



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



Co Reg No : 1977014696

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info	
SUA YAP LIEN	Cust No/Name	KCV12158/SUA YAP LIEN
BLK 307 WOODLANDS AVENUE 1	Reg No/Reg Date	SMP4447E / 26/09/201
#07-309	Date In/Mileage	/ 0
SINGAPORE 730307	Chassis No	GF7W0601819
Contact No	Engine No	4J11BG3366
	Make/Model	MIT/19MY OUTLANDER 2.0 STYLE(994)
	Colour/Trim	P02 RED METALLIC / BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
KCV12158	CRDVCH	01/03/2021/ 13:35		442 / CocoLu	63492			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
E PNT88000								2250.00
RENEW FRT BUMPER, BONNET, FRT FENDER LH, FRT SUPPORT PANEL								
REPAIR FRT DOOR LH, FRT FENDER RH								
E PNT88000								100.00
REMOVE & INSTALL AIRCON CONDENSOR & RADIATOR								
E PNT98000								2100.00
SPRAY PAINT FOR FRT BUMPER, FRT FENDER RH & LH, BONNET								
FRT SUPPORT PANEL, FRT DOOR LH								
E PNT88000								100.00
REMOVE & INSTALL FRT AIRDAM								
A 54900099								30.00
CHECK WIRING & ELECTRICAL SYSTEM								
A 10028901								120.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST								
USING HI-SCAN PRO TEST								
M SUNDRY								40.00
APPLY SEALANT FOR ACCIDENT PORTION								
M SUNDRY								50.00
FRT NUMBER PLATE WITH FRAME								
M SUNDRY								20.00
Sundry								
M	FACE,FR BUMPER				1.00	863.00	00.00	863.00
M	EXTENSION,FR BUMPER				1.00	517.00	00.00	517.00
M	GARNISH,FR BUMPER,RH				1.00	48.00	00.00	48.00
M	GARNISH,FR BUMPER,LH				1.00	48.00	00.00	48.00
M	BRACKET,FR BUMPER SIDE,RH				1.00	18.00	00.00	18.00
M	BRACKET,FR BUMPER SIDE,LH				1.00	18.00	00.00	18.00
M	GARNISH,FR BUMPER SIDE				1.00	220.00	00.00	220.00
M	GARNISH,FR BUMPER SIDE				1.00	220.00	00.00	220.00
M	COVER,FR BUMPER				1.00	361.00	00.00	361.00
M	GARNISH,FR LICENSE PLATE				1.00	23.00	00.00	23.00
M	REINFORCEMENT,FR BUMPER				1.00	493.00	00.00	493.00
M	REINFORCEMENT,FR BUMPER				1.00	135.00	00.00	135.00

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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mitsubishi
MOTORS

Co Reg No : 197701469G

ESTIMATE

GST Reg No : MR-8500111-X

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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
KCV12158	CRDVCH	01/03/2021/ 13:35		442 / CocoLu	63492		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
M	REINF,FR BUMPER SIDE,RH			1.00	69.00	00.00	69.00
M	REINFORCEMENT,FR BMPR SIDE			1.00	22.00	00.00	22.00
M	REINF,FR BUMPER SIDE,LH			1.00	60.00	00.00	60.00
M	COVER,FR BUMPER			1.00	25.00	00.00	25.00
M	COVER,HEADLAMP SUPT PANEL			1.00	50.00	00.00	50.00
M	GRILLE ASSY,RADIATOR			1.00	550.00	00.00	550.00
M	BRACKET,RADIATOR GRILLE,LH			1.00	13.00	00.00	13.00
M	LATCH,HOOD			1.00	76.00	00.00	76.00
M	HOOD			1.00	980.00	00.00	980.00
M	FENDER,FR LH			1.00	622.00	00.00	622.00
M	SHIELD,FR WHEELHOUSE,LH			1.00	164.00	00.00	164.00
M	PANEL,HEADLAMP SUPPORT,UPR			1.00	183.00	00.00	183.00
M	PNL,HEADLAMP SUPT,UPR LH			1.00	58.00	00.00	58.00
M	HEADLAMP ASSY,LH			1.00	1948.00	00.00	1948.00
M	HEADLAMP ASSY,RH			1.00	1948.00	00.00	1948.00

