

ASSIGNMENT

Date: _____
 Estimated Cost: _____
 () TYPE / MAKE / YEAR / COLOR / BODY / EVAL / VIN / MV
 To Inspect Vehicle No: _____
 at Workshop no: _____
 at _____
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____
 (Client's Record)
 Make of Vehicle _____

(Policy Condition)
Remarks: The vessel had commenced its
trip at the time of inspection.

Ref. or Market Value: _____

IDAC Accident Report: _____ Consistent? Yes or No

DIA / PR Seen: _____ Consistent? Yes or No

Est. Repairs: _____ days Res.: Yes or No

Claim Sett: _____ % 3 Vol.: Yes or No

QA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle IN/OUT

Veh No: SMJ 1769C Yr Regd: 25/2/2019
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Private Motor
 Truck / Trailer or _____
 Make: KIA Certe Ch: 1591
 Colour: White A/O: Insured / Stolen / N
 Sp. Reading: 56908 Tyre: Insured / Stolen / N
 Eng/No: _____
 Ch/No: KNAF3416M K 5009871
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Insured / Jammed / Locked / Burnt or
 Brakes: Insured / Jammed / Locked / Burnt or
 Modl: All / SRM / STD / R / M or
 Tyre Size: 205 / 55R16
 RI: 17
 BS / DUN / EXNÖVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or B Nexen
 Front: 4 mm R/Oil: 4
 R/Oil: 4 mm U/Oil: 4
 U/Oil: 4 mm O/Oil: 17/11/21
 O.O.A. 16/11/21 Cycle & Carriage
 Survey held at _____
 Des. of Damages: (Pri) Rear / O/S / MIS / VIC / Roq/loss or
 The W/O / Chassis frame / Body structure affected due to collision

Date / Time :	Action / Instruction
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MV-70K

me/Thu, Feb 22, 2018, 11:11 AM, Proell, Robert

Final Report

alemana, 7^{da} Reunión

[illegible]

www.gutenberg.org/files/11731/12

Days Of Repair:

Recovery No. of Trips

Add Foot:

1	1. Name of the person	1
2	2. Date of birth	2
3	3. Place of birth	3
4	4. Nationality	4
5	5. Occupation	5
6	6. Address	6
7	7. Telephone number	7
8	8. Other information	8

Survey Fee

Transpeller

1. 8. 1954

1) $\frac{1}{2} \times 100 = 50$

11 10/1/46

11

1. Yr. 1846.



CYCLE & CARRIAGE

CYCLE & CARRIAGE KIA PTE LTD

PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240



Movement that inspires

ESTIMATE

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info														
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPARTMENT 78 SHENTON WAY #09-16 AIG BUILDING SINGAPORE 079120 Contact No 64191000	<table> <tr> <td>Cust No/Name</td><td>/Chua Teck Yong, Daniel (cai Der</td></tr> <tr> <td>Reg No/Reg Date</td><td>SMJ1769C / 25/02/201</td></tr> <tr> <td>Date In/Mileage</td><td>17/11/2021/ 0</td></tr> <tr> <td>Chassis No</td><td>KNAF3416MK5009871</td></tr> <tr> <td>Engine No</td><td>G4FGJH702498</td></tr> <tr> <td>Make/Model</td><td>KIA/CERATO 1.6 A EX G333</td></tr> <tr> <td>Colour/Trim</td><td>SWP SNOW WHITE PEAR/ WK SATURN BLACK</td></tr> </table>	Cust No/Name	/Chua Teck Yong, Daniel (cai Der	Reg No/Reg Date	SMJ1769C / 25/02/201	Date In/Mileage	17/11/2021/ 0	Chassis No	KNAF3416MK5009871	Engine No	G4FGJH702498	Make/Model	KIA/CERATO 1.6 A EX G333	Colour/Trim	SWP SNOW WHITE PEAR/ WK SATURN BLACK
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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
LAX00000	Credit	16/11/2021/ 15:17	BLK	282 / Kevin Leong	42596			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
E PNT88000								400 800.00
REPLACE FRT BUMPER PANEL, REINFORCEMENT & AFFECTED AREA								350.00
E PNT98000								40.00
PAINT WORK ON FRT BUMPER PANEL								30.00
M SUNDRY								120.00
TO APPLY SEALANT ON AFFECTED AREA								50.00
A 54900099								20 40.00
CHECK WIRING & CHASSIS ELECTRICAL SYSTEM								
A 10028901								
TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM								
M SUNDRY								
TO SUPPLY FRT NUMBER PLATE WITH FRAME								
M SUNDRY								
SUNDRIES								
M LAMP ASSY-HEAD,RH					1.00	1219.00	20.00	975.20
M ORNAMENT-KIA NO.115					1.00	32.00	20.00	25.60
M COVER-FR BUMPER					1.00	633.00	20.00	506.40
M GRILLE-FRONT BUMPER					1.00	262.00	20.00	209.60
M GRILLE ASSY-RADIATOR					1.00	328.00	20.00	262.40
M GARNISH-RADIATOR GRILLE					1.00	38.00	20.00	30.40
M MOULDING-FRONT BUMPER,RH					1.00	36.00	20.00	28.80
M ABSORBER-FRONT BUMPER ENERGY					1.00	84.00	20.00	67.20
M BRACKET-FR BUMPER UPR SIDE MTG					1.00	22.00	20.00	17.60
M BEAM COMPLETE-FR BUMPER					1.00	497.00	20.00	397.60
Steve (LKK)								
17/11/21, 12:30pm								
00-M AL								
Excess?								
P/P								
My BIL sy								
3 days								
7% GST on								
3950.80								
Total Payable								
3,950.80								
276.56								
4,227.36								

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	16/11/2021 13:58 (SGT)
Date of Accident	16/11/2021 12:36 (SGT)
Exact Location of Accident	Pandan Gardens, Singapore
Additional Location Information	PANDAN GARDENS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ1769C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHUA TECK YONG, DANIEL (CAI DERONG, DANIEL)
NRIC No	SXXXX649I
Email Address	DCHEROES02@GMAIL.COM
Mobile Phone No	(Phone) +65-91167702
Alternative Phone No	+65-91167702

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1591

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900017303-01
Cover Note Number	-

DRIVER

Name of Driver	CHUA TECK YONG, DANIEL (CAI DERONG, DANIEL)
NRIC No	SXXXX649I

Date Of Birth	11/02/1980
Occupation	Indoor
Date Of Driving Pass	20/12/2006
Driving experience	14 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91167702
Alt. Phone Number	+65-91167702
Email Address	DCHEROES02@GMAIL.COM
Address	BLK 14 YISHUN AVENUE 9 #05-16
Address complement	-
Postcode	768895
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 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 ATTACHMENT
COLLISION-HEAD TO SIDE

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	SLT4267Z
Vehicle Manufacturer	Honda
Vehicle Model	Freed
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NOORLITA BINTE HASSAN
Contact Number	(Phone) +65-97775774
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.
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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;

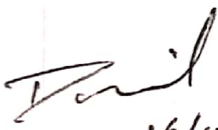
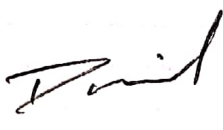

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

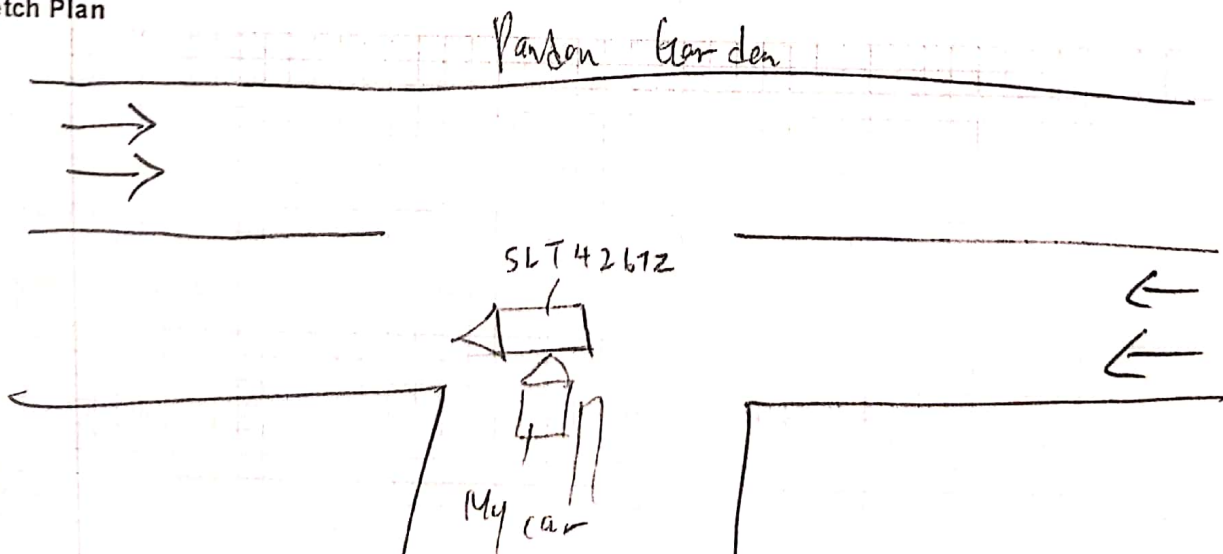
(collectively the "Purposes")

(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.

 X 16/11/2021	 X 16/11/2021	
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

When proceeding to turn right, had accidentally hit on a passing by vehicle from the right.


Declaration

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

x 

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 : CHUA TECK YONG, DANIEL (CAI DERONG, DANIEL) Vehicle No. : SMJ1769C
Period of Insurance : 25 Feb 2021 To 24 Feb 2022 Policy No. : 1900017303-01
Engine No. : G4FGJH702498 Endorsement No. : 000000000400604
Chassis No. : KNAF3416MK5009871 Issued Date : 18 Jun 2021

ABOUT THE COVER

Make/Model : KIA Cerato
Engine Capacity/Tonnage : 1,591.00 CC Sum Insured : Market Value First Year of Registration : 2019
Driver Restriction : NA Off Peak Car : No Insuring with COE/PAFF : 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" ("YIDER") 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)

CHUA TECK YONG, DANIEL (CAI DERONG, DANIEL) - \$600 (Own Damage), \$600 (Flood Cover)

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

- 1 Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65884501
- 2 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
- 3 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159831 64278800
- 4 Cycle & Carriage 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 or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

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).

0504622204

C&CKICP2 - CTEAS

239 ALEXANDRA ROAD
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPDPH