D
Date Of Birth	31/08/1966
Occupation	Indoor



Date Of Driving Pass	07/05/1987
Driving experience	33 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96561596
Alt. Phone Number	+65-96561596
Email Address	ADELENE1122@YAHOO.COM
Address	39 CROWHURST DRIVE
Address complement	-
Postcode	557918
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

Type of Accident	Collision - Change/cross lane
Weather Conditions	Clear
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?	-
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?	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
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
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	GY1164P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-96393575
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 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 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:

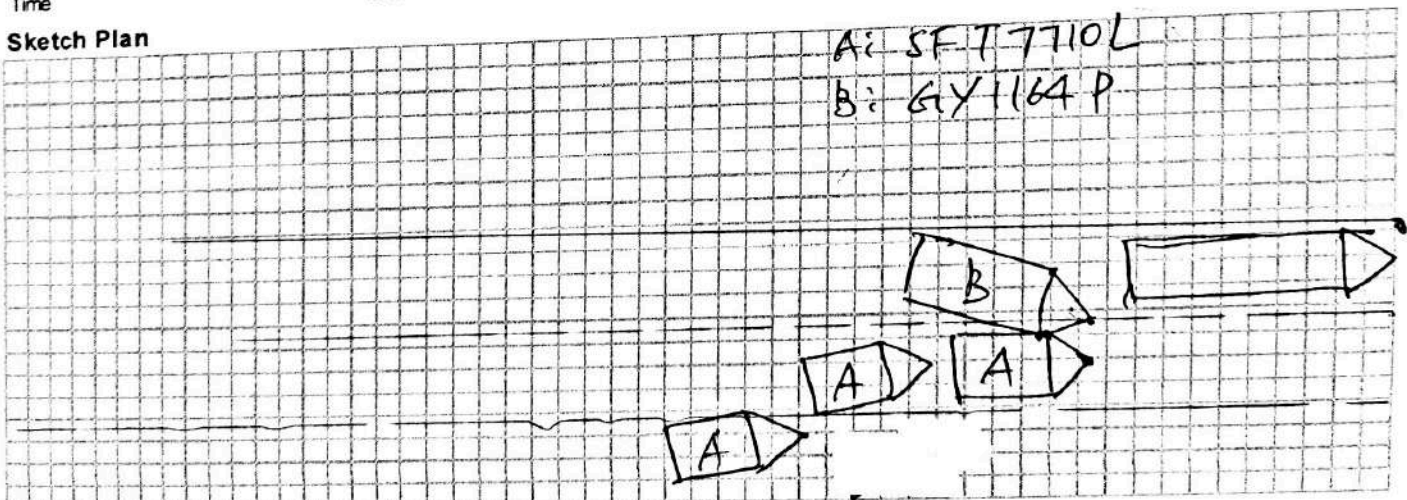
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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




Describe Circumstances of the Accident

On 9/2/21, I was driving along Amk Ave 3 when a vehicle cut into my lane.

Declaration

We declare the foregoing particulars are true in every respect.

 9/2/21 11:20am  
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 : Tan Boon Soo  
Period of Insurance : 07 Dec 2020 To 06 Dec 2021  
Engine No. : G4FGJH712643  
Chassis No. : KNAF3416MK5022966

Vehicle No. : SFT77710L  
Policy No. : 1800145347-01  
Endorsement No. :  
Issued Date : 13 Nov 2020

#### ABOUT THE COVER

Make/Model : KIA Cerato  
Engine Capacity/Tonnage : 1,591.00 CC  
Driver Restriction : NA  
Person or Classes of Persons Entitled to Drive\* :  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2018  
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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Tan Boon Soo - \$600 (Own Damage), \$600 (Flood Cover)

#### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Cycle & Cargage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501
2. Cycle & Cargage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
3. Cycle & Cargage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800
4. Cycle & Cargage 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: United Overseas Bank Limited

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).

0504624050

FULCOKICP2 - CORPORATE

22 UBI ROAD 4 FULCO BUILDING  
SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

AIGSGMOBL EAPP