

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. M11D14872203

Sum Insured: \_\_\_\_\_ Excess: 800

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 6 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SKW6366D Yr Regn: 9/11/15

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

Truck / Trailer or

Make: Mercedes-Benz C180 c.c. 1595

Colour: BLUE A/C: Insured / Std / NI / NA

Sp. Reading \_\_\_\_\_ T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: WDD2050402R 113918.

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 225/50 R17

R: 11

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

TOYO / YOKO or Pirelli

Front Rear

R/Bal. 5 mm R/Bal. 5 mm

L/Bal. 5 mm L/Bal. 5 mm

D.O.A. 10/3/22 D.O.I. 11/3/22

Survey held at Cycle &amp; Carriage

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

Front RH

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

MV-83K

15/03/22@12.23pm revert to Josephine by email.

15/03/22@3.37pm Katie informed C/A by email.

15/03/22@3.45pm Informed Chee Han C/A &amp; ex:\$800 by email.

13/04/22@12.11pm 2nd revert to Katie by email. (supplementary \$182.93)

18/04/22@8.14am Katie approved COR \$22447.33 by email.

20/04/22@11.03am confirmed with Chee Han final fig \$22447.33, 6 days. (Red \$4532.28, 17%)

Date/Time, File Pass to?

☐ : Prel. Report

Days Of Repair: 6

1) 20/04 Typist

☐ : Final Report

Resurvey No. of Trip: 1

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Report Format: OD

Lump Sum / L.B.F. (\$ 22447.33)





Mercedes-Benz

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

## ESTIMATE FOR SKW6366D

Chua Bok Hee

Blk 102 Teck Whye Lane  
#04-420  
Singapore 680102

Mobile: +6594767188

### Vehicle & Document Information

WIP No 55497  
Reg No/Reg Date SKW6366D / 09/11/2015  
Date In/Mileage / 0  
Chassis No WDD2050402R113918  
Engine No 27491030463271  
Make/Model MB/MB C 180 SEDAN (W205) "AVANTGARDE / A  
Colour/Trim 028 890 Cavansit B1/ 041 101 ARTICO Blac

Account No	Terms	Date/Time Printed	CSE	Operator			
CSI00003	Cash	10/03/2022/ 18:23	CH	371 / Go Chee Han			
Description of Goods / Services				Qty	Unit Price	Disc%	Amount

Z REQUEST Customer Request M BPNSUN POLICY NO/ACC DATE : DHOM110164721800 // 10-3-2022 TOW IN/EXCESS : 10-3-2022 // TBA DATE IN/DATE SURVEY: BY/AUTHORIZED ON :					
A BPILAB DISASSEMBLE AND REPLACE ATTACHED DAMAGED PARTS & REFINISH.					
A BPIRES RESPRAY RH/FRONT FENDER					
A BPILAB USING XENTRY DIAGNOSTIC TO CHECK ON CONTROL UNIT RESET MEMORY TO IDENTIFICATION STANDARD. NETT					
A BPILAB TO REMOVE/REPLACE RH/FRONT AFFECTED SUSPENSION WITH ENGINE CARRIER.					
A BPILAB ATTACH/DETACH ENGINE SUPPORT PICTURE FOR NECESSARY REPAIRS.NETT					
A BPILAB TO INSPECT & CONDUCT WHEEL ALIGNMENT.NETT					
S BPNSUB LABOUR TO REMOVE AND INSTALL TYRE FROM RIM,(RUN FLAT) WHEEL BALANCE AND INSTALL NEW VALVE HEAD					
A 97250001 CAVITY PRESERVATION ON REPLACED OR REPAIRED BODY PANELS PERFORM					
A 97510101 BEADS, SEAMS AND FLANGES ON REPLACEMENT BODY PANELS/ COMPONENTS					
A BPILAB TO REMOVE,REPLACE HEADLAMP WITH FOCUS . NETT					
M BPNSUN TOWING FEE					
M STEERING GEAR					
M COMBINATION NUT					
		1.00	7544.01	00.00	7544.01
		2.00	14.64	00.00	29.28

Confirmed & accepted by

Go Chee Han

DID : 6771 4336 HP : 9181 7717

Email : cheehan.go@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop

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.

