

15/5/2010

INS. CASE OWNER:

Bennett Tan

CC 4/AIG1601

7230, C7a3

LKK:

IDAC:

Surveyor:

Kenny TH

DOI:

ASSIGNMENT

15/9/16

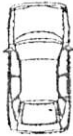
Date / Time :

Registered in Merimen:

14/9/16

14/9/16

Pre-assign / CCU / FTE



Insured Vehicle No. :

Name of Insured :

Insured Tel No. :

Excess Sec II :S\$

Is driver the owner?

(YES / NO)

If NO, Driver Name / Age :

Driver Tel No. :

HP:

D.O.A :

Nature of Accident :

Claim No. :

Policy No. :

Make / Model :

Place of Accident :

OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

SGP 837K

EY 9988A

TEL 9298

SJT 4833M



INSRS:

WSP:

Tel :

Liability :

RMKS:

01



INSRS:

WSP:

Tel :

Liability :

RMKS:

CS1M6H16017249/Kgh3.

MCH



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

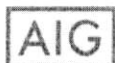
Liability :

RMKS:

Autoexcel

TP

Date/Time	STAGE	DATE / PIC
15/5/15	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
	Documentation Check List:	Handler Typist
	Notification ltr (if non-pickup)	<input type="checkbox"/> <input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/> <input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/> <input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/> <input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/> <input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/> <input type="checkbox"/>
	Towing Invoice:	<input type="checkbox"/> <input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/> <input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
	PIR:	<input type="checkbox"/> <input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
	LOD	<input type="checkbox"/> <input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
	Others:	<input type="checkbox"/> <input type="checkbox"/>
PRELIMINARY ADVICE Date/Time: _____ Sent By: _____ Confirm by: _____		
FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: S\$ _____ (_____ days) Reduction: _____ % Email <input type="checkbox"/> Call <input type="checkbox"/>		
FINAL SETTLEMENT Date/Time: _____ Confirm with: _____ If NO or B 28, Ass. Lia : _____		
Final Liability: % (Agreed / Assessed) BOLA S/N No. : _____		
Repair Cost: S\$ _____		
Loss of Rental (LOR): S\$ _____ (_____ days)		
Loss of Use (LOU): S\$ _____ (\$ x _____ days)		
Loss of Income (LOI): S\$ _____ (\$ x _____ days)		
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search: S\$ _____		
Medical: S\$ _____		
Disbursement: S\$ _____ (e.g. Tow/ Independent)		
Legal Cost: S\$ _____		
Total: S\$ _____ Global Sum S\$: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
FINAL PAYMENT Date/Time: _____ Confirm with: _____		
Payee 1: S\$ _____ Name 1: _____		
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____		



Logout

- Pre repair inspection request - SJT4833M VS SGP837K (OI) DOA 12/9/2016

From: BernardJiQian.Ler@aig.com
To: admin-a@lkkauto.com, assignments@lkkauto.com
Cc: Kristelli.Lopez@chartisinsurance.com, Lily.Tan@aig.com, Andy-SY.Fong@aig.com, KahYin.Leong@aig.com, Kunaseelan.Deivaseelan@aig.com, MingYao.Lee@aig.com, Baljit.I
Sent: Wednesday, 14 September, 2016 11:05:58 AM
Attachments: AVIV-MARS00023287-SJT4833M-GIA.PDF

Hi,

Please refer to the enclosed request from **Autoexcel Engineering Pte Ltd.**

Claim no : 6372121767SG007
Case Owner : Bennie Tan

If you have any queries/concerns, please let us know.
Kindly assist to assign Henry Eng as Single Joint Expert as requested.

Thank you.

Best Regards,

Bernard Ler
AIG
Express Claims Adjuster II
Claims Operations | AIG Shared Services

Level 7, Menara Worldwide, 198 Jalan Bukit Bintang, 55100 Kuala Lumpur, Malaysia.
Tel + 603 2719 6000 | Ext 1012123

BernardJiQian.Ler@aig.com | www.AIG.com

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From: aeexcel@singnet.com.sg
To: BernardJiQian.Ler@aig.com
Subject: RE: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SGP837K AND SJT4833M ON 12/9/2016
Date: Wed, 14 Sep 2016 02:57:50 +0000
Dear Officer In Charge

We wish to chose Henry Ng from LKK

Please help us arrange

Thank you

Regards
Ryan Soh 93825367 /64535654

From: Ler, Bernard Ji Qian [mailto:BernardJiQian.Ler@aig.com]
Sent: Wednesday, September 14, 2016 10:31 AM
To: Autoexcel <aeexcel@singnet.com.sg>
Cc: Tan, Lily (AIG) <Lily.Tan@aig.com>; Lopez, Kristelli <Kristelli.Lopez@chartisinsurance.com>; Fong, Andy-SY <Andy-SY.Fong@aig.com>; Lee, Ming Yao <MingYao.Lee@aig.com>; Leong, Kah Yin <KahYin.Leong@aig.com>; Deivaseelan, Kunaseelan <Kunaseelan.Deivaseelan@aig.com>; Hassim, Mohd Fitri <MohdFitri.Hassim@aig.com>; Kaur, Baljit <Baljit.Kaur@aig.com>; Chin, Lee-Ying <Lee-Ying.Chin@aig.com>
Subject: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SGP837K AND SJT4833M ON 12/9/2016

Your Reference : SJT4833M
Our Reference : 6372121767SG007

Dear Sir,

We refer to your Notice of Accident of even date.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert:

Name of Surveyor	Company Name
Pang Kiah Keen (Frankie)	Formteam Adjusters Pte Ltd
Ng You Han	Formteam Adjusters Pte Ltd
Soon Han Xin (Gary)	Formteam Adjusters Pte Ltd
Chow Bo Xiong	Formteam Adjusters Pte Ltd
Chua Soo Teck (Benjamin)	Formteam Adjusters Pte Ltd
Kalvin Ang	LKK Auto Consultants Pte Ltd

NRIC/Passport/Company
Cert No.: S8434662D

Owner ID Type: Singapore NRIC

Owner Name: SOON MIN LIANG, CASEY (SUN MINGLIANG, CASEY)

Registered Address: APT BLK 326B ANCHORVALE ROAD #13-266 SINGAPORE 542326

Mailing Address: -

Birth Date: 17 Nov 1984

Vehicle Particulars

Vehicle No.: SJT4833M

Previous Vehicle No.: -

Effective Date of
Ownership: 14 Oct 2009

Original Regn Date: 14 Oct 2009

Registration Date: 14 Oct 2009

Year of Manufacture: 2009

Vehicle Type: Passenger Motor Car

Vehicle Scheme: -

Vehicle Attachment 1: No Attachment

Vehicle Attachment 2: -

Vehicle Attachment 3: -

Vehicle Make: TOYOTA

Vehicle Model: VIOS E AUTO

Primary Colour: Silver

Secondary Colour: -

Passenger Capacity: 4

Chassis No.: MR053HY9305132248

Engine No.: 1NZX975114

Engine Capacity/Power
Rating: 1497 cc / -

Maximum Power Output: 80.0 kW (107 bhp)

Propellant: Petrol

Max Unladen Weight: 1095 kg

Maximum Laden Weight: 1505 kg

Open Market Value: \$12,717.00

PARF Eligibility: Yes

PARF Eligibility Expiry
Date: 13 Oct 2019

Minimum PARF Benefit: \$6,358.00

No. of Transfers: 0

IU Label No.: 1123372285

COE No.: 2009110101000186G

COE Expiry Date: 13 Oct 2019

COE Category: A - Car (1600cc & below)

COE Registration
Category: A - Car (1600cc & below)


Quota Premium (QP) /
Prevailing Quota
Premium: \$16,201.00 / -

Actual QP Paid: \$16,201.00

QP (Regn Cat):	\$16,201.00
QPC Cash Rebate	No
Eligibility:	
QP during COE Bidding	\$16,201.00
Exercise:	
Additional Registration	100.00 %
Fee Rate:	
Actual ARF Paid:	\$12,717.00
Vehicle Lifespan Expiry	No Lifespan
Date:	
CO2 Emission:	-

Message: To renew the COE, the Prevailing Quota Premium payable is that of Category A.

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Land Transport  Authority

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Aviva Ltd., 4 Shenton Way, #01-01 SGX Centre 2, Singapore 068807. Tel: (65) 6827 9966 www.aviva.com.sg

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION
(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

CERTIFICATE NUMBER. 10436861

1) VEHICLE REGISTRATION NO.

SJT4833M

2) NAME OF INSURED

FAMILY NAME
GIVEN NAME

CASEY
SOON

3) EFFECTIVE DATE OF COMMENCEMENT OF INSURANCE FOR THE PURPOSE OF THE ACT

14-Oct-2015 00:00hours

4) DATE OF EXPIRY OF INSURANCE

13-Oct-2016 23:59hours

5) PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE

Any driver aged 25 or over

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been canceled at the time of accident or loss.

Please refer to the policy document for full terms and conditions.

6) LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

NAMED DRIVER

7) FINANCE COMPANY

HONG LEONG FINANCE LTD

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 Part IV of the Road Transport Act, 1987 (Malaysia), or any amendment, act or acts passed in substitution thereof.

Issued in Singapore: 11-Sep-2015 at 15:14hours

Aviva Ltd.

IMPORTANT NOTE:

- If you want to cancel your policy at any time, you will need to return the certificate to us.
- You MUST report all accidents to Us within 24 hours of the occurrence regardless of whether You intend to claim on Your own policy or not, or whether Your car is damaged or not. Should You fail to do so, Your No Claims Discount could be affected and Your claim may be prejudiced.

Nishit Majmudar
Chief Executive Officer

In case of vehicle breakdown, accident or windscreen damage, please call 6333 2222 (24 hours) immediately.

ORIGINAL

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8434662D



Name

SOON MIN LIANG, CASEY
(SUN MINGLIANG, CASEY)

孙 明 亮

Race

CHINESE

Date of birth

17-11-1984

Sex

M

S8434662D

Country/Place of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8434662D

Name

SOON MIN LIANG, CASEY
(SUN MINGLIANG, CASEY)

Birth Date: 17 Nov 1984

Issue Date: 17 Jan 2005



001315218G

5451476



NRIC No. S8434662D



Date of issue
09-04-2015

Address
APT BLK 326B ANCHORVALE ROAD
#13-266
SINGAPORE 542326

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor cars \leq 3000 kg with \leq 7 passengers,
exclusive of the driver; and motor tractors
/vehicles \leq 2500 kg

PASS DATE
17 Jan 2005

NP 428A



Licence No: S8434662D