

ESTIMATE FOR SNJ571A

ALLIANZ INSURANCE SINGAPORE PTE.

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

Vehicle & Document Information

WIP No

62238

SNJ571A

1

ITD.

Reg No/Reg Date

/ 20/12/2022

MOTOR CLAIM DEPARTMENT 79 ROBINSON ROAD

Date In/Mileage

#09-01

Chassis No

W1K1183842N2984222

SINGAPORE 068897

Engine No

28291480795056

67143369

MB/CLA 180 COUPE Make/Model

021 149 Polar White/ 041 111 ARTICO Leat

Colour/Trim Date/Time Printed CSE Operator Account No Terms 395 / Yik Chan Hoe YK WA000001 Credit 06/01/2023/ 18:35 Description of Goods / Services Qty Unit Price Disc% Amount Z REQUEST Customer Request M BPNSUN // 02/01/2023 POLICY NO/ACC DATE: SP2003904937 : 06/01/2023 // TBA DRIVE IN/EXCESS DATE IN/DATE SURVEY: BY/AUTHRIZED ON 2400.00 A BPILAB PANEL BEATING TO REPAIR AFFECTED AREAS, REMOVE AND REPLACE WITH NEW BODY PANELS WITH REFINISH 3000.00 A BPIRES RESPRAY LEFT FRONT DOOR, LEFT REAR DOOR AND LEFT REAR FENDER 380.00 0.10 A BPILAB USING XENTRY SYSTEM TO CHECK CONTROL UNITS, RESET STANDARD SETTINGS. NETT 960.00 A BPILAB COMPONENTS OVER TO NEW DOOR. NETT TRANSFER MECHANICAL & ELECTRICAL 180.00 A BPILAB APPLY CAVITY WAX ON THE INNER PART OF NEW DOOR 1791.79 1791.79 00.00 1.00 LEFT FRONT DOOR М 313.32 313.32 00.00 1.00 LEFT FRONT DOOR W/STRIP 21.80 00.00 21.80 1.00 LEFT FRONT DOOR INSUALTION М 3.11 1.00 3.11 00.00 М PLUG 2202.15 00.00 2202.15 1.00 LEFT REAR DOOR 313.32 1.00 313.32 00.00 LEFT REAR DOOR W/STRIP М 30.88 1.00 30.88 00.00 М LEFTREAR DOOR INSULATION 116.04 00.00 116.04 1.00 UNDERBODY PROTECTION WAX Cycle & Carriage Industries Pte Ltd Body Care & Repair Center
Body Care & Repair Center
BiD: 6771 4353 HP: 9186 5109 Fax: 6872 1272 Email: chanhoe.yik@cyclecarriage.com.sg Confirmed & accepted by 11,712.41 Nett 936.99 8% GST on 11712.41 12,649.40 **Total Payable**

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



SJ0G2314000D-01 / JP Knights Pte Ltd ENTRY DATE & TIME: 04/01/2023 11:56 (SGT) SUBMITTED BY: Siti VERSION: 2 (06/01/2023 14:52 (SGT))



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 Actual 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

04/01/2023 11:56 (SGT) Date of Submission Reported by Driver Date of Accident 02/01/2023 17:10 (SGT) 253 Serangoon Central Dr, Singapore 550253 **Exact Location of Accident** Additional Location Information **MSCP** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE SNJ571A Vehicle Registration Number INSURED/POLICYHOLDER Is company? Yes Mercedes-Benz Fleet Management Singapore Pte Ltd Name Of Registered Owner 1XXXXX778Z Company Reg No too tong.tan@mercedes-benz.com **Email Address** (Phone) +65-96222310 Mobile Phone No Alternative Phone No (Office) +65-82821711 VEHICLE PARTICULARS Mercedes Manufacturer Cla180 Model Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to Yes your vehicle? Private car Vehicle Category Transmission Auto CC 1332 INSURANCE COMPANY Allianz Insurance Singapore Pte. Ltd. Name of Insurance Company

SP2003907937 Policy Number / Cover Note Number

DRIVER

LAU KOK SIONG(LUO GUOXIONG) Name of Driver SXXXX330D NRIC No 16/06/1973 Date Of Birth Indoor Occupation

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?	14/04/2004 18 YEARS AND 9 MONTHS Male (Phone) +65-96222310 - too_tong.tan@mercedes-benz.com BLK 410 FERNVALE ROAD #05-120 791410 No Hirer 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
	2.,
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
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

ON 02/01/2022 AT ABOUT 17:10HRS, I WAS DRIVING VEHICLE A (SNJ571A) AT 253 SERANGOON CENTRAL DRIVE MSCP YO PARK MY VEHICLE. I STOPPED MY VEHICLE MAKING A 3 POINTER TURN INTO THE LOT. AS I REVERSE MY VEHICLE, VEHICLE B (SKX7107Z) WHICH WAS FROM UPSLOPE MAKING A LEFT TURN AND COLLIDED ONTO MY VEHICLE AT LEFT SIDE PORTION. THERE WAS SCRATCHES ON MY VEHICLE. VEHICLE B DRIVER CLAIM THAT I ASSUMING THAT I WILL PARK AT ANOTHER WHICH WERE FULLY OCCUPIED WITH VEHICLES. NOBODY WAS INJURED.

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 NumberSKX7107ZVehicle ManufacturerHondaVehicle Model-Vehicle Variant-Vehicle ColourWhite

Vehicle Category	Private car
Name of Driver	LING SIN WEE, GERALD
NRIC No	SXXXX929D
Contact Number	(Phone) +65-93852685
Address ,	-
Address complement	-
Postcode ,	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please correctly report the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorized Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any willful 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 flability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Tunderstand, 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 thit "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 sted gutside of Siggapore, for one or more of the above Purposes.

FLASH ACCIDENT

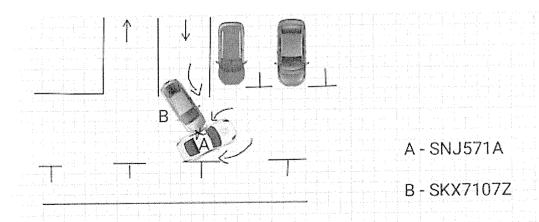
FRO KHAMARAJ

Policyholder's Signature / Date & Time

Sketch Plan

Driver's Signature (if driver) not the policyholder) / Date & Time 02/01/2023. - 20:00HRS

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

ON 02/01/2022 AT ABOUT 17:10HRS. I WAS DRIVING VEHICLE A (SNJ571A) AT 253 SERANGOON CENTRAL DRIVE MSCP YO PARK MY VEHICLE. I STOPPED MY VEHICLE MAKING A 3 POINTER TURN INTO THE LOT. AS I REVERSE MY VEHICLE, VEHICLE 8 (SKX7107Z) WHICH WAS FROM UPSLOPE MAKING A LEFT TURN AND COLLIDED ONTO MY VEHICLE AT LEFT SIDE PORTION. THERE WAS SCRATCHES ON MY VEHICLE. VEHICLE 8 DRIVER CLAIM THAT I ASSUMING THAT I WILL PARK AT ANOTHER WHICH WERE FULLY OCCUPIED WITH VEHICLES. NOBODY WAS INJURED. Declaration

I/We declare the foregoing particulars are true in eyery restage

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time 02/01/2023. - 20:00HRS

FLASH ACCIDENT REPORTING OFFICER FRO KHAMARAJ

Witnessed by Reporting Centre Personnel