



Mercedes-Benz

Star CLKKJ

22/11/21, 2.1pm

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PIP

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Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

ESTIMATE FOR SLL3186Y

Lim Swee Hon Robin

Blk 70A Telok Belangah Heights
#18-509
Singapore 101070

Mobile: +6598321062

Vehicle & Document Information

WIP No

53301

Reg No/Reg Date

SLL3186Y / 22/06/2016

Date In/Mileage

SLL3186Y

Chassis No

WDD1173422N347209

Engine No

27091030926797

Make/Model

MB/MB CLA 180 COUPE (C117) "URBAN"

Colour/Trim

027 761 Polar Silv/ 041 151-Leather Twi

Account No	Terms	Date/Time Printed	CSE	Operator	Qty	Unit Price	Disc%	Amount
CSM00128	Cash	09/11/2021/ 18:35	YK	395 / Yik Chan Hoe				
Description of Goods / Services								
Z REQUEST								
Customer Request								
M BPNSUN								
POLICY NO/ACC DATE : P10380262R01 // 08/11/2021								
DRIVE IN/EXCESS : 09/11/2021 // TP VEH NO SML7688M CHINA TAIPING								
DATE IN/DATE SURVEY:								
BY/AUTHORIZED ON :								
S BPNSUB								
TRANSFER TYRES OVER TO NEW RIMS X 2								120.00 ✓
A BPILAB								
PANEL BEATING TO REPAIR AFFECTED AREAS, REMOVE AND REPLACE WITH NEW								1970 2400.00
BODY PANELS WITH REFINISH								1200 1800.00 ✓
A BPIRES								
RESPRAY FRONT BUMPER AND LEFT FRONT FENDER							0.10	380.00 ✓
A BPILAB								
USING XENTRY SYSTEM TO CHECK CONTROL UNITS, RESET SYSTEM TO								
STANDARD SETTINGS. NETT								120.00 ✓
A BPILAB								
CHECK HEADLAMP WITH FOCUS ADJUSTMENT. NETT								540.00 ✓
A BPILAB								
INSPECT & CONDUCT OPTICAL WHEEL ALIGNMENT. NETT								
M LEFT & RIGHT FRONT DISK WHEEL - CUT					2.00 ✓	688.68	00.00	1377.36
M LEFT HEADLAMP - CUT					1.00	2632.90	00.00	2632.90
M FRONT BUMPER - CUT					1.00	1421.95	00.00	1421.95
M FRONT BUMPER MB EMBLEM - RR					1.00	63.68	00.00	63.68
M LEFT FRONT DISTANCE SENSOR - RR					1.00	182.48	00.00	182.48
M PTS SPACER RING - RR					1.00	6.35	00.00	6.35
M LEFT FRONT FENDER - RR					1.00	683.73	00.00	683.73
M LEFT FRONT FENDER INTERMEDIATE LAYER - RR					1.00	17.94	00.00	17.94

Yik Chan Hoe

Cycle & Carriage Industries Pte Ltd

Body Care & Repair Center

DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272

Email: chanhoe.yik@cyclecarrage.com.sg

Confirmed & accepted by

Nett 11,746.39
7% GST on 11746.39 822.25

Total Payable 12,568.64

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.

- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Mercedes-Benz - are registered trademarks of Daimler, Stuttgart, Germany

Date:

Pandan Loop Service Center
188 Pandan Loop
Singapore 128378
Tel: 6777 8388
Fax: 6779 5383
www.mercedes-benz.com.sg

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	09/11/2021 17:49 (SGT)
Date of Accident	08/11/2021 13:55 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	MARINE PARADE ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLL3186Y

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ROBIN LIM SWEE HON
NRIC No	SXXXX144H
Email Address	ROBINLIM85@HOTMAIL.COM
Mobile Phone No	(Phone) +65-98321062
Alternative Phone No	+65-98321062

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Cla180
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
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10380262R01
Cover Note Number	-

DRIVER

Name of Driver	ROBIN LIM SWEE HON
NRIC No	SXXXX144H

Date Of Birth	08/01/1985
Occupation	Indoor
Date Of Driving Pass	28/04/2006
Driving experience	15 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98321062
Alt. Phone Number	+65-98321062
Email Address	ROBINLIM85@HOTMAIL.COM
Address	BLK 70A TELOK BLANGAH HEIGHTS #18-509
Address complement	-
Postcode	101070
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	Side Swipe
Weather Conditions	Raining
Road Surface	Wet

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 vehicle 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 SKETCH PLAN.

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	SMJ7688M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

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.



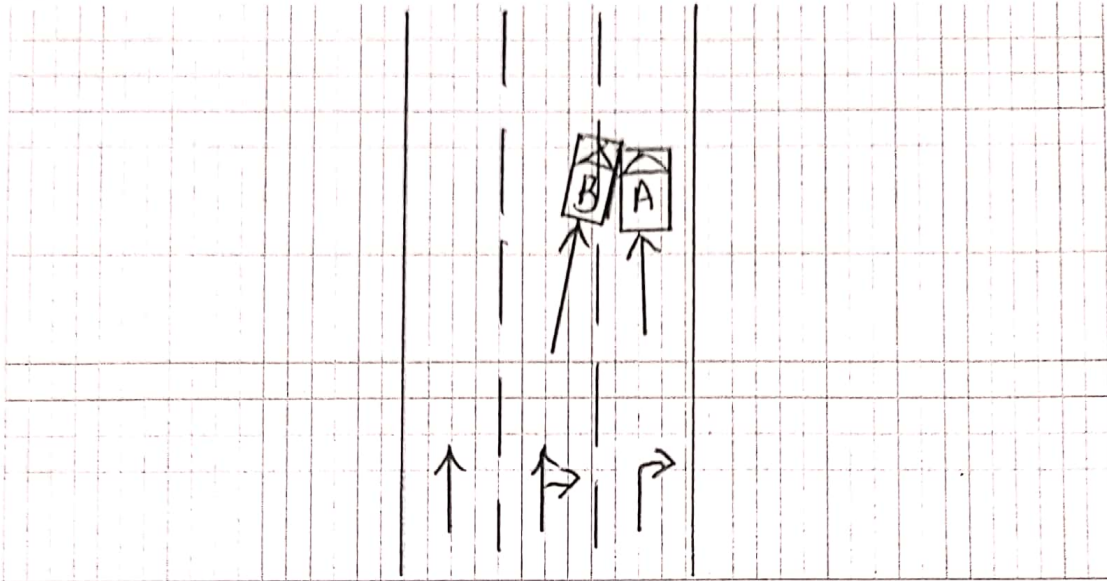
Policyholder's Signature
Date & Time

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

Reporting Centre Personnel's
Name:

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: chanhoe.yik@cyclecarriage.com.sg

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving on the right lane when Car B swerved into my lane from the left and hit the left side of my car. The impact caused my car towards the right and hit the center road divider.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature
Date & Time

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

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: clanhoe.yik@cyclecarriage.com.sg
Reporting Centre Personnel's
Name: