

ASS. REC. BY:

Steve

CS/CT121003230/ED3

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

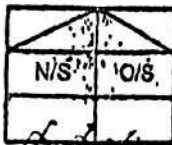
Excess:

(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

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLR 2889C

Yr Regn:

8/8/17

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

Truck / Trailer or

Make:

KIA Cerato

cc

1591

Colour:

Blue

A/C:

Insured / Std / Nil / N

Sp. Reading

54343

T/Radio:

Insured / Std / Nil / N

Eng/No:

C/No:

KNAFZ411 MITSUB 6956

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

P: 215/45R17

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

4

mm

R/Bal.

4

mm

L/Bal.

4

mm

L/Bal.

4

mm

D.O.A.

6/3/21

D.O.A.

17/5/21

Survey held at

Cyck & Callan

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

The UIC / Chassis frame / Body Structure affected due to collision

Date / Time

Action / Instruction

NAV-60K

Time/Date, File, Pass log?

☐

: Prel. Report

☐

: Final Report

Time/Date, File Return log?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Inve (\$

☐

: Visual and (\$

: \$ + RS \$

: Fuel

: Others

TOTAL

Remarks:

Map Sheet / L.P. / P.



CYCLE & CARRIAGE

CYCLE & CARRIAGE KIA PTE LTD

PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240



ESTIMATE

CTI

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Ng Boon Leong(huang Wenliang)	Cust No/Name /NG BOON LEONG(HUANG WENLIANG)
10A JALAN LENGKOK SEMBAWANG	Reg No/Reg Date SLR2889C*KC17/ 08/08/201
SINGAPORE 759250	Date In/Mileage / 0
Contact No Mobile: 98249268	Chassis No KNAFZ411MJ5736956
	Engine No G4FGHH67B487
	Make/Model KIA/CERATO K3 1.6 A SX SR
	Colour/Trim B4U GRAVITY BLUE / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
CSM00081	Cash	09/03/2021/ 12:10	Bod	261 / Edwin Caina	30131		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000							1280 3200.00
RENEW RR BUMPER , RR END PNL & BOOTLID							
REPAIR RE-ALIGN RR FLR PNL , LHR FENDER & RHR FENDER							
E PNT98000							1100 2450.00
RESPRAY RR BUMPER , BOOTLID , BOOTLID SPOILER , RR END PNL ,							
RR FLR PNL , LHR FENDER & RHR FENDER							
E PNT88000							320.00
REMOVE & REFIT BOOTLID COMPONENT							
E PNT88000							? 320.00
REMOVE & REFIT RR FLR BOARD , TRIM & CARPET							
A 54900099							50.00
CHECK WIRING ELECTRICAL SYSTEM							
A 10028901							280.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST							
USING HI-SCAN PRO TEST							
M SUNDRY							X 80.00
SUPPLY RR NUMBER PLATE WITH CASING							
E PNT88000							X 100.00
REMOVE & REFIT REVERSE SENSOR							
M SUNDRY							? 280.00
SUPPLY REVERSE SENSOR							
M SUNDRY							40 120.00
APPLY ANTI CORROSION ON AFFECTED AREAS							
M SUNDRY							40 80.00
SUPPLY BODY PNL SEALANT							
M SUNDRY							40 50.00
SUPPLY C&C BADGE							
M SUNDRY							20 50.00
Sundries							
M COVER-RR BUMPER					1.00	688.00 00.00	688.00
M COVER-RR BUMPER,CTR					1.00	315.00 00.00	315.00
M BEAM-RR BUMPER					1.00	318.00 00.00	318.00
M STAY-RR BUMPER LH					1.00	120.00 00.00	120.00

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	09/03/2021/ 12:10	Bod	261 / Edwin Caina	30131

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M STAY-RR BUMPER RH	1.00	120.00	00.00	120.00
M ANTENNA ASSY-SMARTKEY	1.00	69.00	00.00	69.00
M BRACKET-RR BEAM LWR MTG	2.00	5.00	00.00	10.00
M BRACKET-RR BEAM LWR,CTR	1.00	5.00	00.00	5.00
M BRACKET-RR BEAM UPR MTG	1.00	3.00	00.00	3.00
M BRACKET-RR BEAM UPR MTG,RH	1.00	3.00	00.00	3.00
M GUARD-BUMPER REAR,RH	1.00	17.00	00.00	17.00
M BRACKET-RR BUMPER SIDE MTG,LH	1.00	29.00	00.00	29.00
M BRACKET-RR BUMPER SIDE MTG,RH	1.00	29.00	00.00	29.00
M WIRING HARNESS-BWS EXT	1.00	216.00	00.00	216.00
M ULTRASONIC SENSOR ASSY-P.A.S	1.00	177.00	00.00	177.00
M PANEL ASSY-TRUNK LID	1.00	1365.00	00.00	1365.00
M HINGE ASSY-TRUNK LID,LH	1.00	68.00	00.00	68.00
M HINGE ASSY-TRUNK LID,RH	1.00	68.00	00.00	68.00
M LOGO ASSY-KIA SUB	1.00	37.00	00.00	37.00
M EMBLEM-CERATO	1.00	35.00	00.00	35.00
M PANEL ASSY-BACK	1.00	324.00	00.00	324.00
M LATCH ASSY-TRUNK LID	1.00	112.00	00.00	112.00
M STRIKER ASSY-TRUNK LID	1.00	18.00	00.00	18.00

