malman fasul	ASSIGN	MENT (Office)		72
From (Person); (NIN LLY)	nq of	AUI	Date/Time:	MDFOIL FIDELLICE
Estimated Cost:	J	Bill to:		
OD / TP WS / TP RES / OD) To Inspect Vehicle No:	S6S 7496Z	/CS	Insured: S	27645S
at Workshop m/s	One zone			- T
	5 Yishun Ind	St 1 #01-20	5 5100000	
Policy No:		Claim No:		
Sum Insured:		Excess:		
Make of Veh:	4		D.O.A.	17·1(20)7
CA / REV / REP. / REV 2 Date/Time: 321(20)	4 HRS WPI DIFPMPerson Contacte	afler ipm	H.O.D. En	dorsement:
Date/Time Action/Instructi	on (X) Esting	ate.		
SGS TUFFE	T - 68/ INC 180			DOA: 200508
SZF 76U53				
	lart: 23.11:2017			
	: 58.11.30(1			

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

of 5, yahra | red st #01-20

To Inspect Vehicle No: SGS 74962

at Workshop m/s ONE ZONE

From:

Insured: Policy No. Claims No. Sum Insured:

(Client's Record)

(Policy Condition)

Bal. or Market Value:

IDAC Accident Rport:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

Date:

Date / Time

Date/Time, File Pass to?

Date/Time, File Return to?

Report Format: Lump Sum / I.B.I: (\$

25/0

Remark: The veh had commenced its

CA / REV / REP. / 24 HRS

repair at the time of inspection.

days

Person Contacted:

Preli. Report Final Report

Action / Instruction

Make of Veh:

Estimated Cost:

-	_	-	4:	
~	-	ъ.		
n	-	г	+	

Date:

ALG IPRS

Excess:

Consistent?: Yes or No

Consistent?: Yes or No

Res.: Yes or No

3 Val.: Yes or No

1. 201.000	CHAIN	Part of the Part
12 14 14 1	2 - 1	ENT
23000	C31 1113	LILL

COT X BURY: 2022 MAN SGS 74967 Yr Regn: 2007 MMZ Veh No: Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or TOYOTA AXLO 1-5xA ac 1496 Make: m

Reconstruction of the contract	Sp.Reading	12983	8	T/Radio; Ir	nsured / St	d/NI/NA
	Eng/No:					
	C/No:	N25 10	£76016	189		
-		Good (Fait / Po				
		order / Jammed		Burnt or		
		order / Jammed				
	_	/SIRim / STE		- wester Set		
·*	Tyre Size:	F:		502R	16	
	. Tyle Size.		203	1	.,0	
N/S O/S	DO / DI III / F	R:				
IN/O U/O	10.00 Miles - 10.00 A. T.	XNOVA / GY /			U/PIR/S	JMI /
	TOYO / YO	KO or	K	CUMHO		
	Front	-		Rear		
or No	R/Bal.	3	mm	R/Bal.	5	mm
or No	L/Bal.		mm	L/Bal.	5	mm
or No	D.O.A. [7	1417	_	D.O.I.	2/11	17 C5p
or No	Survey held	at	ONE	SME		
	Des. of Dam	ages: Frt / Re	ear / O/S /	N/S / U/C	/ Rooftop	ОГ
Vehicle: IN / OUT			P64e	0/3		
Vehicle: IN / OUT	The U/C	/ Chassis fra	P640		affected due	to collision.
Vehicle: IN / OUT	The U/C		P640		affected due	to collision.
Vehicle: IN / OUT	The U/C		P640		affected due	to collision.
Vehicle: IN / OUT	The U/C		P640		affected due	to collision.
Vehicle: IN / OUT	The U/C		P640		affected due	to collision.
Vehicle: IN / OUT	The U/C	/ Chassis fra	P640		affected due	to collision.
Vehicle: IN / OUT	The U/C		P640		affected due	to collision.
Vehicle: IN/OUT	The U/C	/ Chassis fra	P640		affected due	to collision.
Vehicle: IN/OUT	The U/C	/ Chassis fra	P640		affected due	to collision.
Vehicle: IN/OUT	The U/C	/ Chassis fra	P640		affected due	to collision.
R 2018	The U/C	/ Chassis fra	P640		affected due	to collision.
R 2018		/ Chassis fra	P640			to collision.
R 2018	Days Of Re	/ Chassis fra	P640	Structure :	fee:	to collision.
R 2018	Days Of Re Resurvey N	/ Chassis fra	P640	Structure :	ee: tion:	to collision.
R 2018	Days Of Re Resurvey N	/ Chassis fra	P640	Survey F	ee: tion:	to collision.
R 2018	Days Of Re Resurvey N	/ Chassis fra	P640	Survey F Transporta)S+RS	ee: tion:	to collision.
R 2018	Days Of Re Resurvey N : Site	pair: 3 Io. of Trip: Insp (\$	P640	Survey F Transporta)S+RS) Photos	ee: tion:	to collision.
R 2018	Days Of Re Resurvey N : Site	pair: 3 Io. of Trip: Insp (\$ view (\$ n. Invs (\$	P640	Survey F Transporta)S+RS) Photos	ee: tion:	to collision.

Survey Department Check List (Case Handler)

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	e Assign Form	Y-Date	N-Date	Y-Date	N-Date
C	Reference No.	V			
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				18
C	Excess			La viere	
urvey	Or /	ha		Department	info
		ne surveryor co	ompieted a	ii required	miorma'
	vehicle No				
С		- V			-
C	Regn Month/Year	V		-	
N.	Vehicle Type Make & Model	-	-	-	-
		/		_	
C	Engine Capacity. (C.C)	- V			-
N	Colour	V		-	-
С	Odometer. (Sp.Reading)	-		-	-
C	Chassis No	V		-	-
N	General Condition	V			
N	Steering	V			-
N	Brake	- /		-	No.
N	Modification (Modi)	V	-	-	
C	Tyre Size	V		-	-
N	Tyre Make		-	_	
С	Tyre Balance			-	
C	Date of Inspection		-		-
N	Survey held	V		_	-
Ν	Des.of Damages	V			
2) Syste	em - (Views/Merimen)				
С	Damaged Vehicle Photographs Uploaded				
3) Wor	kshop Estimate/Assignment Form				
N	ALL Parts condition				
С	Market Value for OD cases				
С	Estimate Repair Cost for PRI (RSI, TMI, MSIG)				
С	Days of repair				
С	Finalised Amount				
C	Re-inspection Cases to Finalize within 5 Days		-		
1) Syst	em - (Views/Merimen)			-	
C	Resurvey photo Uploaded		T 7		

Case Handler

Date



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

410	A OLA DA OLEJO INI		rnationale Des Experts En Auton				
AIG	ASIA PACIFIC IN	SURANCE PTE LTD	Ref : CS3/AIG17022	25//K10			
СНА	HENTON WAY #0 RTIS BUILDING GAPORE 079120	8-16	Date: 22-11-2017 Code: AIG				
1.		Policy Particul	ars :- (THIRD PARTY CLA	IM)			
	Insured Veh.	SLP 7645S	Veh. Inspected	SGS 7496Z			
	Policy No.	3 % fo =\$c	Coverage (\$)	0.00			
	Claim No.		Excess (\$)	0.00			
	Assign From	CHIN LEE YING	Assign Date	22/11/2017			
2.		Vehicle I	Particulars & Condition				
	Make & Model		c.c	0			
	Engine No.	HIDDEN	Year of Reg.				
	Chassis No.		Colour				
	Odometer		Steering	·			
	Brakes		Modification				
	General						
3.		Co	nditions of Tyres				
		Size	Make	Balance			
	R/H Front Tyre			mm			
	L/H Front Tyre			mm			
	R/H Rear Tyre			mm			
	L/H Rear Tyre			mm			
4.		Desc	ription of Damages				
5.	Cyal Caller Cole	The second second	neral Information				
	Accident Date	17/11/2017	Inspection Date	22/11/2017			
	Survey held at	ONE ZONE AUTOMOTIVE					
		5 YISHUN INDUSTRIAL S' #01-20 NORTH SPRING B SINGAPORE 768161					
5a.			Remarks	MILITER BUILDING			
	B) THE REPAIR E THE REPAIRER V						

- FW: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED V... Page 1 of 1

- FW: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SLP7645S AND SGS7496Z ON 17/11/2017

From: Chin, Lee-Ying

To:

'assignments', 'Admin A'

Cc:

Fong, Andy-SY

Wednesday, 22 November, 2017 11:07:09 AM

Attachments:

SLP7645S - PRI.TIF

Hi LKK,

Please assist to survey, owner will leave vehicle around 1pm today.

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

COMMISSIONER FOR OATHS

ACRA NUMBER : 200911678H

GST REGISTRATION NUMBER : 200911678H

21/11/2017

Our Ref: SGS 7496Z (H) Your Ref: SLP 7645S

RIAZ QAYYUM ILLE HONSI NUS

DIRECTOR

TAN KOK SIANG (LLE HONSI LON

(ASSOCIATE)

TO:

AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way Tower 2 #07-16 Singapore 079120 ABOUL HALIM BIN ROSALAN (LLS HONS) UTAS (ASSOCIATE)

BY FAX (6415 3727) ONLY

Attn: Motor Claims Department

NOTICE OF ACCIDENT

Dear Sir

We are instructed by our client to notify you of a road traffic accident on 17 November 2017 at about 2220 hours along PIE EXIT TO CTE TOWARDS WOODLANDS involving our client's vehicle registration number SGS 7496Z and vehicle registration number SLP 7645S driven by you or your authorized driver at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client/ we proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client /we shall proceed to repair the vehicle without further reference to you.

Please be informed that the said vehicle can be inspected at:

Name of workshop

ONE ZONE AUTOMOTIVE

Address

5 YISHUN INDUSTRIAL ST 1 #01-20 NORTH SPRING BIZHUB

SINGAPORE 768161

Telephone no.

Yours faithfully

12,02

6710 4572

Fax No.:

6710 4571

Please let us hear from you by the stipulated time.

FOR SURVEYOR

Please initial here after completion of pre-repair Inspection. Thank you.

Appointed surveyor (Name & signature)

Date & time of inspection

cc Client

133 NEW BRIDGE ROAD #09-09 CHINATOWN POINT SINGAPORE 059413 TEL: 65340110 FAX: 65340220 EMAIL: RIAZQJUSTICE.COM.SG (PLEASE NOTE THAT OUR FAX IS NOT FOR SERVICE OF COURT DOCUMENTS) WWW.INJURYCLAIMS.SG



SINGAPORE ACCIDENT STATEMENT

IMPORTAN * NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 witholding 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

aroresaid	
	ACCIDENT STATEMENT
Date Of Report	20/11/2017 10:05
Date Of Accident	17/11/2017 22:20
Exact Location Of Accident	PIE EXIT TO CTE TOWARDS WOODLANDS
Country/State of Loss	SINGAPORE
建筑的设计,在一个工程的工程,不是一个工程的工程	DETAILS OF OWN VEHICLE

Vehicle Registration Number

SGS7496Z

Insured/Policyholder

Name Of Registered Owner

ASMAH BINTE AHMAD

NRIC No

S7236121J

Email Address

YANFIQ@YAHOO.COM.SG

Mobile Phone No

(LOCAL) +65-98354416

Alternative Phone No

OTHERS-98354416

Vehicle Particulars

Manufacturer

TOYOTA

Model

AXIO

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?