Confirm & accepted by

Nett	14,542.00
7% GST on	14542.00
Total Payable	15,559.94

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 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	01/03/2021 11:30 (SGT)
Date of Accident	26/02/2021 17:30 (SGT)
Exact Location of Accident	Thomson Rd, Singapore
Additional Location Information	THOMSON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP4447E
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	SUA YAP LIEN
NRIC No	SXXXX204I
Email Address	CHIA.CONNIE@GMAIL.COM
Mobile Phone No	(Phone) +65-93221184
Alternative Phone No	+65-92311162

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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	1900166165
Cover Note Number	-

DRIVER

Name of Driver	SUA YAP LIEN
NRIC No	SXXXX204I
Date Of Birth	17/05/1959
Occupation	Indoor

Date Of Driving Pass	24/07/1979
Driving experience	41 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93221184
Alt. Phone Number	+65-92311162
Email Address	CHIA.CONNIE@GMAIL.COM
Address	BLK 307 WOODLANDS AVENUE 1 #07-309
Address complement	-
Postcode	730307
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 - 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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	CHIA POH KHIM
Gender	Female

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 1

Vehicle Registration Number	GZ9287K
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-

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 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.



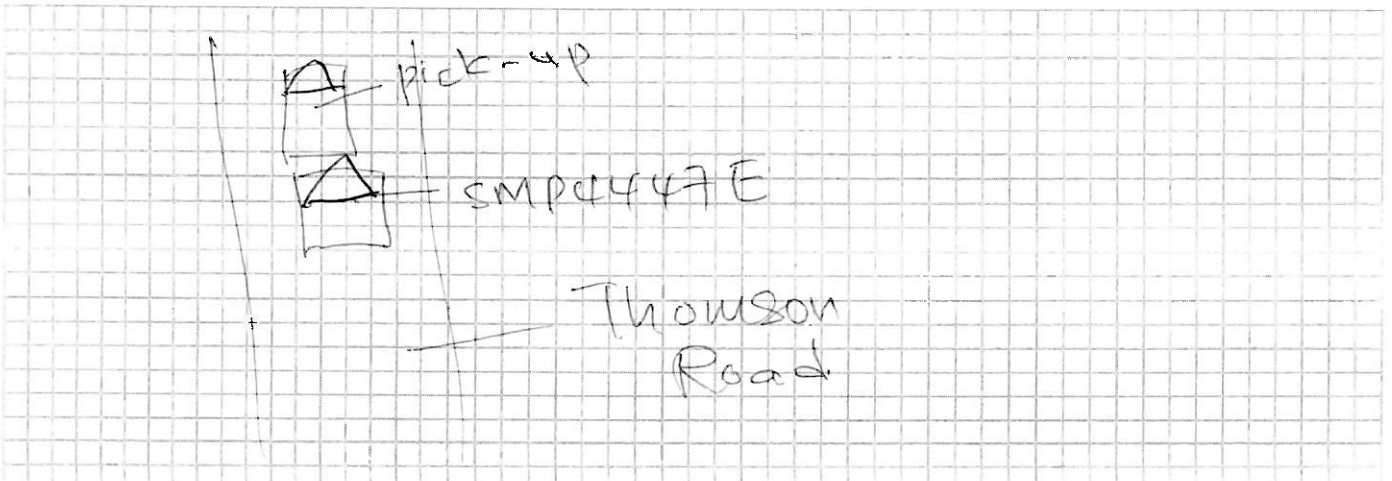
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

I was driving along Thomson Road when I bumped lightly into a pick-up. The pick-up was not damaged in any way. The traffic was heavy & speed is low. I did not step on the brake pedal on time.

Declaration

I/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

**CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE**

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder.

Name of Policyholder : Sua Yap Lien / *YS*
 Period of Insurance : 25-Sep 2019 to 24 Sep 2021
 Engine No. : 4J11BG3366 /
 Chassis No. : GF7W0601819 /

Vehicle No. : SMP4447E
 Cover Note No. : 1900166165
 Endorsement No. :
 Issued Date : 20 Sep 2019

ABOUT THE COVER

Make/Model : MITSUBISHI Outlander 2.0 Elegance/Sports /
 Engine Capacity/Tonnage : 1,998.00 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 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, 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 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)

Sua Yap Lien - \$600 (Own Damage), \$600 (Flood Cover)

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 & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708688

3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

4. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

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.com.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: Daimler Financial Services Africa & Asia Pacific Ltd /

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.
 I/We hereby certify that this Cover Note 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, (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia). For Corporate Policies, this Cover Note is valid for 60 days from the commencement date of the period of insurance.

0504623209

FULCOMICP2 - MC

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. Manik
AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

Chin E