

CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED

Ubi Customer Service Centre

330 Ubi Road 3, Singapore 408650 Tel: (65) 64739722

MITSUBISHI
MOTORS

Co Reg No : 197701469G

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info	
CHUA ENG CHUAN	Cust No/Name	/CHUA ENG CHUAN
BLK 403D FERVALE LANE	Reg No/Reg Date	SMK4212S / 09/04/201
#05-151	Date In/Mileage	25/11/2022/ 81096
SINGAPORE 794403	Chassis No	GF7W0600457
Contact No Mobile: 97682720	Engine No	4J11AC0429
	Make/Model	MIT/19MY OUTLANDER 2.0 MODERN(995)
	Colour/Trim	U02 STERLING SILVER/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CTP00040	Cash	25/11/2022/ 17:08	REN	979 / Renemer Ramirez Bag	12925
Description of Goods / Services					
	Qty	Unit Price	Disc%	Amount	
Z TEXT ACCIDENT ON 25/11/2022 ALONG SUNTEC CITY ROUNDABOUT OWNER CLAIMING THIRD PARTY REQUIRED REPLACEMENT VEHICLE TP#: SMU1807T TP INS: ALLIANZ					
A 10028901 TO CARRY OUT DIAGNOSTIC CHECK BY MUT AND CLEAR TROUBLE CODE					280.00
A 54900099 TO CHECK WIRING AND ELECTRICAL SYSTEM					80.00
E PNT88000 TO REPLACE RH HEADLAMP,FRONT BUMPER,CLIPS,BRACKETS,RH CHROME GARNISH, RH FOG LAMP & COVER,EXTENSION BPR,REINFORCEMENT,RH BPR & ARCH MLDG,ETC STRAIGHTEN,REFORM,ALIGN ON REAR ACCIDENT AFFECTED AREAS					1280.00
E PNT98000 SPRAY PAINTING ON RHF ACCIDENT AFFECTED AREAS (FRONT BUMPER,RHF FENDER)					1650.00
B WHEELALIGNMENT120L To Conduct Computerize Full Wheel Alignment					180.00
M SUNDRY TO APPLY ANTI-CORROSION ON AFFECTED AREAS					100.00
M SUNDRY SUNDRIES					50.00
M RH,HEADLAMP ASSY	1.00	1967.00	00.00		1967.00
M FACE,FR BUMPER	1.00	1023.00	00.00		1023.00
M CLIP,ENG ROOM COVER	25.00	2.00	00.00		50.00
M CLIP,BUMPER	5.00	3.00	00.00		15.00
M LH SIDE BRACKET,FR BUMPER	1.00	18.00	00.00		18.00
M RH SIDE BRACKET,FR BUMPER	1.00	18.00	00.00		18.00
M RH SIDE GARNISH,FR BUMPER	1.00	49.00	00.00		49.00
M RH UPR GARNISH,FR BUMPER	1.00	222.00	00.00		222.00
M RH LWR GARNISH,FR BUMPER	1.00	113.00	00.00		113.00
M RH FOG GARNISH,FR BUMPER	1.00	48.00	00.00		48.00
M RH LAMP ASSY,FOG,FR	1.00	352.00	00.00		352.00

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.



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CTP00040	Cash	25/11/2022/ 17:08	REN	979 / Renemer Ramirez Bag	12925
Description of Goods / Services					
	Qty	Unit Price	Disc%	Amount	
M EXTENSION,FR BUMPER	1.00	515.00	00.00	515.00	
M REINFORCEMENT,FR BUMPER	1.00	498.00	00.00	498.00	
M BAR,FR BUMPER GUARD	1.00	131.00	00.00	131.00	
M RH MOULDING,FR BUMPER	1.00	102.00	00.00	102.00	
M RH MOULDING,FR WHEEL ARCH	1.00	162.00	00.00	162.00	
M RH SHIELD,FR WHEELHOUSE	1.00	166.00	00.00	166.00	
M CLIP,RR BUMPER	10.00	3.00	00.00	30.00	
M TANK,WINDSHIELD WASHER	1.00	88.00	00.00	88.00	
M SENSOR,W/SHLD WASHER TANK	1.00	115.00	00.00	115.00	

Estimate

Confirm & accepted by

	Nett	9,302.00
7% GST on	9302.00	651.14
	Total Payable	9,953.14

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 Actual 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	26/11/2022 08:46 (SGT)
Reported by	Both
Date of Accident	25/11/2022 12:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SUNTEC CITY ROUND ABOUT BETWEEN TOWER 2 & 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK4212S
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHUA ENG CHUAN (CAI RONGQUAN)
NRIC No	SXXXX140E
Email Address	SABRINALEE790@GMAIL.COM
Mobile Phone No	(Phone) +65-97682720
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1900085394-02

DRIVER

Name of Driver	CHUA ENG CHUAN (CAI RONGQUAN)
NRIC No	SXXXX140E
Date Of Birth	01/01/1976
Occupation	Indoor

Date Of Driving Pass	19/09/2000
Driving experience	22 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97682720
Alt. Phone Number	-
Email Address	SABRINALEE790@GMAIL.COM
Address	BLK 403D FERNVALE LANE
Address complement	#05-151 SINGAPORE
Postcode	794403
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 - Change/cross lane
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)	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	CARYN CHUA
Gender	Female