SURVEYOR NAME: Steve (LKK) 17/5/21, 12-45pm

SURVEYOR SIGNATURE: W.L. P.L.

DATE: 4 days

REMARKS: P/P

My Bel dy

Confirmed & accepted by 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
- Third party survey is on a "Without Prejudice" basis

Authorized signatory and company stamp

	Nett	11,526.00
7% GST on	11526.00	806.82
Total Payable		12,332.82

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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	09/03/2021 11:11 (SGT)
Date of Accident	06/03/2021 23:45 (SGT)
Exact Location of Accident	Sengkang E Rd, Singapore
Additional Location Information	SLIP ROAD FROM SENGKANG EAST RD TO TPE (SLE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR2889C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	NG BOON LEONG
NRIC No	SXXXX468B
Email Address	BOONLEONG@GMAIL.COM
Mobile Phone No	(Phone) +65-98249268
Alternative Phone No	+65-98249268

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?	No - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1700037252
Cover Note Number	-

DRIVER

Name of Driver	NG BOON LEONG
NRIC No	SXXXX468B
Date Of Birth	12/06/1984
Occupation	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

13/07/2007
 13 YEARS AND 8 MONTHS
 Male
 (Phone) +65-98249268
 +65-98249268
 BOONLEONG@GMAIL.COM
 10A JALAN LENGKOK SEMBAWANG
 -
 759250
 Yes
 -
 No
 -
 -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Collision - Head to Rear
 Clear
 Dry

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
 2
 No
 -
 Yes
 1
 No

DETAILS OF POLICE ACTION

Was the accident reported to the police?
 Was notice of intended Prosecution given?
 If yes, against whom?

No
 No
 -

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

ATTACHMENT(S)

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

Yes
 No
 No

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category
 Name of Driver
 Contact Number
 Address
 Address complement
 Postcode
 Insurance Company Name

SLV3901Y
 Honda
 -
 -
 -
 Private car
 LOW YOKE CHUN
 (Phone) +65-85008787
 -
 -
 -
 -

Amount 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.
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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 firms/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")

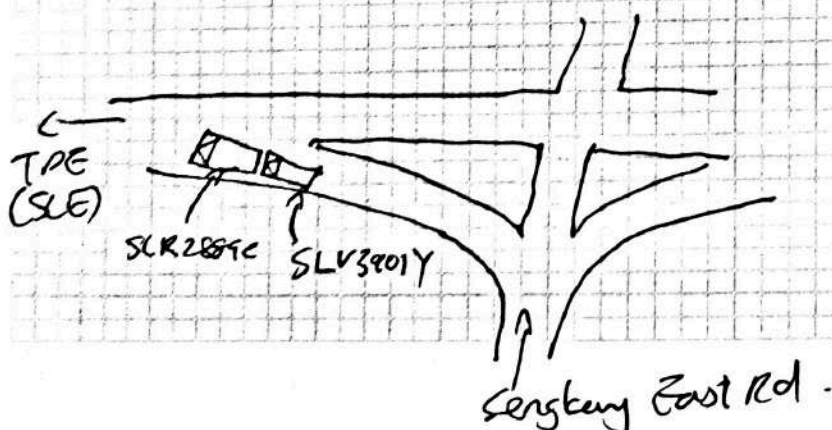
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law firms/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


8 Mar 2021
22:02pm
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


At 23:45 on 6 Mar 2021 I was driving from Sengley Rd East onto the Slip road that leads to TPE (SUE). I stopped where the slip road enters the main lane to look out for oncoming traffic. I had started to move forward when a taxi came down the main lane. I stopped again to give way to the taxi. At that moment, shortly after that, I felt the impact of a car from behind. I put on the hazard lights and went out of the car to see what had happened and found out the other car had ~~been~~ collided and damaged the boot and rear bumper.

Declaration

We declare the foregoing particulars are true in every respect.

 9 March 2021.
Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel