



CYCLE & CARRIAGE

CYCLE & CARRIAGE KIA PTE LTD

Ubi Customer Service Centre

330 Ubi Road 3, Singapore 408650 Tel: (65) 68661666



Movement that inspires

Co Reg No : 199405410K

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info	
MS First Capital Insurance Ltd 16 Raffles Quay #42-01 Hong Leong Building Singapore 048581 Contact No	Cust No/Name	/Mr Jin Zhenguo
	Reg No/Reg Date	SML8417L / 07/06/201
	Date In/Mileage	15/05/2023/ 61171
	Chassis No	KNAD6811VK6296645
	Engine No	G3LCKP029952
	Make/Model	KIA/STONIC 1.0 A SX BJ3 W SUNROOF
	Colour/Trim	ABT PLATINUM GRAPHI/ WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
CTP00080	Cash	15/05/2023/ 16:15	LER	972 / Mars Ler	19520		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
Z TEXT							
ACCIDENT ON 12/05/2023 ALONG LOYANG AVE							
OWNER CLAIMING THIRD PARTY							
REQUIRED REPLACEMENT CAR							
TP # YQ7978Y TP INS: MS FIRST CAPITAL							
E PNT88000							50.00
REAR NUMBER PLATE WITH CASING							
M SUNDRY							50.00
C&C BADGE							
M SUNDRY							160.00
TO APPLY SEALANT KIT ON NEW PANEL							
M SUNDRY							200.00
TO APPLY ANTI-CORROSION ON REAR ACCIDENT AFFECTED AREAS							
E PNT88000							280.00
TO INSTALL RIKECOOL SOLAR FILM ON TAILGATE GLASS							
E PNT88000							320.00
TO REPLACE TAILGATE GLASS							
M SUNDRY							80.00
SEALANT KIT ON TAILGATE GLASS							
E PNT88000							640.00
TO TRANSFER TAILGATE COMPONENT AND MECHANISM PART							
E PNT88000							640.00
TO REMOVE AND REINSTALL TRIMMING AND CAPERTING TO GIVE WAY							
ACCESS REPAIR ON REAR ACCIDENT AFFECTED AREAS							
E PNT88000							100.00
TO CHECK AND TEST REVERSE SENSOR							
E PNT88000							2560.00
TO REPLACE TAILGATE PNL,REAR BUMPER,REINFORCEMENT,ETC							
-TO REPAIR REAR END PANEL							
STRAIGHTEN,REFORM,ALIGN ON REAR ACCIDENT AFFECTED AREAS							
E PNT98000							2200.00
SPRAY PAINTING ON REAR ACCIDENT AFFECTED AREAS							
A 10028901							280.00