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





Mercedes-Benz

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

## ESTIMATE FOR SKW6366D

Chua Bok Hee

Blk 102 Teck Whye Lane  
#04-420  
Singapore 680102

Mobile: +6594767188

### Vehicle & Document Information

WIP No **55497**  
Reg No/Reg Date **SKW6366D / 09/11/2015**  
Date In/Mileage **SKW6366D**  
Chassis No **WDD2050402R113918**  
Engine No **27491030463271**  
Make/Model **MB/MB C 180 SEDAN (W205) "AVANTGARDE / A**  
Colour/Trim **028 890 Cavansit B1/ 041 101 ARTICO Blac**

Account No	Terms	Date/Time Printed	CSE	Operator
CSI00003	Cash	10/03/2022/ 18:23	CH	371 / Go Chee Han

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M MOUNTING PLATE	1.00	16.93	00.00	16.93
M INTEGRAL CARRIER	1.00	2497.57	00.00	2497.57
M RH/FRONT SHOCK ABSORBER STRUT	1.00	756.11	00.00	756.11
M RH/FRONT UPPER CONTROL ARM	1.00	844.91	00.00	844.91
M RH/FRONT STEERING KNUCKLE	1.00	1410.99	00.00	1410.99
M RH/FRONT WHEEL BEARING	1.00	562.47	00.00	562.47
M RH/FRONT STRUT ROD	1.00	634.59	00.00	634.59
M RH/FRONT SPRING LINK	1.00	631.45	00.00	631.45
M NUT W FLANGE, BINDING	1.00	9.80	00.00	9.80
M NUT-A-WASHER ASSEMBLY	2.00	15.68	00.00	31.36
M RH/FRONT DISK WHEEL	1.00	641.32	00.00	641.32
M RH/FRONT FENDER	1.00	955.58	00.00	955.58
M SEAM SEAL	1.00	64.24	00.00	64.24
M RH/HEADLAMP UNIT	1.00	3366.07	00.00	3366.07

THIS IS NOT AN OFFICIAL TAX INVOICE

ESTIMATE

Steve CLKK)  
14/3/22, 11.00am

00- M AL  
Exc rr- ?  
6 dy  
P/P  
Ly RL sy

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

Confirmed & accepted by  
Supplementary item(s) must be resurveyed and  
is subject to final approval from Insurance Company

Acknowledged by Repairer

Authorized signatory and company stamp

Go Chee Han  
DID : 6771 4336 HP : 9181 7717  
Email : cheehan.go@cyclecarriage.com.sg  
Cycle & Carriage Industries Pte Ltd  
Customer Service Centre - Pandan Loop

Nett **26,796.68**  
7% GST on **26796.68** **1875.77**  
Total Payable **28,672.45**

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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	10/03/2022 16:47 (SGT)
Date of Accident	10/03/2022 09:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	NUH MEDICAL CENTRE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW6366D
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHUA BOK HEE
NRIC No	SXXXX824C
Email Address	BERLIN7730@GMAIL.COM
Mobile Phone No	(Phone) +65-94767188
Alternative Phone No	+65-94767188

#### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	C180
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
Transmission	Auto
CC	1595

#### INSURANCE COMPANY

Name of Insurance Company	United Overseas Insurance Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DH0M110164721800
Cover Note Number	-

#### DRIVER

Name of Driver	CHUA BOK HEE
NRIC No	SXXXX824C



Accident report SC1S223A0007



Date Of Birth	02/01/1962
Occupation	Indoor
Date Of Driving Pass	30/06/1984
Driving experience	37 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-94767188
Alt. Phone Number	+65-94767188
Email Address	BERLIN7730@GMAIL.COM
Address	102 TECK WHYE LANE #04-420
Address complement	-
Postcode	680102
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	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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	UNKNOWN
Gender	Male

#### 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	SMX3099R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	YAP MEI SIAN
Contact Number	(Phone) +65-97693339
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

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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

**Go Chee Han**  
DID : 6771 4336 HP : 9181 7717  
Email : cheehan.go@cyclecarrage.com.sg  
Cycle & Carriage Industries Pte Ltd  
Reporting Centre Personnel's  
Name: \_\_\_\_\_  
Pandan Loop



# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At approximately 9:15am, I was <sup>in midway</sup> reversing into the carpark lot 615. The other vehicle then proceed to try and overtake when I have yet to complete my parking. ~~This in turn caused that other driver~~

There was then a loud bang where my vehicle was struck on the right front tire, impacting the body of the car.


