

ASS. REC. BY:

REF: CS / ALH17019996 / Rlgbe2

Special Instruction:

Surveyor: Rasul

## ASSIGNMENT (Office)

From (Person): Chin Lee Ying

of ALH

Date/Time: 17/10/2017 259pm

Estimated Cost:

Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

GBF 96022

Insured:

at Workshop m/s

Cycle & Carriage  
788 Pandan Loop

Tel: 67711385

of

Policy No:

988995580

Claim No:

568376888559

Sum Insured:

Excess:

TBA 1200

Make of Veh:

(Client's Record)

D.O.A.

05-082017

CA / REV / REP. / REV 24 HRS

19-10-2017

Date/Time:

17-10-2017 441pm

Person Contacted:

Philip

H.O.D. Endorsement:

Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	GBF 96022 - X
24/10/17 @ 5:27pm	Informed Mr Cheong is YK to forward the excess \$1200 to Philip Cheong by email.
27/11/17 @ 11:24am	Rasul finalised with Ng Wei Siang final Ag 82785.59 (after ex: \$1200), 4 days by email.
23/11/17	Final Ag \$3185.59, 4 days (Real \$220, 5%)






# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
AIG ASIA PACIFIC INSURANCE PTE LTD		Ref : CS/AIG17019996/R1qb		
78 SHENTON WAY #08-16 CHARTIS BUILDING SINGAPORE 079120		Date : 19-10-2017		
		Code : AIG		
<b>1. Policy Particulars :- OWN DAMAGE</b>				
Insured Veh.	Veh. Inspected		GBF 9602Z	
Policy No.	Coverage (\$)		0.00	
Claim No.	Excess (\$)		0.00	
Assign From	CHIN LEE YING	Assign Date	17/10/2017	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	c.c		0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.	Colour			
Odometer	-	Steering		
Brakes	Modification			
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	05/08/2017	Inspection Date	19/10/2017	
Survey held at	CYCLE & CARRIAGE INDUSTRIES (1986) PL 188 PANDAN LOOP SINGAPORE 128378 (MERCEDES-BENZ)			
<b>5a. Remarks</b>				
A)THE MARKET VALUE IS S\$------(EST. AVERAGE) B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.				



# Survey Department Check List (Case Handler)

Reference No. CG/17019996/R196  
Policy Type: OD / TP / TP RES / TL / EVA

GB# 96022

Case Handler

Typist

**Admin** ( Cathy ): Case handler to make sure all Information created by the assignment team are **ACCURATE**.

## (1) Office Assign Form

- C Reference No.
- C Customer Code
- N Assign From
- C Assign Date
- C Veh No (Inspected)
- C Veh No (Insured)
- C D.O.A
- C Policy No
- C Claim No
- C Insurance Authorisation (CA /REV/REP)
- C Report Type
- C Weekend Charges
- N Survey held at/Repairer
- C Excess

Y-Date	N-Date	Y-Date	N-Date
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

**Surveyor** ( Ramy ): Case handler to make sure the surveyor completed all required information.

## (1) Assignment Form

- C Vehicle No
- C Regn Month/Year
- N Vehicle Type
- N Make & Model
- C Engine Capacity. (C.C)
- N Colour
- C Odometer. (Sp.Reading)
- C Chassis No
- N General Condition
- N Steering
- N Brake
- N Modification (Modi)
- C Tyre Size
- N Tyre Make
- C Tyre Balance
- C Date of Inspection
- N Survey held
- N Des.of Damages

✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

## (2) System - (Views/Merimen)

- C Damaged Vehicle Photographs Uploaded

✓			
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## (3) Workshop Estimate/Assignment Form

- N ALL Parts condition
- C Market Value for OD cases
- C Estimate Repair Cost for PRI (RSI, TMI, MSIG)
- C Days of repair
- C Finalised Amount
- C Re-inspection Cases to Finalize within 5 Days

✓			
✓			
✓			
✓			
✓			
✓			

## (4) System - (Views/Merimen)

- C Resurvey photo Uploaded

✓			
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Check By:

[Signature] 13/11/17

Case Handler

Date

- FW: GBF9602Z repair survey

**- FW: GBF9602Z repair survey**

From: Chin, Lee-Ying  
 To: 'assignments', 'Admin A'  
 Cc: Fong, Andy-SY, Chang, Lois-KL  
 Sent: Tuesday, 17 October, 2017 2:59:34 PM  
 Attachments:  20171017140406-0001.pdf

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Hi LKK,

Kindly assist to survey, vehicle at C&C Pandan Loop.

Thanks.

Best Regards  
 Lee Ying, Chin  
 AIG  
 Claims | AIG Asia Pacific Insurance Pte. Ltd.  
 78 Shenton Way #08-16 Singapore 079120  
 Tel +(65) 6419 1947 | Fax +(65) 6835 7416  
 Lee-Ying.Chin@aig.com | www.aig.com.sg

-----Original Message-----

From: Philip Cheong [mailto:philip.cheong@cyclecarriage.com.sg]  
 Sent: Tuesday, October 17, 2017 2:17 PM  
 To: AIG SGP, Claims-Survey  
 Cc: Ng Wei Siang; Edison Tan Keng Hui  
 Subject: GBF9602Z repair survey

Hi

Please arrange the surveyor to survey the vehicle

Thanks you.

Regards Philip Cheong  
 Reception Manager  
 MB Commercial Vehicle  
 Pandan Loop Singapore 128378  
 Tel: +65 67714383(DID) Fax: +65 67756310 Hp : 91865300

-----Original Message-----

From: DocuCentre-V C2265 [mailto:PLMFP31@cyclecarriage.com.sg]  
 Sent: Tuesday, 17 October, 2017 2:04 PM  
 To: Philip Cheong  
 Subject: Scan Data from PLMFP31

Number of Images: 19  
 Attachment File Type: PDF

Device Name: DocuCentre-V C2265  
 Device Location:

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## Shiau Chan (LKKAUTO)

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**From:** Rasul (LKKAUTO)  
**Sent:** Wednesday, 22 November, 2017 11:24 AM  
**To:** Ng Wei Siang  
**Cc:** Shiau Chan (LKKAUTO)  
**Subject:** RE: final quotation for vehicle GBF9602Z

Hi Ng Wei Siang,

Finalised amount \$ 2,785.59 / 4 days (after excess 1200) confirmed

Best Regards,

**Rasul** | Assessor

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [Rasul@lkkauto.com](mailto:Rasul@lkkauto.com) | fax: 6841-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto  
Consultants  
Pte Ltd

*Save the Earth. Print only when necessary.*

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**From:** Ng Wei Siang [<mailto:weisiang.ng@cyclecarriage.com.sg>]  
**Sent:** Thursday, 16 November, 2017 12:49 PM  
**To:** Rasul (LKKAUTO)  
**Subject:** final quotation for vehicle GBF9602Z

Dear Rasul,

Kindly refer to final quotation for vehicle GBF9602Z and analyse it.

Thank you & warm Regards

Wei Siang

Cycle & Carriage Industries Pte Ltd  
Mercedes-Benz Commercial Vehicle Service Department  
188 Pandan Loop, Singapore 128378  
DID: +65 6771 4392  
Fax: +65 6775 6310  
H/P: +65 9186 5301  
E-mail: [Weisiang.ng@cyclecarriage.com.sg](mailto:Weisiang.ng@cyclecarriage.com.sg)

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## **Shiau Chan (LKKAUTO)**

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**From:** Shiau Chan (LKKAUTO)  
**Sent:** Tuesday, 24 October, 2017 5:27 PM  
**To:** Cheong Chin Leong; Yik Chan Hoe  
**Cc:** SUR  
**Subject:** EXCESS OF GBF 9602Z (AIG-OD)

Dear Mr Cheong and Mr Yik,

Kindly assist to forward the email to Philip Cheong, the excess of above vehicle \$1,200.00.

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [siewsc@lkkauto.com](mailto:siewsc@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type	Company
Owner ID	3778Z
<b>Vehicle Details</b>	
Vehicle No.	GBF9602Z
Vehicle to be Exported	No
Intended De-registration Date	24 Oct 2017
Vehicle Make	MERCEDES BENZ
Vehicle Model	VITO 109 CDI MT LONG
Primary Colour	White
Manufacturing Year	2017
Engine No.	R9MA503C016413
Chassis No.	WDF44760323272799
Maximum Power Output	-
Open Market Value	\$27,240.00
Original Registration Date	02 May 2017
First Registration Date	02 May 2017
Transfer Count	0
Actual ARF Paid	\$1,362.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility	No
PARF Eligibility Expiry Date	-
PARF Rebate Amount	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date	01 May 2027
COE Category	C - Goods Vehicle & Bus
COE Period(Years)	10
QP Paid	\$48,901.00
COE Rebate Amount	\$46,550.00
<b>Total Rebate Amount</b>	<b>\$46,550.00</b>

The information contained herein is correct as at 24 Oct 2017

OK



## 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 Authorised 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 ability.
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 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 Report	07/10/2017 17:08
Date Of Accident	05/08/2017 14:30
Exact Location Of Accident	ALONG WEST COAST RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF9602Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD.
Co Reg No	199803778Z
Email Address	BENNY.CHONG@DAIMLER.COM
Mobile Phone No	
Alternative Phone No	OFFICE-91728488

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	VITO 109 CDI MT
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
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### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999995580
Cover Note Number	NA

### Driver

Name of Driver	MUHAMMAD IBNU'ATTAILLAH BIN JOHARI
NRIC No	S8704009G
Date Of Birth	21/02/1987
Occupation	OUTDOOR
Date Of Driving Pass	07/10/2009
Driving Experience	7 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90086240
Fax Number	
Contact Number	
EMail Address	IBNU.ATTAILLAH21@GMAIL.COM

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own Vehicle -

Insurance Company of Driver's Own Vehicle -

#### General Information of the Accident

Type Of Accident COLLIDED INTO PROPERTY

Weather Conditions CLEAR

Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? NO

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO

Number of Passengers (Including Driver) 1

#### Details of Police Action

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### Circumstances of Accident

Was driving gbf9602z, there is a construction goin on and the road was uneven along west coast road. then there is an object in my lane that I'm travelling and I tried to avoid but there is a vehicle on my blindspot, so I just continue and run over the object, then I heard click sound and I continue my journey. No injuries involved.

#### Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? NO

Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties OBJECT

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Details of Witness

Name

Phone Number

Email Address



## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. The Form must be completed by the Policyholder and/or the Authorized Driver.
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4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of 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 request 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 thereafter.
8. Consent under the Personal Data Protection Act (PDPA)
  - (a) I understand, acknowledge, agree and consent that (i) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be 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/mas 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 be 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 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.

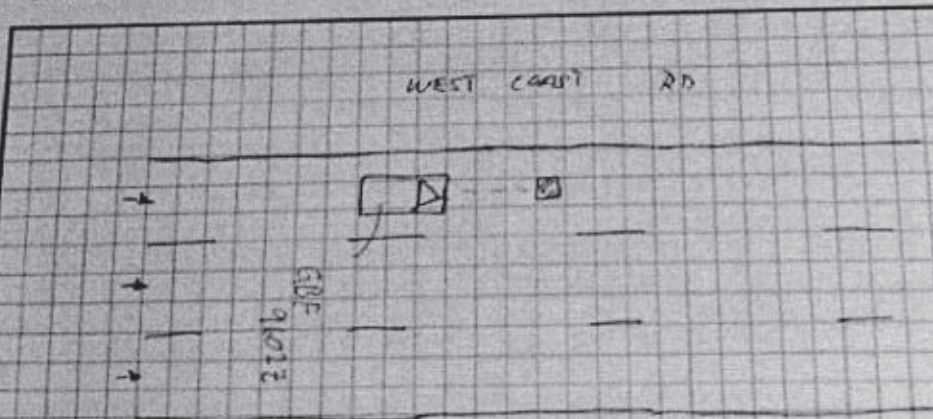
VERIFIED BY AJAX MARS  
REPORTING OFFICER  
MUHAMMAD SUMARDI BIN  
MOHD AFFANDI

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre  
Personnel

#### Sketch Plan





## Common Statement

### ACCIDENT STATEMENT (2000 characters)

Was driving gbf9602z, there is a construction goin on and the road was uneven along west coast road. then there is an object in my lane that I'm travelling and I tried to avoid but there is a vehicle on my blindspot, so I just continue and run over the object, then I heard click sound and I continue my journey. No injuries involved.

Taxi Voucher No.:

### DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
MUHAMMAD SUMARDI BIN MOHD AFFANDI

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

7 October 2017 2:44 pm

Date/Time:

7 October 2017 2:44 pm

Accident Photo



Accident Photo

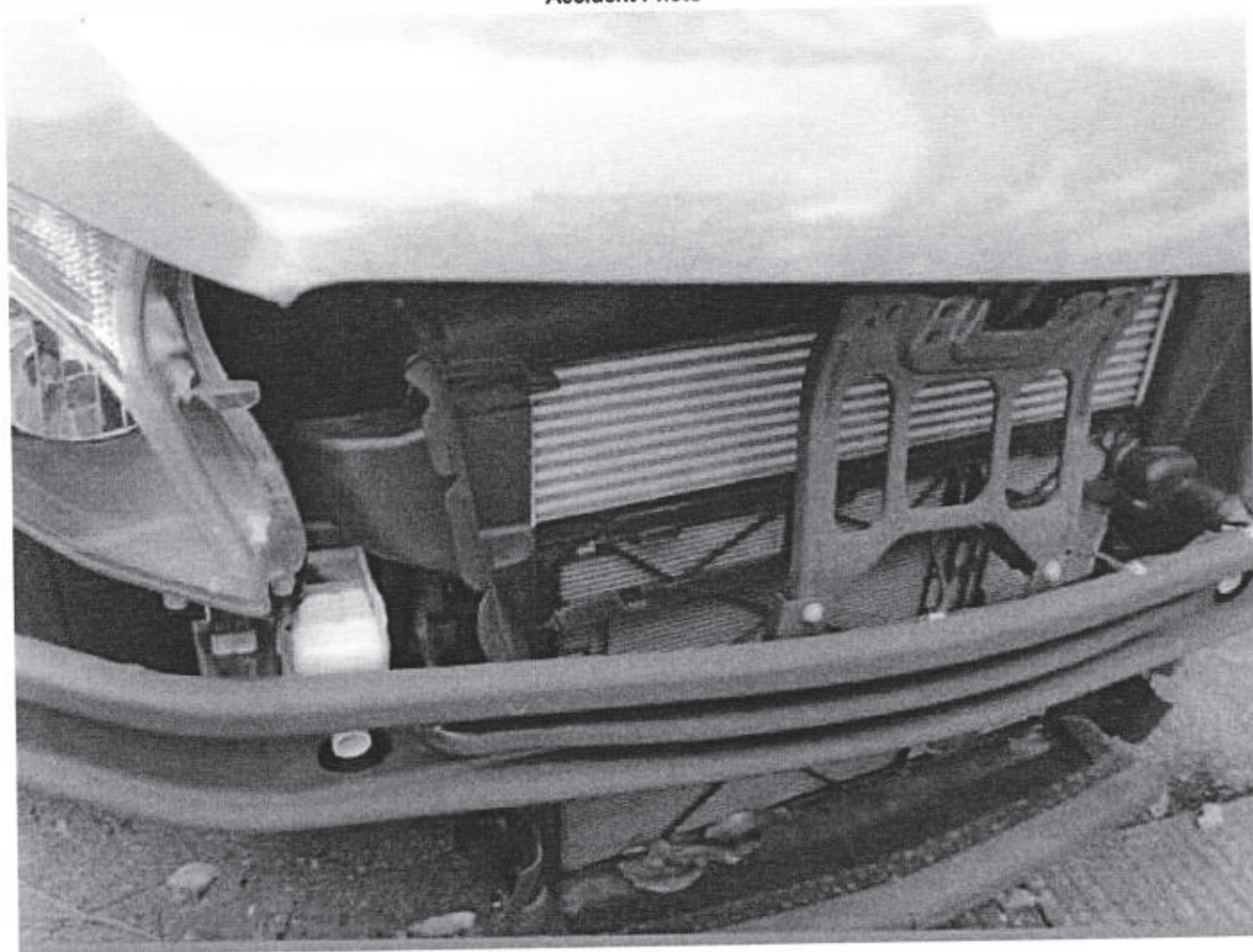




Accident Photo