PASSENGER 2

Name	CAYLEE CHUA
Gender	Female

PASSENGER 3

Name	SOPHIE CHUA
Gender	Female

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 ATTACHMENTS.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMU1807T
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Orange
Vehicle Category	Private car
Name of Driver	YANG ING HONG JOSEPH
NRIC No	SXXXX079E
Contact Number	-
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 Actual 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

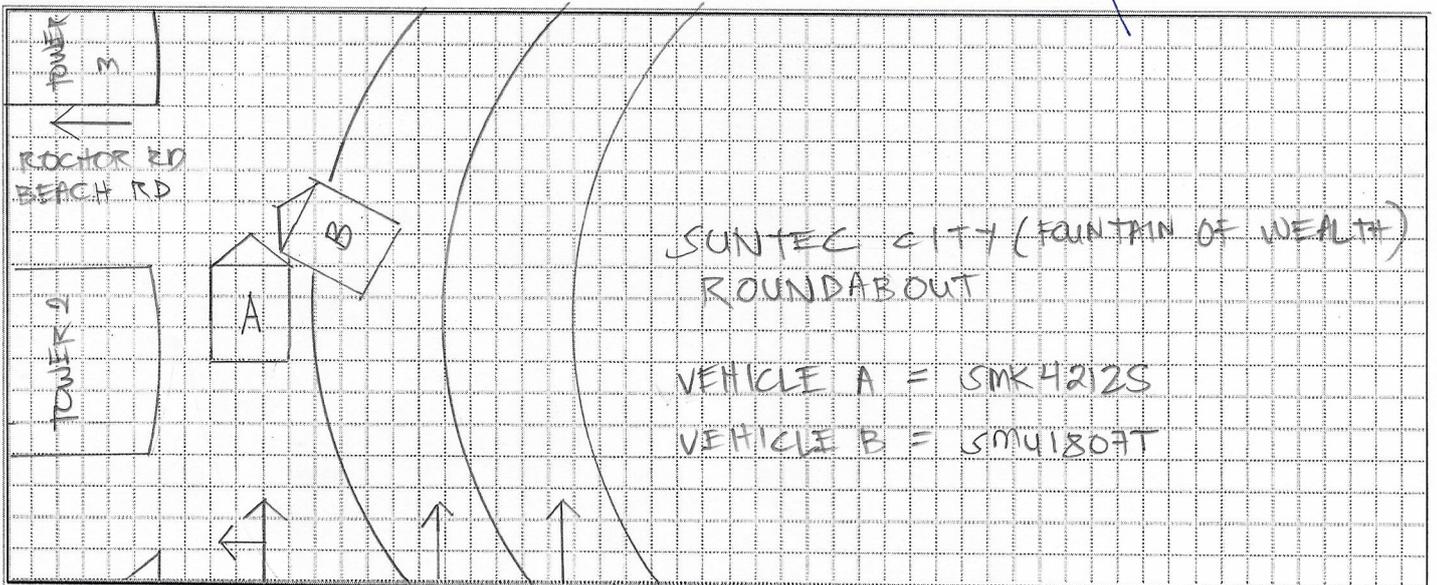
Chia 25/11/22 1455hws

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



Describe Circumstances of the Accident

On 25 Nov 2022, at about 12:50 pm, I was travelling at the roundabout of Suntec City (Fountain of Wealth) when an Orange Nissan vehicle ~~that~~ that was travelling on the second lane abruptly made a left turn and hit onto the front driver side bumper. The Orange Nissan was attempted to make a left turn into the road leading to Rocher Road and Beach Road.

At the point of the accident, I was travelling with 3 children of age 3, 8 and 12. They were all seated at the back seat of my vehicle (Mitsubishi Outlander).

Following the accident, the driver, Mr Yang Ing Hong Joseph and I drove to the side of the road between Suntec City Tower 2 and 3 to access the damages. We took pictures of the damages on our vehicle and took pictures of our Identity Cards for following up reporting.

Declaration

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

 25/11/22 1455hrs

Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Chua Eng Chuan
Period of Insurance : 09 Apr 2022 To 08 Apr 2023
Engine No. : 4J11AC0429
Chassis No. : GF7W0600457

Vehicle No. : SMK4212S
Policy No. : 1900085394-02
Endorsement No. :
Issued Date : 24 Feb 2022

ABOUT THE COVER

Make/Model : MITSUBISHI Outlander 2.0 Elegance/Sports
Engine Capacity/Tonnage : 1,998.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2019
Insuring with COE/PARF : Yes

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 S\$3,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 years old and above
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 Eng Chuan - \$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 65684501
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: 20 Leng Kee Rd Singapore 159094 64708688
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: United Overseas Bank Limited

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).

0504623201

FULCOMICP2 - CO

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPDSO

INSURER ENQUIRY

Find**insurer**

Vehicle reg. no.

SMU1807T

Date of Accident

25/11/2022 

Reset

% **RESULT & RECEIPT**

TP Insurer Enquiry

Insurance **Allianz Insurance Singapore P...**Period of Insurance **30/07/2022 - 29/07/2023**Requested By **Renemer Bagang (CYCLE & CA...**Requested Date **25/11/2022 15:25****Payment details**Request Amount: **S\$1.87**GST Amount: **S\$0.13**Total Amount Due (GST Inclusive): **S\$2****General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**