If No. Please state action to be taken

REPORTING ONLY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5089356780

Cover Note Number

Driver

Name of Driver

ASMAH BINTE AHMAD

NRIC No

S7236121J

Date Of Birth

05/10/1972

Occupation

INDOOR 18/10/1995

Date Of Driving Pass Driving Experience

22 YEARS AND 0 MONTHS

Gender

FEMALE

Mobile Number

Fax Number

(LOCAL) +65-98354416

Contact Number

OTHERS-98354416

EMail Address

YANFIQ@YAHOO.COM.SG

Address

BLK 627 WOODLANDS AVENUE 6

#12-868

Postcode

730627

Was driver an employee of the Insured's Company NO If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

AT NIGHT (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)

3

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

REFER ATTACHED

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

SLP7645S

Vehicle Make/Model/Colour

MAZDA

Details Of Properties

Name of Driver

C.NANDAKUMAR

NRIC/Passport Number

S1203029J 910910865

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 Pg. 1

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>regulate policy liability</u>.
- 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.
- 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.
- By the lodgment 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)

Lunderstand, 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2 Pg. 1

ETCH PLAN				
CAFARE T	MAIN WHILE	party		A × 8 GS 749
		al.		N: SIP 7645
growed &		1	PIE	
		Par	may	
				-
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it was slow	is awaing traffic	, in flor	It of me	ikam
tipped finck	, traffic was n	early slow	u and .	anditenty
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he didn't r	image to buse	an time	and orpi	singline for 1t.
we exchang	e details and too	c phatos.	we lef	f cheme after
about 10	min.			
-				
			OMBO BE	
CLARATION				3
e declare the foregoing partic	ulars are true in every respect.			Alamso -
cyndider's Signature	Driver's Signature		Reporting Cent	MILT re Personnel's Signature
& Time:	(If driver is not the policyhold Date & Time:	er)	Name: NRIC/FIN No.5/	

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID:	6121J	
Vehicle Details		
Vehicle No.:	SGS7496Z	
Vehicle to be Exported:	No	
Intended De-registration Date:	25 Apr 2018	
Vehicle Make:	TOYOTA	
Vehicle Model:	COROLLA AXIO 1.5X A	
Primary Colour:	Blue	
Manufacturing Year:	2007	
Engine No.:	1NZC487369	
Chassis No.:	NZE1416016189	
Maximum Power Output:	81.0 kW (108 bhp)	
Open Market Value:	\$12,417.00	
Original Registration Date:	22 Mar 2007	
First Registration Date:	22 Mar 2007	
Transfer Count:	3	
Actual ARF Paid:	\$13,659.00	
Intended PARF Rebate Details		
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:		
PARF Rebate Amount:	\$0.00	
Intended COE Rebate Details	Life as the property of the last of the la	
COE Expiry Date:	21 Mar 2022	
COE Category:	E - Open Category	
COE Period(Years):	5	
PQP Paid:	\$24,715.00	
COE Rebate Amount:	\$19,271.00	
Total Rebate Amount: Message	\$19,271.00	

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 25 Apr 2018

OK

MOTORCAR (Rear)

 $\begin{array}{lll} ACHOSCING \\ (1)Perhod(\varphi') & (2)Bernsel() & (3) Cock C_1 \\ (4) Int Cock Cock (BC) & \end{array}$

Rear Pertien

	orzien.				-
NAC	INC	Item	CON	AC	Qty
1137	993626	Rear Number Plate			
1138	993627	Rear Number Plate Base			
1139	993630	Rear Number Plate Garnish			
1140	993632	Rear Number Plate Lamp			
1141	992958	Rear Dumper	DO	1	
1142	993085	Rear Bumper Upper			
1143	993017	Rear Bumper Lower			
1144	993054	Rear Bumper Side			
1145	993103	Rear Bumper Tow Cover			
1146	992341	Rear Bumper Clips	NEC	V	
1147	992976				
1148	993068	The state of the s	CRK	1	
1149	993045		-	1	
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1154	993036				
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1156	993044		+-		\vdash
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1160	993339	Characteristics (Characteristics)	00	-	
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1103	993851	regiscotto tri opini un actualisti karaja turbani kanta anti-		+	-
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1165	993859		-	-	-
1166		Rear RH Taillamp	CRK	1	-
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1169	993554		0.0	P	-
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1171	991328	and the state of t	-	+	+
1172	The second section is the second	Bootlid Handle	-	+	+
1173		Boothd Moulding	-	+	+
1174	990376			-	+
1175				-	-
1176		Boothd Lamp LH	-	-	+
	-	to the state of th	-	-	+
1177			-	-	+
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1190					
	7 99-162	9 Tarlgate Lock			
119					
	100000000000000000000000000000000000000	1 Tartgate Kubber			
119	99405				

Vehicle No: SGS 7496 Z

		Vehicle No: SGS 749	16 Z		
VAC	INC	Item	CON	At	Qty
202	993784	Spare Tyre Board			
1203	994328	Spare Tyre Panel			
1204	995065	Spare Tyre			
1205	994326	Spare Tyre Lock Screw			
1206	993787	Spare Tyre Cover			
1207	995323	Triangle Breakdown Sign			
1208	990507	CD Changer Assay			
1209	990164	Antenna	-		
1210	990534	Centre Exhaust Pipe Assy			
1211	990532	Centre Exhaust Mounting			
1212		Rear Exhaust Pipe			
1213	993357	Rear Exhaust Chrome Pipe			
1214	993361	Rear Exhaust Mounting			
1215	003358			1	
1216	995223	Rear LH Chassis Member			
1217		Rear RH Chassis Member		+	
1218	993436				
1219	993449				
1220	993420		1		
1221	993431				
1222	993415				
1223	993425			1	
1224	993621				
1225	993933			1	
1226	994025			+	
1227	The second second second second second	The second of th		$^{+}$	
1228	- Service State Service Service Service			+	
1229				+	+
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1231		P. S. Charles and C. Carrier, National Conference on the Conference of the Conference on Conference			
1232		Rear RH Fender Inner Garnish			
1233	993429	Rear RH Fender Inner Shield	1 5		
1234	993622	Rear RH Mudflap			
1235	99393/	Rear RH Wheel Rim			
1236	994025	Rear RH Rim Cover			
1237					
1238	995162	2 Rear Fender Extension Panel Li	1		
1239	99340	Rear Fender Extension Panel R.	H		
1240	993430	Rear Fender Inner Top Garnish			
1241	99367	Rear Fender 1/4 Glass			
1242	99345	Rear Fender 1/4 Glass Rubber			
1243	99345	Rear Fender 1/4 Glass Scalant			
1244		Rear Windscreen, Glass	5		
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1252	99218	4 Fuel Tank Bracket			
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		* 3 days			
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...CLAIM SUBFOLDER...(Pending for Survey Report)

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt		Adj Subi	mitted	Ins Auth'ed	Status		
Main	23 Nov 2017 Edit Reg		22 Nov 2017 00:00 Edit Adj Rpt	S\$0.00 Edit Estima	ates	S\$0.00 View Rp	ot		Pending for Report Cancel Case	Survey	
	Main	Re	ference		Claim	Details	\neg r	Documer	nts	Show All	
CLAIM S	UBFOLDER DE	ETAILS	THE RESERVE TO SEC.	AND THE PERSON NAMED IN	- Charles		[Create	d by adjuster]		CHECKE S IS NOT S	
Insured:	CHINNAT	AMBY NANDAKU	MAR, ID: S12	030293			2017-1-1				
Main Claimant:	ASMAH B	INTE AHMAD,	ID: S7236121J								
Vehicle Re No.:	g. SGS749	6Z			Date	e of Loss:		017 22:00 - :59 onths and 26 Days	From LTA Reg [ate (Man Yr)]	
Claim Typ	e: TP / 697	: TP / 6975748604SG				cy/Cover e No.:	2100510637 (Comprehensive)				
Vehicle Re No. (Insured)	SLP7645	s				cy No. imant):	•				
X					Exc	7. 7. 7. 1					
Repairer:	One Zone 67104572	Automotive LLF	(HQ) 5 YISHU	N INDUSTRIA	AL STR	EET 1 #01	-20, NOR	TH SPRING BIZHL	JB, 768161 Yishu	in - Tel:	
Handling Insurer:		Pacific Insuranc									
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Ha	ndled by N	MOHD RA	SUL] [Final	Rpt due 12/1.	2/2017]	
ASSOCIA	TED MAIL RE	CEIVED							View All Com	pose Case Mai	
AIG_S	3 (04/12/2017)	TP GIA REPOR	Г								
ALL ASS	OCIATED TAS	sks⊡					View A	II Search Tasks	Create New Ta	sk Complet	
Due Da	te Priority	Type Task	Group Sub	ject Han	dler	Assign	ed By	Completed O	n Created	On Done	
No results	-0.0										