Accident Photo

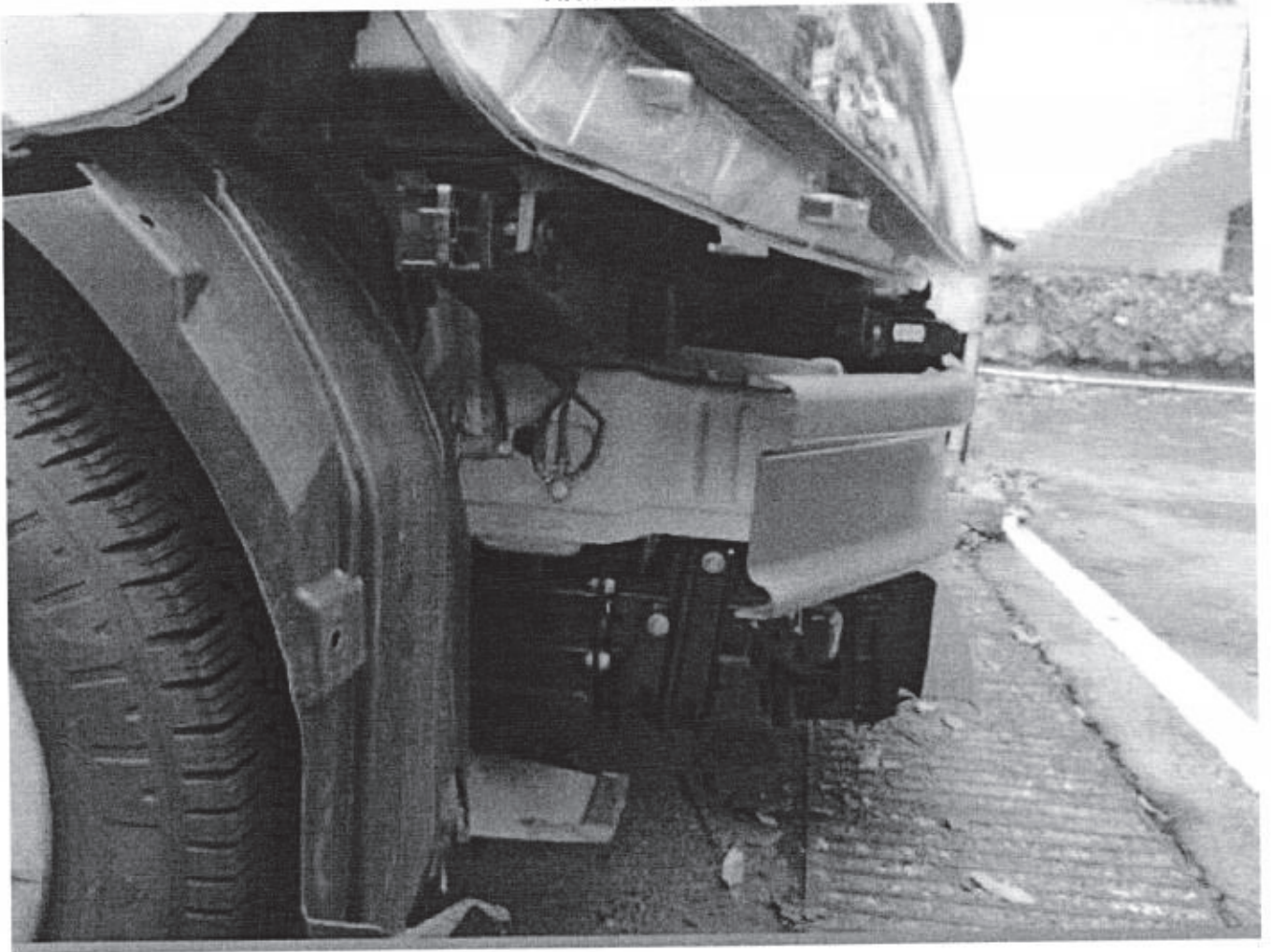


Accident Photo

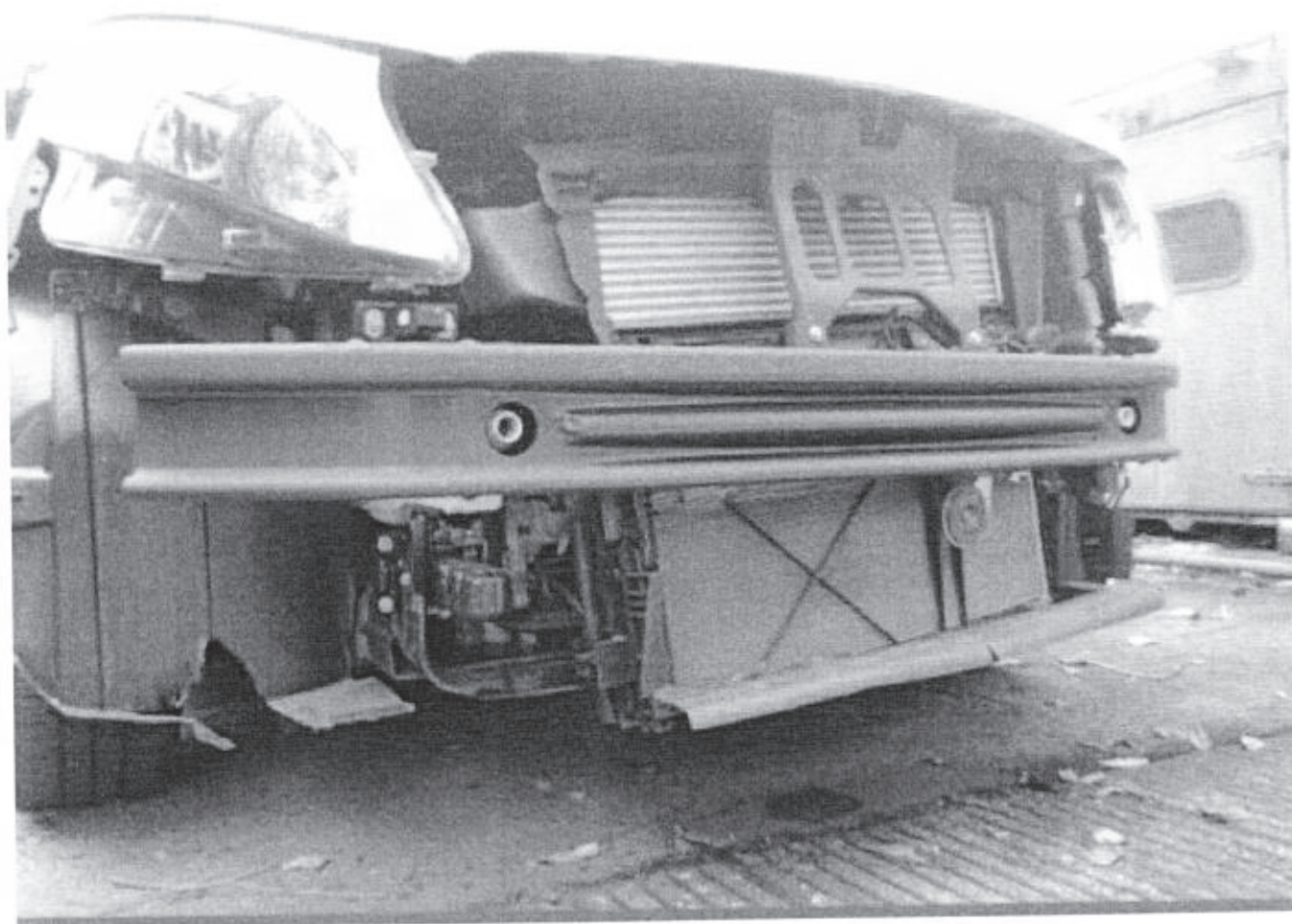




Accident Photo



Accident Photo



Accident Photo