The vehicle then shifted before I could take the necessary photo of the incident. I notice that there was a CCTV directly overhanging the said location. C6-16.

## 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

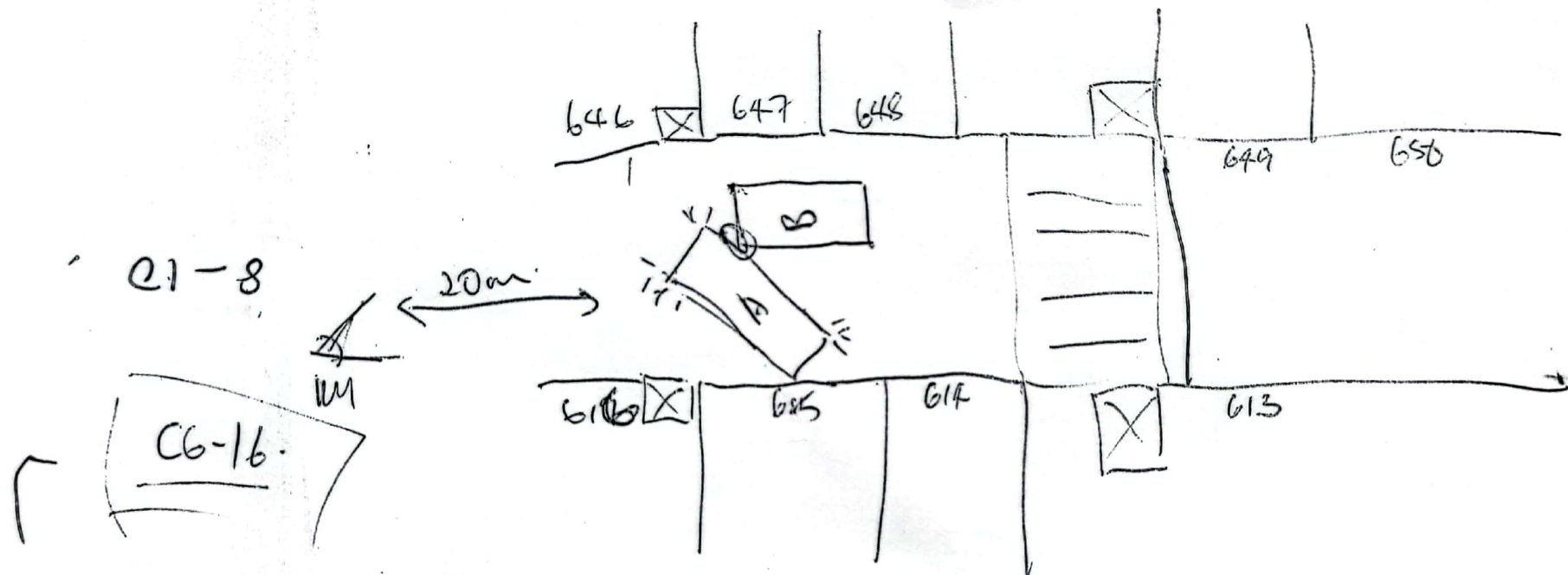
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time

**Go Chee Han**  
DID: 6771 4336 HP: 9181 7717  
Email: cheehan.go@cyclecarriage.com.sg  
Cycle & Carriage Industries Pte Ltd  
Customer Service Centre - Pandan Loop  
\_\_\_\_\_  
Reporting Centre Personnel's  
Name:



A: SKW 6366D

B: SMX 3099R



Whist reversing to park.

- 9.15am

- NVH Medical centre.

OFFICE

67722888

RAMDHANI