Claim Documents

*SGS7496Z (6975748604SG)

[SLP7645S]

TP

ASMAH BINTE AHMAD

NOV 17 2017 10:00PM

[CHINNATAMBY NANDAKUMAR]

One Zone Automotive LLP

Assessment Reports			1 per page	¥ ¥
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1	04/12/17 09:53	Accident Statement From:SC - Reg. No: SLP76455, Claimant: CHINNATAMBY NANDAKUMAR	1 Load	нтм
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2	08/01/18 16:48	Chassis Number	1 Load	JPG 🗹
3	08/01/18 16:48	General View	1 Load	JPG 🗹
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Assessment Reports		1 per	1 per page ▼		
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32	08/01/18 16:49	Photographs of Damaged Parts	0	Load JPG	•
33	08/01/18 16:49	Photographs of Damaged Parts	0	Load JPG	•
34	08/01/18 16:49	Photo After Spray	0	Load JPG	•
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54	08/01/18 16:49	Photo After Spray	0	Load JPG	•
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Documents Checklist

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
Show Remarks To: Handling Insurer	
Note: Remarks are private unless you show it to other parties,	

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS3/AIG17022257/R1BS2

Date:

02/05/2018

REFERENCE

Handling Insurer:

AIG Asia Pacific Insurance Pte. Ltd.

Policy No:

2100510637

Claimant Vehicle No :

SGS7496Z

Insured Vehicle No:

SLP7645S

Date of Loss:

17/11/2017

Nature of Claim:

TP

Claim No: 6975748604SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

Make & Model:

SGS7496Z

TOYOTA AXIO, 1.5 (A)

Engine No: Chassis No: 1NZC487369

Reg. Date: Colour:

Blue

Odometer:

NZE1416016189 129838 km

Engine Capacity:

1496 cc

1496

N/A

Market Value/New Car Price: Sum Insured (S\$):

Market Value/New Car Price

22/03/2007 (Man. Year: 2007)

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Fair Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes

Engine Modification:

No

Pre-accident Condition:

res

CONDITION OF TYRES

Front Tyre Size:

205/50ZR16

Rear Tyre Size:

205/50ZR16

Front Left Side:

Kumho 5 mm

Rear Left Side:

Kumho 5 mm

Front Right Side:

Kumho 5 mm

Rear Right Side:

Kumho 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:

22/11/2017

One Zone Automotive LLP (HQ)

Date Inspected:

22/11/2017 Inspected At:

5 YISHUN INDUSTRIAL STREET 1 #01-20, NORTH

SPRING BIZHUB

Singapore 768161

Estimated Period of Repair:

3.0 days

Adjuster:

MOHD RASUL

Manager:

CATHERINE CHONG KAI LING

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

No.	Qty Part No.	Particulars	Condition	Repairer's	Amount
1	1	*REAR BUMPER	Dented	0.00 F	*-F
2	1	*REAR BUMPER CLIPS	Necessary	0.00 F	*-F
3	1	*REAR BUMPER SIDE RETAINER	Cracked	0.00 F	*-F
4	1	*REVERSE SENSOR	Scratched	0.00 F	*-F
5	1	*REAR END PANEL	Repair	0.00 F	*-F
6	1	*REAR RH TAILLAMP	Cracked	0.00 F	*-F
7	1	*REAR RH TAILLAMP PANEL	Repair	0.00 F	*-F
F=Fr	anchise part.		_		
			Total Parts (S\$)	0.00	0.00

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >