Our ref: Your ref:	SND6878H	
Date:	2 1 OCT 2022	Direct Settlement
To:	Allignz Insurance	_
	Singapore <u>068897</u>	
Attn:	Motor Claims Department	

Re: Accident Involving Motor Vehicle Nos. SND 6878H & CBJ 35554

At/Along BK217 Serangoun Avr 4 (Grzchon 7/07/22 @ 23:35

I am the owner of vehicle no. SND 6878 H that was involved in an accident with your insured vehicle no. of the above accident.

As the accident was caused by your insured negligent/inconsiderate driving, thus I am claiming from you for the following: -

 Cost of Repairs Loss of Use / Rental (7 days @ \$ 180 per day) LTA/GIA Search Fee GIA Report Fee Others 		\$ 15,348.73 \$ 1,260 \$ 2.00 \$
	Total:	\$ 6,610.73

I hereby give you fourteen (14) days to comply with the above, failing which, I shall instruct my solicitor to commence legal action against you. If you have any queries, please contact the representative of CYCLE & CARRIAGE INDUSTRIES PTE LTD at Telephone No: 67714377 (Mr Alan Quek) / 67714304 (Ms Amanda Ang).

I hereby give full authority to CYCLE & CARRIAGE INDUSTRIES PTE LTD and their representative to negotiate/comprise settlement of the above claim on my behalf.

Your co-operation and immediate attention to the above is greatly appreciated. I hereby look forward to hearing from you soon.

Yours faithfully

Name & Signature

Address: C/o. 188 Pandan Loop Singapore 128378

Cc: Mr Alan Quek/ Ms Amanda Ang

E-mail: <u>alan.quek@cyclecarriage.com.sg</u> / <u>amanda.ang@cyclecarriage.com.sg</u>

Fax No. 67795383



TAX INVOICE

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

IAV IIAA	JICE					Company No. GST Reg No. 1	196400367 MR-850011	7W
	In	voice Name & Address			Owner	r Name & Vehicle		1-7
	79 Robinso Singapore	nsurance Singapore Pte on Road #09-01 068897		Cust No/Name Reg No/Reg Date Date In/Mileage Chassis No Engine No Make/Model Colour/Trim	WCV48681/ SND6878H 26/07/2023 W1K2130802 2649203049 MB/E 200 S	Allianz Insur / 31/05/2 2/ 3122 2B0544049 93335	cance Si	
Account No	Terms	Date/Time Printed	CSE	Operator		WIP No	Involes	/O 17 N
CTP00001	Cash	26/08/2022/ 18:39	AQ	305 / Alan Quek	Ai Lun	58330	281821	/Credit Note No
M BPNSUN		Description of Good	s / Services		Qty	Unit Price S\$		Amount S
DATE IN/ BY/AUTHR A BPILAB USE XENT	DATE SURVERIZED ON	E:7220059238 // 17-07 22 // TP CAR NO:GBJ355 Y:26-07-2022 // LKK S :LKK CECILIA CHONG /	5U (ALLIANZ TEVE / 26-07-2022	2			0.10	380.0
A BPILAB CHECK HEA	SETTINGS.	NETT H FOCUS ADJUSTMENT.NE		•				120.00
A DETEND								
the second secon	RONT SUPPO	RONT BUMPER, FRONT BOI RT ASSY COMPONENTS & F	NNET, FRONT	LEFT FENDER &				1920.0
Y DLIKE?	RONT BUMPE	ER, FRONT BONNET & FRO		DER				2400.00
X LH/F HEAD X LH/F FEND X FRT BUMPE X BONNET X COMBINATI X FUSE LINK	DLAMP CONTR DER CR ON NUT	ROL UNIT			1.00 1.00 1.00 1.00 4.00 2.00	3619.80 701.13 1073.57 1637.77 2465.78 4.05 5.18		3619.80 701.13 1073.57 1637.77 2465.78 16.20 10.36
—————————Parts	6	Guarantee Your Warrant	y, Maintain	with Cycle & Carr	iage!			
abour Standard Men	u	9,524.61 4,820.00 0.00			7% GST on	Nett 14344.61		14,344.61 1004.12
Specialist Journal of Special Special (Special Special	Job s	0.00 0.00 0.00			Tot	al Payable Paid Total Due		15,348.73 0.00

Payment should be made strictly by NETS, credit cards or PayNow (via QR code or UEN) only. Thank you.

Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.

14,344.61

Total Due

Total (w/o GST)

15,348.73

FLEXI-DRIVE ENTERPRISE

SND 6878 H

Blk 8 Kaki Bukit Avenue 4 Premier@kaki bukit gate 2 #06-33 lobby C Singapore 415875 Tel: (65) 6292 5455 Fax: (65) 6292 2866 e-mail: sales@wellscope.com.sg

H/Phone: 9667 5455 (24 Hrs)

Alapl

INVOICE

RA: 09905

V. A. No. Vehicle Regn. No. Model Type Renting Location 5MK 2409 4704 Reference Agreed Return Date 5 Hours = 1 Day Rental (1 Day Rental ÷ 5 = 1 Hour Extension) KM per Week \$ per KM Time Date \$ per Month Out per Kilometre KM Total / Time Chargeable Rental Charges Dollars -157 SAnayuan Are 4 Total Days Rental Tel. No. Driver's Name Address Petrol Petrol Driving Licence No. Outstanding Petrol will charge in every 1/4, 1/2, 3/4, F Expiry Issued by @\$ per 1/4 Sub-Total Additional Driver Tel. No. (Home) Others Address Passport / IC No. / Country **Grand Total** 260-Driving Licence No. Expiry Prepayment Received \$ Issued by By: (Name in Block Letters) Method of Payment CASH CHEQUE Amount Due / Refundable RATES QUOTED ARE FOR USE IN SINGAPORE ONLY. - THE HIRER IS SOLELY RESPONSIBLE FOR BREACH OF Refund TRAFFIC LAWS AND ANY PARKING FINES OR SURCHARGES Received \$ by receiver X **DURING PERIOD OF HIRE.** Out by In by Hirer's signature signifies acceptance of agreement FRONT FRONT 0 0 Hirer's Signature / Company Stapp Remarks REAR REAR MPV

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

GBJ3555U

Date of Accident

17/07/2022

Reset

% RESULT & RECEIPT

TP Insurer Enquiry
Insurance
Period of Insurance
Requested By
Requested Date18/07/2022 16:15

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): \$\$2

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding of material facts may allow insurance companies to repudiate
- 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.
- 4. The issue and acceptance of this Form by insurance companies is not all admission of policy hability of 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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

18/07/2022 17:11 (SGT) Both 17/07/2022 23:35 (SGT) Singapore BLK 217 SERANGOON AVE 4 CAR PARK Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SND6878H

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address**

NG SIEW SUM SXXXX859J JOENGSS11@YAHOO.COM.SG (Phone) +65-94552628

VEHICLE PARTICULARS

Alternative Phone No.

Mobile Phone No

Manufacturer Model

Transmission

CC

Mercedes E200

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? Vehicle Category

No - Claiming third party Private car

Auto 1991

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd. 7220059238

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

NG SIEW SUM SXXXX859J 20/01/1980 Indoor

Date Of Driving Pass 01/07/1999 Driving experience 23 YEARS Gender Male Mobile Number (Phone) +65-94552628 Alt. Phone Number Email Address JOENGSS11@YAHOO.COM.SG Address BLK 217 SERANGOON AVE 4 # 03-152 Address complement Postcode 550217 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 on collision 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) 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 **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 ATTACHED ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

GBJ3555U

Commercial vehicle

Commercial vehicle

MR YANG

(Phone) +65-91477817

Address complement	-
Address complement Postcode	-
Insurance Company Name	-
reduce Of Daniage	-
bottans of property damaged in accident	1 -
No. Of Passenger (Including Driver)	-
	~

WITNESS DETAILS

WITNESS 1

Name Phone MR LINCOLM

Email (Phone) +65-96653654

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

Lunderstand, 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' 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;

(1)

- (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 (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre

Sketch Plan

A) SND6878H

(B)68735554

135 pm. I was going to tollef and hana, and peep out of the window and Company a reverse on the no parting side o and and diagonally aurus, there is a guy went over and talk to him, him statement to me wan was sitting inside. He heard a loud being and neticed on his night omy was in the reverse position and he drove pass him to hin if was the same long that When he was parking. He for recognised the "Atlas" logo but managed to head walked car and neticed my left walk back to return this car cam but unfortunately not · my mun spoke to my leve I neighour, and the neighbour of level 12. Tuhum know as Mr Yang is his son/somebody who drawl the carwhen doing the reversing.

Declaration

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

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel Alan (Lugh



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder

: NG SIEW SUM

Period of Insurance

: 31 May 2022 To 30 May 2023

Engine No.

: 26492030493335

Chassis No.

: W1K2130802B054404

Vehicle No.

: SND6878H

Policy No.

Issued Date

: 7220059238

Endorsement No.

: 24 May 2022 15:56

ABOUT THE COVER

Make/Model

: MERCEDES Benz E200 Sedan Hybrid

Engine Capacity/Tonnage : 1,991.00 CC

Sum Insured : Market Value

First Year of Registration : 2022

Driver Restriction

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

a) I ne 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 S\$\$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less

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 2000cc

* 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 - \$800 Theft - \$0 Flood Cover - \$800

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

NG SIEW SUM - \$800 (Own Damage), \$800 (Flood Cover)

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

1. Cycle & Carriage Eunos Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818 2.Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

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: DBS BANK LTD

I/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).

0504688229

CYCLE & CARRIAGE - JACQHO

239 ALEXANDRA ROAD

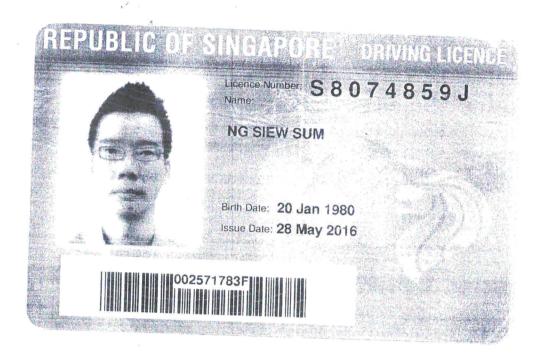
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

AIGSGMOBILEAPP



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3

Motor cars with unladen weight =< 3000kg with =< 7 01 Jul 1999 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

Licence No:S8074859J

NP 428A