

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED

Ubi Customer Service Centre



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

Co Reg No : 197701469G

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address		Owner Name & Vehicle Info
CHUA CHIANG YONG	Cust No/Name	KCV19079/CHUA CHIANG YONG
	Reg No/Reg Date	SMZ4974Y*#F / 29/04/202
BLK 892A TAMPINES AVENUE 8 #07-24	Date In/Mileage	
SINGAPORE 521892	Chassis No	GF7W0701133
	Engine No	4J11DA7851
Contact No Mobile: 88939269	Make/Model	MIT/20MY OUTLANDER 2.0 CVT MODERN (
	Colour/Trim	UO2 STERLING SILVER/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator		WIP No	
CTP00040	Cash	20/02/2023/ 13:55	REN	979 / Renemer	Ramirez Bag	14726	
		Description of Good	ls / Service	es	Qty	Unit Price Disc%	Amount
REQUIRED	AIMING 11 REPLACE	2/2023 ALONG TAMPINE HIRD PARTY MENT VEHICLE			CARPARK		
TP#: GBK A 10028901 TO CARRY		TP INS: MS GNOSTIC CHECK ON MUT					280.00
A 54900099		AND ELECTRICAL SYSTE		K TROUBLE CODE			80.00
E PNT88000		ATE GLASS & MOULDING		processing and the second seco	georg		320.00
E PNT88000 TO INSTA		OOL SOLAR FILM ON NE		E GLASS 10 5	3116		220.00
TO TRANS		GATE COMPONENTS & ME		and have been been been been been been been be			640.00
REPAIR O	E & RE-IN N REAR AC	STALL FLOOR BOARDS, CCIDENT AFFECTED ARE	TRIMS & CA	ARPETS TO FACILIT <i>E</i>	ATE		640.00
FX1FN210	CE EMBLEM N,CLIPS,E IR REAR E	1,LOGO,TAILGATE PNL, BRACKETS,REFLECTOR L	LATCH,W/S ^T AMP,ANTENI	TRIP,GARNISH,REAR NA,BUZZER,ETC	BUMPER,		2560.00
STRAIGHT E PNT98000 SPRAY PA	EN,REFORM	1,ALIGN ON REAR ACCI	CTED AREAS				2200.00
E PNT88000		AR BUMPER,REAR EDN PA REVERSE SENSOR	ANEL)				100.00
E PNT88000 TO SUPPL		REVERSE SENSOR					220.00
	Y REAR LI	CENSE PLATE WITH FRA	AME				50.00
M SUNDRY							100.00

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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		Description	of Goods	/ Services		Qty	Unit Price	Disc%	Amount
TO APPLY	GLASS SE	EALANT ON NEW	TAILGATE	GLASS					
M SUNDRY	DODY CEA	LI ANT ON MEN							200.00
M SUNDRY	RODA 2F	ALANT ON NEW	PANELS						
	ANTI COL	DOCTON ON AL	FEOTED AS						200.00
M SUNDRY	ANTI-CUP	RROSION ON AF	FECTED AF	EAS					
TO SUPPLY	/ MIVEC E	MRIEM							50.00
M SUNDRY	I IIIVEO E	TIDEEN							
TO SUPPLY	C&C BAD)GF							50.00
M SUNDRY									F0.00
SUNDRIES			Section of the sectio	Promise Promise		2000000age			50.00
M GLASS, TAI	[LGATE WI	NDOW		nd br		1.00	695.00	00 00	695.00
M DAM, TAILG						1.00	A CONTRACTOR OF THE PROPERTY O	00.00	13.00
M DAM, TAILG			7	2) [4]		2.00		00.00	66.00
M DAM, TAILG			1000	Marie Administration of the Control	s seems sound should below	1.00		00.00	25.00
M FASTENER,						4.00		00.00	32.00
M STOPPER, W		D GLASS				2.00		00.00	8.00
M MARK, OUTL						1.00	118.00	00.00	118.00
M MARK, THRE M GARNISH T						1.00	63.00		63.00
		TE				1.00	502.00		502.00
M PANEL ASS M LATCH, TAI		IL				1.00	1025.00		1025.00
M W/STRIP,T		ODENTNO				1.00	229.00		229.00
M FACE, RR B		OFLINING				1.00	220.00		220.00
M EXTENSION		FR				1.00	857.00		857.00
M CLIP, ENG						1.00 5.00	292.00		292.00
M CLIP, RR B						15.00		00.00	10.00
M CLIP, FR B	SUMPER					5.00		00.00	90.00 20.00
M LH SIDE B	RKT,R/BM	PR FACE				1.00	20.00	The second secon	20.00
M RH SIDE B	RKT, R/BM	PR FACE				1.00	20.00		20.00
M LH REFLEC						1.00	103.00		103.00
M RH REFLEC						1.00	103.00		103.00
M ANT, KEYLE	SS OPERA	TION, RR				1.00	99.00		99.00

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CTP00040	Cash	20/02/2023/ 13:55	REN	979 / Renemer Ramirez Ba			
M DU7750 W		Description of Goods	s / Services			Disc%	Amount
M BUZZER,KI	EYLESS OF	PERATIO,RR		1.00	94.00	00.00	94.00



Confirm & accepted by

Nett 12,664.00 8% GST on 12664.00 1013.12

Total Payable

13,677.12

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 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.

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

20/02/2023 12:05 (SGT) Both Policyholder and Actual Driver 19/02/2023 08:50 (SGT) Tampines Ave 8, Singapore Lot #350 Open Space Carpark Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMZ4974Y

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

Email Address Mobile Phone No. Alternative Phone No

No CHUA CHIANG YONG SXXXX667E quinsy.mf@hotmail.com (Phone) +65-88939269

VEHICLE PARTICULARS

Manufacturer

Model

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

Transmission

CC

Mitsubishi Outlander

Private use

No - Claiming third party Private car

Auto

1998

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd. 7210040787

DRIVER

Name of Driver NRIC No

Date Of Birth Occupation

CHUA CHIANG YONG SXXXX667E 08/10/1963 Indoor



Date Of Driving Pass 19/04/1984 Driving experience 38 YEARS AND 10 MONTHS Gender Male Mobile Number (Phone) +65-88939269 Alt. Phone Number **Email Address** quinsy.mf@hotmail.com Address BLK 892A TAMPINES AVENUE 8 #07-24 SINGAPORE Address complement Postcode 521892 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 Hit and run / Vandalism / Damaged whilst parked 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) 0 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? Police Station Name Tampines Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005871999 Alt. Police Station Phone No (Fax) +65-65871699 Police Station Address 6 Tampines Ave 4 Singapore 529682 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT # T/20230219/2017 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number GBK6289M Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour	Blue
Vehicle Category	Commercial vehicle
Name of Driver	Commercial venicle
Contact Number	•
Address	
Address complement	_
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	

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 <u>truthful</u> and <u>accurate as possible</u>. 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.

20/02/23 (0:30 am

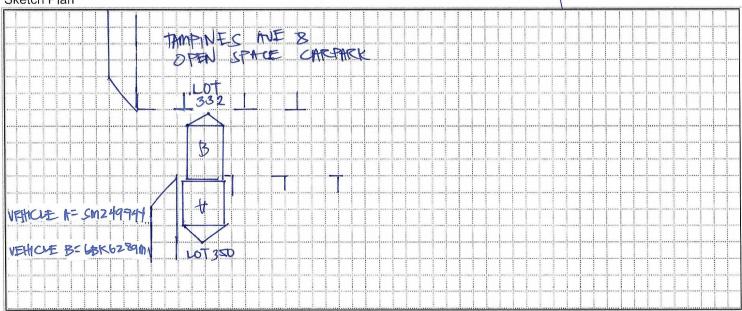
Policyholder's Signature / Date & Time

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

& Time

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





Describe Circumstance of the Accident	
- PEFER to POLICE REPORT # 1/2023 0219/2019 -	

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 (Name as in NRIC/ID card)





Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

1 of 3 Report No. T/20230219/2017

REPORT OF A TRAFFIC ACCIDENT

Date/Time 19/02/202	Report M 3 09:16	lade:	Vide Report No.:	Station Diary No.:
Informant	's Particu	ılars		
Name of Ir CHUA CH	IANG YO	NG	Address: APT BLK 892A TAMPINES A 521892	VENUE 8 #07-24 SINGAPORE
ID Type / I NRIC NO / Nationality SINGAPO	/ S158666 :		Contact No.: Home/Office: Email:	Mobile: 88939269
Sex: Male	Age: 59	Date of Birth: 08/10/1963	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation Other com sales exec	mercial ar	nd marketing	Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 19/02/2023 08:50	Type of Location Car Park
Location:			19/02/2023 06:30	
TAMPINES AV		D 10 1		
		Road Surface:		Road Speed Limit:
Clear		Dry		Road Speed Limit:
Clear Traffic Flow: Dual Carriage Type of Collision				Road Speed Limit: Traffic Volume: Light

Tuno	N. # . (21.2	T		Y
туре	Iviake	Model	Color	Condition	No of Passenge
Car	MITSURISHI	OUTLANDE	0.1		110 of Fasserige
ou.	WITSOBISTII	OUTLANDE	Silver	Slightly	0
		R 2.0 CVT		Damaged	
	Type Car	- 71" - ITALIC	Car MITSUBISHI OUTLANDE	Car MITSUBISHI OUTLANDE Silver	Car MITSUBISHI OUTLANDE Silver Slightly

	ehicle Insurance		Cossina de processos	
	Insurance Company	Insurance No	Effective	Expiry Date
SMZ4974Y	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7210040787	29/04/2021	28/04/2023





Police Station Of Origin: Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Report No. T/20230219/2017

Brief Details.

On 19/2/23, I went down to the carpark to retrieve my car as I was about to go to Malaysia with my family.

I parked my car at lot 350 and I realize there was a dent at the back boot area of my car. I have in-car camera but not sure whether can capture the incident or not. I do not have suspect in mind.





T/20230219/2017

3 of 3

Report No. T/20230219/2017

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999
CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature of Officer Recording The Report: G / SGT 2 BRYAN CHENG CHUN HENG	Signature Of Informant:	(eK
Signature Of Interpreter: Not applicable	Date/Time: 19/02/2023 09:16	
Officer In Charge Of Case: TP / HRT / SR STAFF SGT IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:	
NP168		



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Chua Chiang Yong

Period of Insurance

: 29 Apr 2021 To 28 Apr 2023

Engine No.

: 4J11DA7851

Chassis No.

: GF7W0701133

Vehicle No.

: SMZ4974Y

Policy No. Endorsement No.

: 7210040787

Issued Date

: 08 May 2021

ABOUT THE COVER

Make/Model

: MITSUBISHI Outlander 2.0 Elegance/Sports

Engine Capacity/Tonnage : 1,998.00 CC

Sum Insured : Market Value

First Year of Registration : 2021

Driver Restriction

: NA

Insuring with COE/PARF : Yes

Off Peak Car : No

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

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 \$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 than 2 years' driving experience.

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. 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

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Chua Chiang Yong - \$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

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 509339 00004001
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

al/LHC 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).

0504676209

FULCO - MICHELLE

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SINGAPORE 408617

22 UBI ROAD 4 FULCO BUILDING

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

SSCZSS

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

GBK6289M

Date of Accident

19/02/2023

Reset

% RESULT & RECEIPT

TP Insurer Enquiry Insurance _______ MS First Capital Insurance Ltd Period of Insurance _______ 01/01/2023 - 31/12/2023 Requested By _____ Renemer Bagang (CYCLE & CA... Requested Date _______ 20/02/2023 12:06

Payment details

Request Amount: **\$\$1.85**GST Amount: **\$\$0.15**

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

General Insurance Association

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