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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GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info	
MS First Capital Insurance Ltd 16 Raffles Quay #42-01 Hong Leong Building Singapore 048581 Contact No	Cust No/Name	/Mr Jin Zhenguo
	Reg No/Reg Date	SML8417L / 07/06/201
	Date In/Mileage	15/05/2023/ 61171
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	Colour/Trim	ABT PLATINUM GRAPHI/ WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
CTP00080	Cash	15/05/2023/ 16:15	LER	972 / Mars Ler	19520			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
TO CONDUCT DIAGNOSTIC CHECK BY KDS AND CLEAR TROUBLE CODE								
A	90000001							100.00
CHECK WIRING & ELECTRICAL SYSTEM								
M	SUNDRY							50.00
SUNDRIES								
M	PANEL ASSY-TAIL GATE				1.00	1530.00	00.00	1530.00
M	LATCH ASSY-TAIL GATE				1.00	106.00	00.00	106.00
M	LOGO ASSY-KIA SUB				1.00	61.00	00.00	61.00
M	EMBLEM-STONIC				1.00	26.00	00.00	26.00
M	EMBLEM-TURBO G.D.I				1.00	38.00	00.00	38.00
M	W/STRIP-TAIL GATE OPNG				1.00	91.00	00.00	91.00
M	LAMP ASSY-LICENSE PLATE				2.00	119.00	00.00	238.00
M	RR CAMERA & TRUNK LID HDL ASSY				1.00	758.00	00.00	758.00
M	GLASS ASSY-TAIL GATE				1.00	395.00	00.00	395.00
M	CLIP				8.00	5.00	00.00	40.00
M	GARNISH-T/GATE UPR,RH				1.00	66.00	00.00	66.00
M	GARNISH-T/GATE UPR,LH				1.00	66.00	00.00	66.00
M	COVER-RR BUMPER LWR				1.00	385.00	00.00	385.00
M	MOULDING ASSY-RR BUMPER SIDE,LH				1.00	209.00	00.00	209.00
M	MOULDING ASSY-RR BUMPER SIDE,RH				1.00	152.00	00.00	152.00
M	SKID PLATE-RR BUMPER				1.00	122.00	00.00	122.00
M	ULTRASONIC SENSOR ASSY-BWS				2.00	189.00	00.00	378.00
M	LAMP ASSY-REAR FOG & R/REFL,LH				1.00	175.00	00.00	175.00
M	LAMP ASSY-REAR FOG & R/REFL,RH				1.00	127.00	00.00	127.00
M	BEAM-RR BUMPER				1.00	419.00	00.00	419.00
M	BRACKET-RR BEAM LWR MTG,LH				1.00	7.00	00.00	7.00
M	BRACKET-RR BEAM LWR MTG,RH				1.00	5.00	00.00	5.00
M	BRACKET-RR BEAM UPR MTG				1.00	9.00	00.00	9.00
M	STAY-RR BUMPER LH				1.00	55.00	00.00	55.00
M	STAY-RR BUMPER RH				1.00	76.00	00.00	76.00
M	BRACKET-RR BEAM UPR MTG				2.00	9.00	00.00	18.00
M	CAP-RR HOOK				1.00	5.00	00.00	5.00
M	BRACKET ASSY-RR BUMPER SIDE,LH				1.00	27.00	00.00	27.00

Confirm & accepted by

Authorized signatory and company stamp

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Singapore 048581	Chassis No KNAD6811VK6296645
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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CTP00080	Cash	15/05/2023/ 16:15	LER	972 / Mars Ler	19520
Description of Goods / Services		Qty	Unit Price	Disc%	Amount
M BRACKET ASSY-RR BUMPER SIDE,RH		1.00	27.00	00.00	27.00
M CLIP		10.00	1.00	00.00	10.00

Estimate

SURVEYOR NAME : _____

SURVEYOR SIGNATURE : _____

DATE : _____

REMARKS : _____

Confirm & accepted by

	Nett	13,331.00
8% GST on	13331.00	1066.48
Total Payable		14,397.48

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	12/05/2023 14:03 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	12/05/2023 08:52 (SGT)
Exact Location of Accident	Loyang Ave, Singapore
Additional Location Information	JUNCTION OF LOYANG AVENUE AND CHANGI VILLAGE SINGAPORE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML8417L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JIN ZHENGUO
NRIC No	S8158827I
Email Address	JINZHENGUO@GMAIL.COM
Mobile Phone No	(Phone) +65-97127328
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Stonic
Variant	KIA / STONIC 1.0 DCT SR
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	998

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/00982548/01

DRIVER

Name of Driver	JIN ZHENGUO
NRIC No	S8158827I
Date Of Birth	10/11/1981

Occupation	Indoor
Date Of Driving Pass	11/08/2020
Driving experience	2 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97127328
Alt. Phone Number	-
Email Address	JINZHENGUO@GMAIL.COM
Address	20 PASIR RIS LINK #12-12
Address complement	-
Postcode	518157
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 to Rear
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)	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

REFER TO ATTACHED
STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD
TEL 67415336

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	YQ7978Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Commercial vehicle
Name of Driver	LYU HENGJING
Passport No/FIN	G8082534Q
Contact Number	(Phone) +65-92989576
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

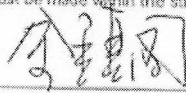
Describe Circumstance of the Accident

I STOPPED WHEN THE TRAFFIC LIGHTS TURNED TO RED. THE LORRY DRIVER HIT MY CAR FROM BACK.

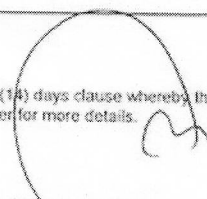
Declaration

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

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.


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

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:

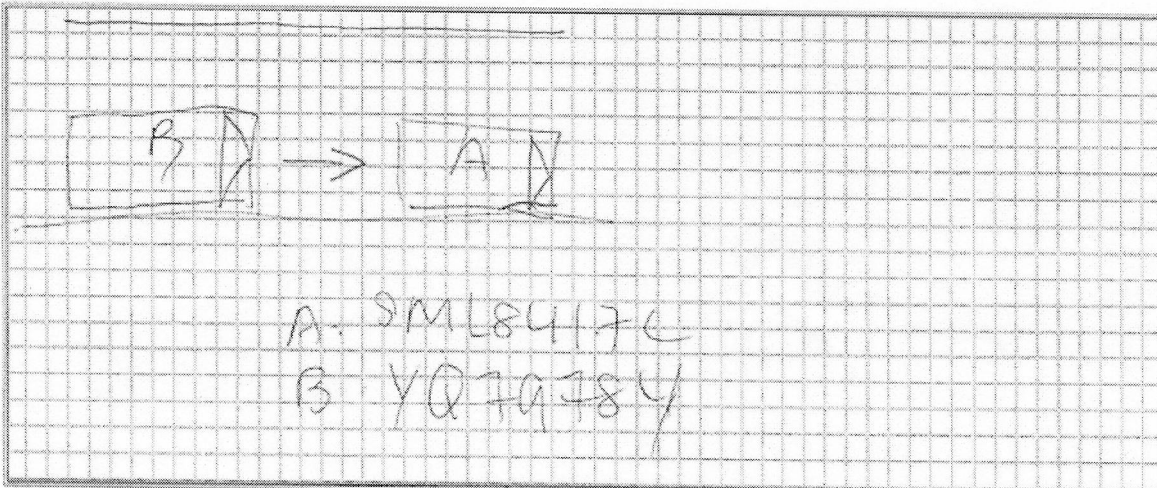
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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.


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



A. SML8417C
B. YQ7A784

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

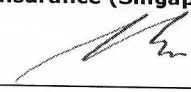
This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	: MT/00982548
Type of Coverage / Driver Plan	: Car Comprehensive (Value Plan)
1) Vehicle Registration No.	: SML8417L
Chassis No.	: KNAD6811VK6296645
2) Name of Policy Holder	: JIN ZHENGUO
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 07/12/2021 00:00
4) Date/Time of Expiry of Insurance	: 06/12/2022 23:59
5) Persons or Classes of Persons Entitled to Drive	
(a) Any person who is named on the policy who is driving on the Policyholder's permission.	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
6) Limitations as to use*	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
Sum Insured	: Market Value
Own Damage Excess	: S\$ 600.00
Windscreen Excess	: S\$ 100.00
Choice of workshop	: DirectAsia approved workshops
Finance company / Hire Purchase	:
Main driver	: JIN ZHENGUO
Named driver	: None
Important Note: This policy is on a named driver basis. The Policyholder has to be named as the Main Driver or Named Driver to be covered. Any unnamed drivers will not be covered.	

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 11/11/2021

Direct Asia Insurance (Singapore) Pte. Ltd.



Underwriting Manager



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 15 May 2023 / 08:31:12
Receipt Date/Time : 15 May 2023 / 08:31:12

Tax Invoice/Receipt

Receipt No. : ITNET-00000-230515-000231
Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - YQ7978Y				
As at 12 May 2023/08:52:00				
Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED				
1	Insurance Enquiry - YQ7978Y			
	Enquiry Fee	24.77	1.98	26.75
	20230515082927341768			
	Sub-Total	24.77	1.98	26.75
	Total Before Rounding	24.77	1.98	26.75
	Rounding Difference			0.00
	Total Amount Payable			26.75
Paid By				
	526471XXXXXX5905	eNETS Credit Card		26.75
	Total			26.75
	Cash Change			0.00
	Tendered Amount			26.75
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Save as PDF

OK ➔

Print Receipt