

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

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ 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: SMK 1755L Yr Regn: M/S/M
Type: M.Cab / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: KIA Ceres c.c. 1500
Colour: Grey A/C: Insured / Std / Nil / NA
Sp. Reading: 32809 T/Radio: Insured / Std / Nil / NA
Eng/No:
C/No: KNAP1416MK5031074
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: 205/55R16 F:

BS/DUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/
TOYO/YOKO or s.

Front

R/Bal. 4 mm

L/Bal. 4 mm

D.O.A. 11/7/22

Survey held at Cycle

Rear

R/Bal. 4 mm

L/Bal. 4 mm

D.O.I. 29/8/22

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

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

[illegible]

Date/Time, File Pass to?

☐: Prell. Report

: Final Report

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.E.F. (%) _____

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$)

☐ Site Insp (\$

Interview (\$)

1: Tech, Invs (9)

☐ : Weekend ()

Survey Fee:

Transportation:

1. S + P.S. — SI

2) Photos

Others

TOTAL



CYCLE & CARRIAGE

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 |
|-----------------------------|--|
| TAN WEI NI | Cust No/Name /TAN WEI NI |
| BLK 435 YISHUN AVENUE 6 | Reg No/Reg Date SMK1755L / 29/03/201 |
| #05-2106 | Date In/Mileage / 0 |
| SINGAPORE 760435 | Chassis No KNAF1416MK5031074 |
| Contact No Mobile: 96607568 | Engine No G4FGJH722038 |
| | Make/Model KIA/CERATO 1.6 A L S116 |
| | Colour/Trim ABT PLATINUM GRAPHI/ WK SATURN BLACK |

| Account No | Terms | Date/Time Printed | CSE | Operator | WIP No |
|-----------------------------------|---|-------------------|------------|--------------|---------|
| CSM00081 | Cash | 12/07/2022/ 16:51 | BLC | 442 / CocoLu | 54162 |
| Description of Goods / Services | | Qty | Unit Price | Disc% | Amount |
| E PNT88000 | RENEW REAR BUMPER, BOOTLID, REAR END PANEL, REPAIR REAR LAMP HOUSING LH | | | | 3200.00 |
| E PNT88000 | REMOVE & INSTALL PARKING SENSOR | | | | 100.00 |
| E PNT98000 | SPRAY PAINT FOR REAR BUMPER, BOOTLID, REAR END PANEL REAR LAMP HOUSING LH | | | | 2200.00 |
| E PNT88000 | REMOVE & INSTALL REAR COMPARTMENT TRIMS | | | | 300.00 |
| M SUNDRY | C&C LOGO | | | | 50.00 |
| M SUNDRY | APPLY SEALANT FOR ACCIDENT PORTION | | | | 80.00 |
| M SUNDRY | SUPPLY PARKING SENSOR | | | | 220.00 |
| A 54900099 | CHECK WIRING & ELECTRICAL SYSTEM | | | | 50.00 |
| A 10028901 | TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM | | | | 280.00 |
| M SUNDRY | Sundry | | | | 20.00 |
| M COVER-RR BUMPER | | 1.00 | 651.00 | 00.00 | 651.00 |
| M COVER-RR BUMPER LWR | | 1.00 | 241.00 | 00.00 | 241.00 |
| M COVER-RR BUMPER UNDER, LH | | 1.00 | 33.00 | 00.00 | 33.00 |
| M COVER-RR BUMPER FOG LAMP, LH | | 1.00 | 19.00 | 00.00 | 19.00 |
| M LAMP ASSY-SIDE T/SIGNAL, LH | | 1.00 | 201.00 | 00.00 | 201.00 |
| M BRACKET-RR BEAM UPB MTG, LH | | 1.00 | 9.00 | 00.00 | 9.00 |
| M BEAM-RR BUMPER | | 1.00 | 318.00 | 00.00 | 318.00 |
| M STAY-RR BUMPER RH | | 1.00 | 65.00 | 00.00 | 65.00 |
| M STAY-RR BUMPER LH | | 1.00 | 65.00 | 00.00 | 65.00 |
| M BRACKET ASSY-RR BPR SIDE UPB, L | | 1.00 | 25.00 | 00.00 | 25.00 |
| M BRACKET-ASSY RR BPR SIDE UPB, R | | 1.00 | 31.00 | 00.00 | 31.00 |

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.



CYCLE & CARRIAGE KIA PTE LTD
PANDAN GARDENS CUSTOMER SERVICE CENTRE
209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240



ESTIMATE

No : 199405410K

GST Reg No : MR-8500111-X

| Invoice Name & Address | Owner Name & Vehicle Info |
|--|---|
| TAN WEI NI BLK 435 YISHUN AVENUE 6 #05-2106 SINGAPORE 760435 Contact No Mobile: 96607568 | Cust No/Name /TAN WEI NI Reg No/Reg Date SMK1755L / 29/03/201 Date In/Mileage / 0 Chassis No KNAF1416MK5031074 Engine No G4FGJH722038 Make/Model KIA/CERATO 1.6 A L S116 Colour/Trim ABT PLATINUM GRAPHI/ WK SATURN BLACK |

| Account No | Terms | Date/Time Printed | CSE | Operator | WIP No |
|-----------------------------------|-------|-------------------|------------|--------------|---------|
| CSM00081 | Cash | 12/07/2022/ 16:51 | BLC | 442 / CocoLu | 54162 |
| Description of Goods / Services | | Qty | Unit Price | Disc% | Amount |
| M LOGO ASSY-KIA SUB | | 1.00 | 32.00 | 00.00 | 32.00 |
| M EMBLEM-CERATO | | 1.00 | 28.00 | 00.00 | 28.00 |
| M PANEL ASSY-TRUNK LID | | 1.00 | 1491.00 | 00.00 | 1491.00 |
| M PANEL ASSY-BACK | | 1.00 | 324.00 | 00.00 | 324.00 |
| M HINGE ASSY-TRUNK LID, LH | | 1.00 | 97.00 | 00.00 | 97.00 |
| M HINGE ASSY-TRUNK LID, RH | | 1.00 | 97.00 | 00.00 | 97.00 |
| M LATCH ASSY-TRUNK LID | | 1.00 | 112.00 | 00.00 | 112.00 |
| M W/STRIP-TRUNK LID OPNG | | 1.00 | 100.00 | 00.00 | 100.00 |
| M LAMP ASSY-REAR COMB OUTSIDE, LH | | 1.00 | 402.00 | 00.00 | 402.00 |
| M LAMP ASSY-REAR COMB INSIDE, LH | | 1.00 | 346.00 | 00.00 | 346.00 |

Estimate

Steve (LKK) m IL
29/8/22, 11.30 P/P
by PL y
5 dys

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

Confirm & accepted by

Acknowledged by Repairer

7% GST on Net 11,187.00
11187.00 783.09

Total Payable 11,970.09

Authorized signatory and company stamp

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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 13/07/2022 11:16 (SGT)
Reported by Driver
Date of Accident 11/07/2022 20:18 (SGT)
Exact Location of Accident Brickland Rd, Singapore
Additional Location Information BRICKLAND ROAD, JUST AFTER EXIT 5 OF KJE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMK1755L

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN WEI NI
NRIC No SXXXXX825F
Email Address SSAINDDUCK@GMAIL.COM
Mobile Phone No (Phone) +65-96607568
Alternative Phone No -

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? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1591

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number 1900081921-02

DRIVER

Name of Driver EDWIN TAN ZHAO YANG
NRIC No SXXXXX298A
Date Of Birth 23/02/1993
Occupation Indoor



Accident report SC1X227D0004

Driving Pass
Experience
e Number
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

10/08/2011
10 YEARS AND 11 MONTHS
Male
(Phone) +65-92225291
-
WESTMERES@GMAIL.COM
BLK 435 YISHUN AVENUE 6 #05-2106
-
760435
No
Sibling
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? 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) 4
Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance? No
Translator's name -
Translator's ID -
Translator's phone number -
Translator's email -
Original language used in the statement -

PASSENGER 1

Name TAN SHI YING
Gender Female

PASSENGER 2

Name MANDY CHOO SWEET MUN
Gender Female

PASSENGER 3

Name SHAWN KO WAI KIT
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 ATTACHMENT

