

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			
Ms NG LEE GEK	Cust No/Name	/Ms NG		
THE LEE GEN	Reg No/Reg Date	SDT8767R / 25/07/201		
BLK 120 MCNAIR ROAD	Date In/Mileage	/ 0		
#05-85 SINGAPORE 320120	Chassis No	KNAFJ411MJ5762300		
	Engine No	G4FGHH692449		
Contact No Mobile: 96682544	Make/Model	KIA/FORTE K3 1.6 A L 189		
	Colour/Trim	SWP SNOW WHITE PEAR/ WK SATURN BLACK		

Account No	Terms	Date/Time Pri	inted	CSE	Operator		WIP No		
CSM00081	Cash	15/02/2021/	15:37	BLC	442 / CocoLu		28958		
		Description	of Goods	/ Service	S	Qty	Unit Price	Disc%	Amount
E PNT88000									1200.00
	T BUMPER,	, BONNET, FRT	SUPPORT	PANEL, I	REPAIR FRT FENDER R	H&LH			
E PNT88000									100.00
	INSTALL	AIRCON CONDE	NSOR & H	RADIATOR					1,400,00
E PNT98000	TNT COD I	FRT BUMPER, BO	ONNET F	DT CENDER	וות פ ווח ה				1400.00
M SUNDRY	INI FUK I	TRI DUMPER, D	UNINE I, F	KI FENDER	K KH & LH				50.00
	FR PLATE	WITH FRAME							30.00
A 9000001		712711							30.00
CHECK WI	RING & EL	LECTRICAL SYS	TEM						
A 10028901				П		П			120.00
TO CARRY	OUT DIAG	SNOSTIC CHECK	USING	I-SCAN PE	ROTESMOS	757			
USING HI	-SCAN PRO) TEST		2011					40.00
				96		766	7		40.00
M SUNDRY	ALANI FU	R ACCIDENT PO	RIION						20.00
Sundry									20.00
P COVER-FR	BUMPER					1.00	633.00	00.00	633.00
		LICENSE PLATI	E			1.00		00.00	18.00
M LIP ASSY	-FRONT BU	JMPER				1.00	55.00	00.00	55.00
M GRILLE AS	SSY-RADI <i>A</i>	ATOR				1.00	160.00		160.00
		GRILLE, UPR				1.00		00.00	54.00
M STRIP AS:						1.00		00.00	29.00
		JMPER A/INTAK	E			1.00		00.00	91.00
M COVER-BLA		-				1.00		00.00	18.00
M COVER-BLA M ABSORBER-						1.00 1.00		00.00	18.00 84.00
M RAIL ASS						1.00	496.00		496.00
		SIDE MTG,RH				1.00		00.00	13.00
		SIDE MTG,LH				1.00		00.00	13.00
P PANEL ASS		,				1.00	1384.00		1384.00
		NT END MODULE				1.00	675.00	00.00	675.00
M LAMP ASS	Y-HEAD,RH	l				1.00	810.00	00.00	810.00

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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Account No	Terms	Date/Time Printed	CSE	Operator		WIP No		
CSM00081	Cash	15/02/2021/ 15:37	BLC	442 / CocoLu		28958		
		Description of Goods	s / Service	s and a little way of	Qty	Unit Price	Disc%	Amount
M LAMP ASS	Y-HEAD,LI	H			1.00	810.00	00.00	810.00
M ORNAMENT	-KIA NO.	115			1.00	32.00	00.00	32.00
M CONDENSE	R ASSY-CO	OOLER			1.00	681.00	00.00	681.00
M GUARD-AII	R,RH				1.00	19.00	00.00	19.00
M GUARD-AII	R,LH				1.00	19.00	00.00	19.00
M RADIATOR	ASSY				1.00	546.00	00.00	546.00



Confirm & accepted by

Nett 9,618.00 7% GST on 9618.00 673.26

Total Payable 10,291.26

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

15/02/2021 16:35 (SGT) 12/02/2021 16:40 (SGT) Bendemeer Rd, Singapore BENDEEMEER ROAD Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SDT8767R

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

CECILIA NG LEE GEK

SXXXX752J

celiangus@gmail.com

(Phone) +65-96682544

+65-96682544

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

Forte

Private use

Yes

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

Comprehensive

No

1800089040

DRIVER

Name of Driver

NRIC No

Date Of Birth Occupation

YEO TIONG CHEOK SXXXX191F 29/10/1963 Outdoor

Date Of Driving Pass 06/05/2003 Driving experience 17 YEARS AND 9 MONTHS Gender Male Mobile Number (Phone) +65-96741169 Alt. Phone Number Email Address celiangus@gmail.com Address BLK, 120 MCNAIR ROAD Address complement #05-85 SINGAPORE Postcode 320120

Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 - Head to Rear 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? No Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHD2340P Vehicle Manufacturer Toyota Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Taxi Name of Driver Contact Number

CHIA WAY BENG (Phone) +65-97775644

Address Address complement Postcode Insurance Company Name

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 Formmust 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' 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.

Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre Time & Time Personnel Sketch Plan

 Circumstances of the Accident
 I was driving and sort stone Replanage Propol
 I was griving my our along Kendlemeer Kood.
 I would driving my our along Bendemeer Road. The front car stopped. I would not stopped i time and hit and The front car rear partie
 time and hit and the front car rear partic
No one was injured,
 · ·

Declaration

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel 2 of 20

CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : CECILIA NG LEE GEK

Period of Insurance

: 25 Jul 2020 To 24 Jul 2021

Engine No.

: G4EGHH602449

Chassis No. : KNAFJ411MJ5762300 Vehicle No. Policy No.

: SDT8767R

Endorsement No.

: 1800089040-01

Issued Date

: 07 Jul 2020

ABOUT THE COVER

Make Model

KIA FORTE KILLE A EX

Engine Capacity/Tonnage : 1,591 00 CC

Sum Insured : Market Value

First Year of Registration : 2018

Onver Restrict on

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

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Age Condition

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Loss of Use 1500cc - 1660cc

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EXCESS

Saution 2 Fragers Clemage - \$0 Wests crewn 15 100

Named Daver and Excess was approximate

CECLUS VISILEE GEX - \$800 (Own Damago), \$800 (F\$308 Caver)

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

Carlo di Car sepellinto di Parri Cardra, Add. 258 Pardian Gambers Suggiana 628336 65686983

2 Coron & Carriago Authorized Scrive (For account reporting & antifection state only). Add: 330 Ute Rd 3 Strepapore 408650 67461000
3 Cyrlin 4 Cettings: Authorized Scrive of Carriar (For Account reporting & Arielsocker states only). Add: 300 Sin May Are Singapore 150001 64278800
4 Cyrlin 5 Cettings: Authorized Scrive of Carriar (For account reporting & architectual disconnect Scrive and Singapore 575733 80329000

r other Approved Reperting Centres AtC Authorest Requirem present and active TRAsser scopent whet G. B.C. Metric Rep. Tempts search and described ArC St. Tears Lance or Geogle Plan

IMPORTANT NOTES

Hire Purchase Company Employer's Loan, Standard Chartered Bank (Singapore) Limited

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AIG Asia Pacific Insurance Ptv. Ltd.

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ZIP ALEXANDRA ROAD

SINGAPORE (S883)

Underwrities by AIG Asia Pacific Insurance Pte. Ltd.