SC20233V0005 / CYCLE & CARRIAGE INDUSTRIES PTE LTD ENTRY DATE & TIME: 31/03/2023 17:02 (SGT) SUBMITTED BY: Jasmine Chua

VERSION: 1 (31/03/2023 17:02 (SGT))

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.

 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

31/03/2023 17:02 (SGT) Date of Submission Both Policyholder and Actual Driver Reported by Date of Accident 29/03/2023 19:30 (SGT) Exact Location of Accident Singapore 64 UPPER SERANGOON VIEW Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE Vehicle Registration Number SNB4393M INSURED/POLICYHOLDER Is company? No Name Of Registered Owner ZHANG LI GXXXX210Q NRIC No livia8778@hotmail.com Email Address Mobile Phone No (Phone) +65-92330855 Alternative Phone No VEHICLE PARTICULARS Manufacturer Mercedes Model GLB180 Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1332 INSURANCE COMPANY Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210095699-01

DRIVER

Name of Driver ZHANG LI NRIC No GXXXX210Q Date Of Birth 27/08/1981 Occupation Indoor

Date Of Driving Pass 12/08/2020 Driving experience 2 YEARS AND 7 MONTHS Gender Female Mobile Number (Phone) +65-92330855 Alt. Phone Number Email Address livia8778@hotmail.com 64 UPPER SERANGOON VIEW #03-06 Address Address complement Postcode 533886 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 Side Swipe 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 MY CAR WAS PARKED AND I NOTICED A NOTE LEFT ON MY FRONT WINDSCREEN FROM MR ADRIAN TEO (SLD801K) TO SAY THAT HE ACCIDENTALLY BRUSHED INTO MY CAR ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration NumberSLD1801KVehicle ManufacturerSubaruVehicle ModelForesterVehicle Variant-Vehicle Colour-Vehicle CategoryPrivate carName of DriverADRIAN TEO



Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	EQ Insurance Company Ltd
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 <u>truthful</u> and <u>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)

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' 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;
- (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), w hich may be sited outside of Singapore, for one or more of the above Purposes.

Go Chee Han

DID: 6771 4336 HP: 9181 7717

Email: cheehan.go@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd

Cycle & Carriage Industries Pandan Loop

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A: SNB4343M

B: SL91861K

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Declaration

WWe declare the foregoing particulars are true in every respect.

Go Chee Han

DID: 6771 4336 HP: 9181 7717

Email: cheehan.go@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



ESTIMATE FOR SNB4393M

EQ INSURANCE COMPANY LIMITED

TOWER BLOCK, MND COMPLEX

SINGAPORE 069110

62239433

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

Vehicle & Document Information

WIP No

64027

MOTOR CLAIM DEPARTMENT 5 MAXWELL ROAD #17-00

Reg No/Reg Date Date In/Mileage

/ 23/08/2021 SNB4393M

Chassis No

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W1N2476842W1208263

Engine No Make/Model 28291480528077

MB/GLB 180

Colour/Trim

021 191 Cosmos Blac/ 041 101 ARTICO Blac

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Z. REQUEST Customer Request NOT AN OFFICIAL TAX INV BPRISIN BPRISIN POLICY NO/ACC DATE: 7210095699-01 // 29-3-2023 DRIVE IN/EXCESS: 31-3-2023 // SLD1801K - EQ DATE IN/DATE SURVEY: DIRECT SETTLEMENT BY: A BPILAB DISASSEMBLE AND REPLACE ATTACHED DAMAGED PARTS & REFINISH. A BPILAB USING XENTRY DIAGNOSTIC TO CHECK ON CONTROL UNTIL RESTLYMEMORY TO 10ENTIFICATION STANDARD. NETT A BPILAB TO REMOVE, REPLACE HEADLAMP WITH FOCUS . NETT A 97250001 CAVITY PRESERVATION ON REPLACED OR REPAIRED BODY PANELS PERFORM N RH/FRONT GOVER, FENDER & BUMPER AREA 1.00 268.90 00.00 1479.57 N RH/FRONT GOVER, FENDER & BUMPER AREA 1.00 1240.82 00.00 1240.8 N FRONT BUMPER 1.00 62.80 00.00 53.3 N RH/UPPER BASIC CARRIER FOR BUMPER 1.00 62.80 00.00 62.8 N FRONT BUMPER BOTTOM BLACK TRIM COVER 1.00 116.39 00.00 53.4 CAVITY PRESERVATIVE 1.00 16.39 00.00 53.4 CAVITY PRESERVATIVE 1.00 16.39 00.00 53.4 CONFIRMED STANDARD STAND	WE000058	Credit	31/03/2023/ 17:50	СН	371 / Go Chee Han			
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						8% GST on	8416.56	673.32
Authorized signatory and company stamp Total Payable 9,089.8	A (I)	·				Tota	al Payable	9,089.88

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: 6298 1818 Fax: 6779 5383 www.mercedes-benz.com.sg