ATTACHMENT(S)

Are accident photos available for attachment? Yes

Any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|---|----------------------|
| Vehicle Registration Number | SLH2142B |
| Vehicle Manufacturer | Toyota |
| Vehicle Model | ALTIS |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private hire |
| Name of Driver | AMBIAH BIN KASIMAN |
| Contact Number | (Phone) +65-86442691 |
| 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 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 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

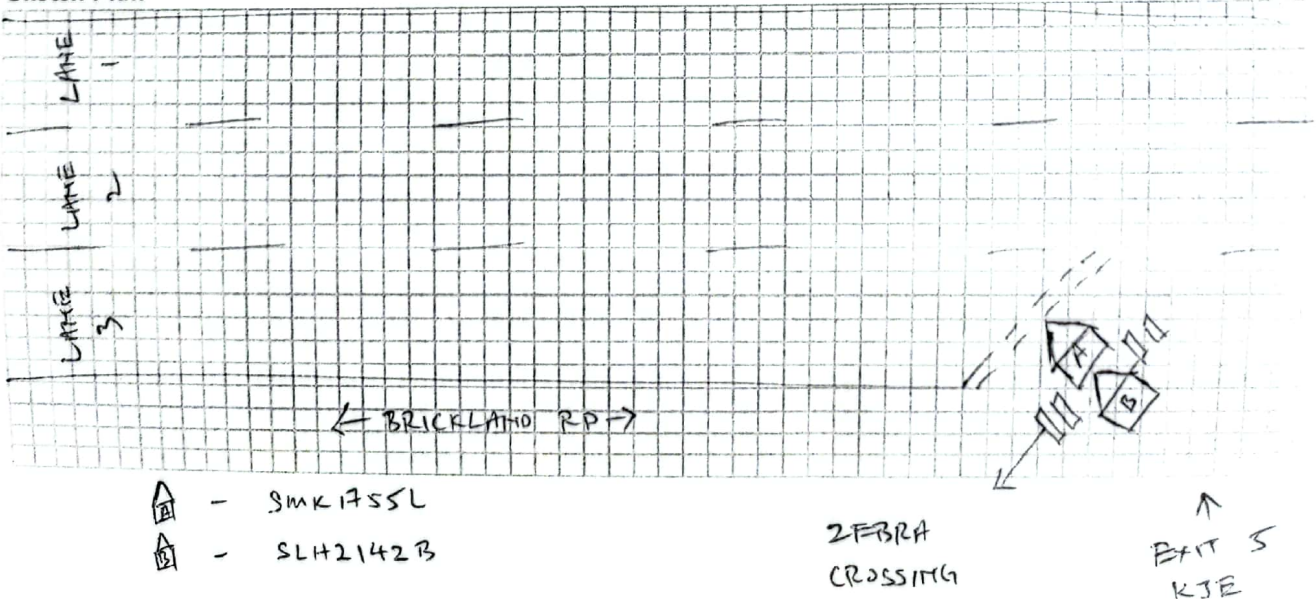
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



3e Circumstances of the Accident

ON 11 JULY 2022 AT APPROXIMATELY 2018 HOURS AT THE EXIT NUMBER 5 OF KJE TOWARDS BRICKLAND ROAD, THE VEHICLE I WAS DRIVING IN, (A) ALONG WITH 3 PASSENGERS (FRIENDS), WAS HIT BY ANOTHER VEHICLE FROM BEHIND, (B).

VEHICLE A - KIA CERATO SMK1755L


VEHICLE B - TOYOTA ALTIS SCH2142B

THE WEATHER WAS COOL AND ROAD CONDITION WAS DRY. AS I EXITED KJE TOWARDS BRICKLAND ROAD, THE TRAFFIC CONDITION WAS IN FAVOUR FOR VEHICLES TRAVELING ON BRICKLAND ROAD. I ADHERED TO THE "GIVE WAY" ROAD MARKINGS UPON SEEING THE APPROACHING VEHICLE AND STOPPED. FEW SECONDS LATER, I WAS HIT BY VEHICLE B FROM BEHIND.


Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

 12 07 2022 1418

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



Witnessed by Reporting Centre Personnel