ASS. REC. BY: STEVE - NEF: Allianz	CS/AIS22002272/Eqy3
The same of the sa	COMENT
From: Date:	Veh No: SM23671M Yr Regn: 8/1/2)
Estimated Cost:	Type: (1.Car / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD INTEL WS I TP RES I OD RES I EVA I INV I MY	Truck / Trailer or
To Inspect Vehicle No:	Make: XIA Cerate c.c 1591
at Workshop m/s	Colour Black A/C: Insured / Std / NI / NA
of	Sp.Reading 62608 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/NO: KNAF3W16ML5010153.
Claims No. 2022 22003989FR	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: In order / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder/ Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / STRim / STD A/Rim or
-12/1	Tyre Size: F: 16/55/76
(Policy Condition)	R: 1)
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / SY) FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Balmm , R/Balmm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 5 mm L/Bal. 5 mm
Est Repairs: 7 days Res.: Yes or No	D.O.A. 15/1/1/
Lum Sum: % 3 Val.: Yes or No	Survey held at CYCL & CATCAGE
CA / REV / REP. / 24 HRS	Des. of Damages: Fit Rear O/S N/S U/C Rooftop or
Vehicle: IN / OUT	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
MV- 40 K	
with 7 days of repair, subject to the	cost of repair of \$14,050.00 (P/P before GST) -
•	п арргота
(Red \$2567, 15%)	
T. T	·
Date/Time, File Pass to? : Prell. Report	Days Of Repair: 7
	Resurvey No. of Trip: Survey Fee:
22/06 Typist : Final Report Date/Time, File Return to?	Transportation:
Add F	ee: : Site Insp (\$) _s+Rssi
. 2)	: Interview (\$) Photos
Representate: TP	:Tech, Invs (\$) Others
Lump Sum / LBJ: (\$ 14050)	:Weel:end (\$
	TOTAL



CYCLE & CARRIAGE KIA PTE LTD PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

Movement that inspires

Co Reg No : 199405410K

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info			
SHASI KUMAAR S/O SUPRAMANIAM	Cust No/Name /SHASI KUMAAR S/O SUPRAMANIAM			
SING! KOMM S/O SU KAMATATA	Reg No/Reg Date SMX3671M / 08/01/202			
BLK 440A CLEMENTI AVENUE 3	Date In/Mileage / 0			
#26-10 CLEMENTI CASCADIA SINGAPORE 121440 Contact No Mobile: 81233394	Chassis No KNAF3416ML5070153			
	Engine No G4FGKH756520			
	Make/Model KIA/CERATO 1.6 A EX G333			
	Colour/Trim ABP AURORA BLACK / WK SATURN BLACK			

Account No	Terms	Date/Time Printed	CSE	Operator		WIP No		High	
CSM00081	Cash	10/03/2022/ 13:17	TLE	261 / Edwin	Caina	46956			
	The state of	Description of Good	s / Services		Qty	Unit Price	Disc%	An	nount
E PNT88000	1	80	1				2000		3200.00
RENEW FR	BUMPER,	FR BUMPER BODY KIT	, BONNET ,	FR SUPPORT &	3 x 640 +80		2		
E PNT98000		80	,				- 1	-10	3300.00
	/ FR RUMPER	, FR BUMPER BODY K	IT . BONNET	LHE FENDER			Į.	2280	3300.00
& RHR FEI		, TR BOTH ER BODT R	. ,	, Em Temper					
E PNT88000								7	100.00
	REFIT AC	COND & RADIATOR						1	
M SUNDRY								1	80.00
TOP UP AC A 54900099		_		7					50.00
CHECK WIE	TNG FLEC	TRICAL SYSTEM	$ \Gamma$						50.00
A 10028901	THO LLLC	TRICAL SYSTEM	2711	110015	2171/0)			280.00/
TO CARRY	OUT DIAG	NOSTIC CHECK ON ELE	CTRONIC GON	ITROL SYSTEM (311410	7			
M SUNDRY		Benchman Berthrout		ad had had had					80.00/
	NUMBER F	PLATE WITH CASING	CUT						
M SUNDRY								30	80.00
	I CORROSI	ION ON AFFECTED ARE	AS					110	00.00
M SUNDRY SUPPLY BO	DV DNI SE	AL ANT						40	80.00
M SUNDRY	DI FNL 3L	ALANI						20	50.00
Sundries								,	55165
M PANEL ASS	Y-H00D /	000			1.00	1502.00	00.00		1502.00
M HINGE ASS	Y-HOOD,LH	XX			1.00	43.00	00.00		43.00
M HINGE ASS					1.00		00.00		43.00
		NG PAD MTG X			13.00		00.00		13.00
M PANEL-FENI		* AV			1.00		00.00		430.00
M COVER-FR		- ISK			1.00		00.00		633.00
M CAP-FRONT					1.00		00.00		9.00
M GRILLE-FRO		~ ^0			1.00		00.00		262.00
M GRILLE ASS		01.			1.00		00.00		328.00
M GARNISH-RA		PER, RH BR			1.00		00.00		38.00 36.00
n noording-	KUNI BUM	PER, KIT / UN			1.00	30.00	00.00		30.00
Confirm & ac	cepted by								
				at the contract of the same of the contract of					

 K Auto Consultants hence notify the Repairer of the following: To resurvey before/after spray painting - Ladisplay damaged part(s) during resurvey as are subject to confirmation

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.



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
SHASI KUMAAR S/O SUPRAMANIAM	Cust No/Name /SHASI KUMAAR S/O SUPRAMANIAM
SHASI KUMANI SYO SUNTANIAN	Reg No/Reg Date SMX3671M / 08/01/202
BLK 440A CLEMENTI AVENUE 3	Date In/Mileage / 0
#26-10 CLEMENTI CASCADIA	Chassis No KNAF3416ML5070153
SINGAPORE 121440	Engine No G4FGKH756520
Contact No Mobile: 81233394	Make/Model KIA/CERATO 1.6 A EX G333
	Colour/Trim ABP AURORA BLACK / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	017431655	WIP No		
CSM00081	Cash	10/03/2022/ 13:17	TLE	261 / Edwin Caina		46956		
		Description of Good	s / Service	18	Qty	Unit Price		Amount
M LAMP ASS	Y-SIDE R	EPEATER, RH / BK			1.00	164.00		164.00
		UMPER ENERGY ?			1.00		00.00	84.00
M STIFFNER	-FR BPR	LWR 7			1.00	114.00		114.00
M AIR DUCT					1.00	14.00		14.00
		R UPR SIDE MTG			1.00		00.00	22.00
M ORNAMENT					1.00		00.00	32.00
M BEAM COM	PLETE-FR	BUMPER ' a			1.00	497.00		497.00
M CARRIER	ASSY-FROM	NT END MODULE '	00 (R	ada Kil) root	1.00	675.00		675.00
M NEW K3 20	020 AUROR	NT END MODULE 1 RA BLK PEARL ABP /	ar co	109 KI) 1 301	1.00	1721.00	00.00	1721.00
				Steve (LKK) 10 RE:	12/11	1 2006		
				Chu, MVK) 10	12/22	1.30ph	1	
		OUDVEVOD.	NAME.	TIENC (CKI,) 10	Police	, , ,		
		SURVETOR	INMIL.	14/1	A-			
		SURVEYOR	SIGNATU	RE:			- 1	
		0011721011		₽ 11'			- 1	
		DATE:		Λ .	RIC	1	- 1	
		DEMARKS.		10	n C	1	- 1	
		REMARKS:		J	_	1	- 1	
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							- 1	
							- 1	
							- 1	

Confirm & accepted by

Nett

13,960.00

7% GST on

13960.00

977.20

Total Payable

14,937.20

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.

SC1A222H0001 / CYCLE & CARRIAGE AUTOMOTIVE PTE LTD ENTRY DATE & TIME: 17/02/2022 09:14 (SGT) SUBMITTED BY: TAN SHIEH YUEN VERSION: 1 (17/02/2022 09:14 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process
 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 17/02/2022 09:14 (SGT) Date of Accident 15/02/2022 18:49 (SGT) Coleman St, Singapore **Exact Location of Accident** ALONG COLEMAN STREET TOWARDS ST. ANDREW'S ROAD Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

Kia

1591

SMX3671M Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner SHASI KUMAAR S/O SUPRAMANIAM NRIC No SXXXX524G Email Address SHASIKIMAAR78@GMAIL.COM Mobile Phone No (Phone) +65-81233394 Alternative Phone No +65-81233394

VEHICLE PARTICULARS

Model Cerato Variant Exact purpose for which vehicle was being used at time of Private hire 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

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No Policy Number 2070179327-01 Cover Note Number

DRIVER

Name of Driver SHASI KUMAAR S/O SUPRAMANIAM NRIC No SXXXX524G

Accident report SC1A222H0001

Page 1 of 28

Date Of Birth	15/01/1978
Occupation	Outdoor
Date Of Driving Pass	28/11/2001
Driving experience Gender	20 YEARS AND 3 MONTHS
	Male (Phone) +66 91233304
Mobile Number	(Phone) +65-81233394
Alt. Phone Number	+65-812333394
Email Address	SHASIKIMAAR78@GMAIL.COM
Address	BLK 440A CLEMENTI AVENUE 3 #26-10
Address complement	
Postcode	121440
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	
A Control of Control o	•
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
Nas there any video captured by Car Camera?	Yes
Was there any audio recorded?	No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
/ehicle Registration Number	SLB1515Y
Vehicle Manufacturer	Morrodos

 Vehicle Registration Number
 SLB1515Y

 Vehicle Manufacturer
 Mercedes

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Private car

 Name of Driver
 PNG KIM MENG

 Contact Number
 (Phone) +65-96398180

 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
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwanded 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 ladgement 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)

Lunderstand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General haurance 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 &

Time

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

Witnessed by Reporting Centre

Personnel

Sketch Plan

Accident report SC1A222H0001

Page 4 of 28

Describe Circumstances of the Accident

I Share	Kumage 3/0 Supramanum, NRIC No :	35 035 3 0 de de de
my while SMx36	tim along Coleman Street Inwards	Andrewick Bred
15th rece 2022 at 1	8 49 Wrs 14 was	When the state of
White 1	more should be later that bend to a	L Badenis Bood T
checked my left o	rar view mirrer. Suddenly, vehicle SEB ic No. 568913322, dashed out from the Sign 'Cubine continuous line'). This me Thus, my vehicle SMX3671M and	1818 y daily so
Pos Vies Mass No	is the scentilized district and force of	and side
stronger of the 's	the Constitutions testificated but from the	he right side warrage
archard of the a	top sign comme registrous line), this in	inde it impossible ter
me to step in time	· thus, my venicle smx so 11m and	senicie af Bigip A Collidas
		MARKET STATE OF THE STATE OF TH
		The state of the s
claration		
declare the foregoing particular	s are true in every respect.	
		1
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4 111		
sumaer / 16/02/22		- C/W
yholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date	Witnessed by Reporting Centre
,	& Time	Parsonnel