

Surveyor:

REF: CS3 / ALG17004294 / KH02

ASSIGNMENT (Office)

From (Person): Chan Kun Chuan

ATG

Date/Time: 16 03 2018

Estimated Cost:

Bill to:

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SKF 6961A

Insured: SLP 88151

at Workshop m/s: Harmony Motor

Tel: 6482 2444

of: Bk 10 Park Ind Park 2A #02-12

Policy No:

Sum Insured:

Claim No: 409225415481003

Make of Veh: (Client's Record)

Excess:

D.O.A: 19-12-2017

Special Instruction:

US: \$ 4600.00

Third Parties:

Claimant:

Surveyor: PAA Automotive

Workshop: Harmony Motor

Date/Time:

Person Contacted:

Vehicle IN / OUT

Date/Time:

Confirmed with

Final Fig

days (Red \$ / %; Original 4 days)

Date/Time: 20/3/18

Submit Final Fig

2600/-

03 days (Red \$ 2000/- 43%; Original 4 days)

Date/Time	Action/Instruction
	RT 100 - 250000 (2000 4.100)
	20 03 18
	Bill PRS & Paper Survey together

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

RECEIVED

2018

Para(3) : Nett Value

<div>Market Value :</div> <div>Salvage Value :</div> <div>Nett Value :</div>	<div>Inspected/</div> <div>Evaluated by:</div>	<div>Fee Charged:</div> <div>Basic & Add</div> <div>Transport</div> <div>Photos</div> <div>Others</div> <div>Total</div>	<div>Date:</div>
<div>1) Date/Time 20/3/18</div> <div>File Pass to Typist</div>	<div>2) Date/Time</div> <div>File Return to</div>		
<div>3) Date/Time</div> <div>File Pass to</div>	<div>4) Date/Time</div> <div>File Return to</div>		
<div>5) Date/Time</div> <div>File Pass to</div>	<div>6) Date/Time</div> <div>File Return to</div>		

Catherine Chong (LKK Auto)

From: Chan, Kian-Chuan <Kian-Chuan.Chan@aig.com>
Sent: Friday, 16 March, 2018 3:46 PM
To: Admin-D (LKKAuto); Admin A
Cc: PRDSG.DFILE
Subject: ACCDT INVL SLP8815L & SKF6961A ON 19/12/17 OUR REF: #4092254154SG003# 022#
Attachments: 4092254154SG_14_03_2018_DOCUMENTS FROM THIRD PARTIES_B30278 -001.pdf; 4092254154SG_14_03_2018_DOCUMENTS FROM THIRD PARTIES_A37243 -001.pdf
Importance: High

Hi Catherine,

Received TP LOD.
Fyna, please.

Thank you.

Warmest Regards,

KC Chan
AIG

Claims | AIG Asia Pacific Insurance Pte. Ltd
78 Shenton Way #08-16 Singapore(079120)
Tel +(65) 6419 1945 | Fax +(65) 68357416
kian-chuan.chan@aig.com | www.aig.com.sg

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22/03/2002

ASS. REC. BY:

REF:

C93 / A1617021294 / Kb

Special Instruction:

VHU x Kye

Surveyor:
MaimenASSIGNMENT (Office)

From (Person):

Chin Lee Yung

of

A16

Date/Time:

22/22017 932am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKF 6961A

Insured:

SLP 8815L

at Workshop m/s

Harmony Motor

Tel:

64822444

of

Blk 10 AMK Ind Park 2A #02-12

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 19.12.2017

CA / REV / REP. / REV 24 HRS 'wp'

02.01.2018

H.O.D. Endorsement:

Date/Time:

22.12.2017 11:01am

Person Contacted:

Renee

Vehicle IN / OUT

Date/Time	Action/Instruction (X) Estimate
	SKF 6961A - C93 / AXA 13008122 / A1605303
	SLP 8815L - X
	Dismantle Part: 03-01-2018
	After repair: 05-01-2018

DCA 270413




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 : CS3/AIG17024294/Kb	
78 SHENTON WAY #08-16 CHARTIS BUILDING SINGAPORE 079120			Date : 22-12-2017	
			Code : AIG	
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SLP 8815L	Veh. Inspected	SKF 6961A	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From	CHIN LEE YING	Assign Date	22/12/2017	
2. Vehicle Particulars & Condition				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
3. Conditions 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. Ver Description of Damages				
5. General Information				
Accident Date	19/12/2017	Inspection Date	02/01/2018	
Survey held at	HARMONY MOTOR (AMK) PTE LTD BLK 10 ANG MO KIO IND. PARK 2A #02-12 AMK AUTOPOINT SINGAPORE 568047			
5a. Remarks				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.				

**- FW: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED
VEHICLE SLP8815L AND SKF6961A ON 19/12/2017**

From: Chin, Lee-Ying
To: assignments, Admin A
Cc: Fong, Andy-SY
Sent: Friday, 22 December, 2017 9:32:59 AM
Attachments:  FaxC249.tif  Letter of Reject.pdf  Annex A.PDF

Hi LKK,

Kindly assist to survey.

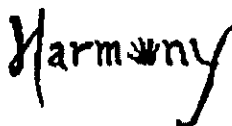
Thanks.

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

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**HARMONY MOTOR (AMK) PTE LTD**

10 Ang Mo Kio Industrial Park 2A #02-12 AMK AutoPoint Singapore 568047
Tel : +65 6482 2444 Fax : +65 6482 2224 Business Reg No : 200915481C

[] By Fax / [] Email

Attention : Motor Claims Dept
AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way
#07-16
Singapore 079120

Date : 21/12/17
Our Ref : SKF6961A
Your Ref : SLP8815L

Dear Sir/Madam

**For Pre-Repair Survey matter,
kindly correspond via FAX & CALL only
FAX : 64822 224
CALL : 64822 444**

NOTIFICATION OF ACCIDENT

ACCIDENT INVOLVING VEHICLES SKF6961A & SLP8815L
ON 19/12/2017 ALONG Carpark of Jurong West Street 91 & 92

We are instructed by Ms. Pang Yan Ming Cynthea to notify you of a road accident mentioned above.

As a result of the accident, our client's vehicle has been damaged.

Please let us know within 2 working days of your receipt of this notice whether you would like to conduct a Pre-Repair Survey (PRS) of the damaged vehicle before we commence repair.

Kindly provide us with a list of at least 10 surveyors for our consideration.

Our client's motor vehicle, SKF6961A is now at our workshop, kindly call us to make an appointment for the Pre-Repair Survey.

Address : 10 Ang Mo Kio Industrial Park 2A
#02-12 AMK AutoPoint
Singapore 568047

Contact : 64822444 (Renee / Eunice) or 97334434 (Quin.C)

Yours truly,

Motor Claims Dept

Inspection Date : _____	Time : _____
Inspected By : _____	
Signature : _____	

Survey Department Check List (Case Handler)

Reference No. :

Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

Admin (): 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 (): 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

✓			
---	--	--	--

(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

--	--	--	--

Check By:

--

--

Case Handler Date

*C: Critical *N: Non-Critical

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	19/12/2017 14:45
Date Of Accident	19/12/2017 09:55
Exact Location Of Accident	CARPARK OF JURONG WEST ST 91 & 92
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF6961A
Insured/Policyholder	
Name Of Registered Owner	PANG YAN MING CYNTHIA
NRIC No	S1651202H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97877027
Alternative Phone No	OTHERS-90221206

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	NEW GOLF
Exact Purpose for which vehicle was being used at time of accident	PERSONAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
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	5094274062
Cover Note Number	

Driver

Name of Driver	TAN CHIN YAM
NRIC No	S1234429E
Date Of Birth	12/08/1957
Occupation	INDOOR
Date Of Driving Pass	05/03/1980
Driving Experience	37 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90221206
Fax Number	
Contact Number	
EMail Address	BTCY12@GMAIL.COM

Address	BLK 123 #03-121 RIVERVALE DRIVE
Postcode	540123
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800 - 3438999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ATTACHED ACCIDENT SKETCHPLAN AND POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP8815L
Vehicle Make/Model/Colour	TOYOTA/ ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan

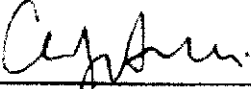
SKETCH PLAN


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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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. The 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)

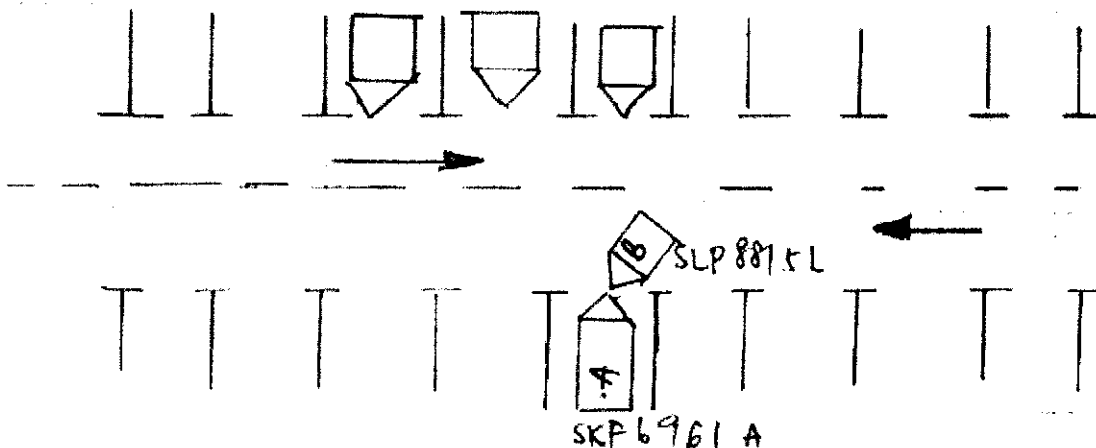
I understand, acknowledge, agree and consent that:

- (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 insurer 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

 19.12.2017 14:25H 3
 Witnessed by Reporting Centre Personnel **SEW HOON**



Sketch Plan #2


Describe Circumstances of the Accident (Continue)

Refer to Police Report -
T/20171219/2066

Declaration

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

I/We declare the foregoing particulars are true



Policyholder's Signature / Date
& Time

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

19. 12. 2017 14:25 hrs
Witnessed by Reporting Centre
Personnel SIEW HUON

Note: Please note that your insurer may have 14 days Time Frame for you to submit an Own Damage Claim under your own policy. Please check your policy for more information.

☐ Claim Own Policy ☐ Claim TP ☒ Claim OD/TP at other workshop ☐ Reporting Only



**SINGAPORE
POLICE FORCE**



T/20171219/2066

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No. T/20171219/2066

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/12/2017 13:15		Vide Report No.:		Station Diary No.: 68	
Informant's Particulars					
Name of Informant: TAN CHIN YAM			Address: APT BLK 123 RIVERVALE DRIVE #03-121 SINGAPORE 540123		
ID Type / ID No.: NRIC NO / S1234429E			Contact No.: Home/Office: Mobile: 90221206		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 60	Date of Birth: 12/08/1957	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: RETIRED			Driving Licence Information: Class: 3 Date of Expiry:		

General Information on the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 19/12/2017 09:55	Type of Location: carpark
Location: Along Road 1 Traveling Toward Road 2 JURONG WEST STREET 91 Jurong west street 91 and Jurong west street 92 carpark				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle A: SKF6961A						
SKF6961A	Car				Slightly Damaged	0
SLP8815L	Car					0



**SINGAPORE
POLICE FORCE**



T/20171219/2066

2 of 3

Report No. T/20171219/2066

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

CONTINUATION OF REPORT

Brief Details.

On the said mention date and time, I parked my vehicle at the said incident location. Upon coming back from my breakfast, I discovered scratches and dent on my right bumper of my said vehicle. I immediately download my built in camera and saw vehicle (2) turning out from a parking lot and hit onto my vehicle and fled the scene. The built in camera video shows the time is 0952hrs of the incident that happened. I wish to state that the vehicle (2) did not stop nor did the driver put any notice at all. This is the first time such incident had happen and I have no suspect in mind. That is all.



**SINGAPORE
POLICE FORCE**



T/20171219/2066

3 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20171219/2066

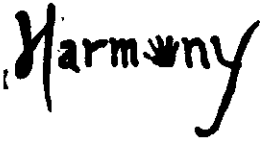
CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: F / Sgt 2 LEE CHOON BOON	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/12/2017 13:15
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case: SN 085
Authentication Stamp NP168	Signature: Singapore Police Force



HARMONY MOTOR (AMK) PTE LTD

10 Ang Mo Kio Industrial Park 2A #02-12 AMK AutoPoint S'pore 568047

Tel : 64822444 Fax : 64822224 Email: hmpl@harmony.com.sg

486571

Date : 09/03/2018

Attn : Motor Claims Dept
AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way
#07-16
Singapore 079120

Our Ref : A-316
Your Ref : SLP8815L

Dear Sir/Madam

ACCIDENT INVOLVING VEHICLES SKF6961A & SLP8815L
ON 19/12/2017 ALONG Carpark of Jurong West Street 91 & 92

We refer to the captioned accident.

We hereby represent the registered owner of SKF6961A, who was involved in the captioned accident. Our client's motor vehicle was surveyed by an independent licensed surveyor before repair

As the accident was caused by the negligence of your Insured's driver, we are putting forward this claim for your consideration.

a.	Cost of Repair	\$ 4,922.00
b.	Loss of Use (\$80/day x 4days)	\$ 320.00
c.	Survey Fee	\$ 515.00
d.	LTA search	\$ 7.45
		<u>\$ 5,764.45</u>

We would appreciate if you could look into the matter as soon as possible.
We support our claim with documents enclosed.

Thank you and best regards

Yours truly,


Quin. C. Chng
Mobile : 97334434
Email : quinc@harmony.com.sg

APK 7131 1550C

RECEIVED BY AIG Claims Dept	
13 MAR 2018	
CL No.	11692254150
ADT	56-003

LETTER OF AUTHORISATION

ACCIDENT ON 19/12/2017
ALONG / AT Carpark of Jurong West Street 91 & 92
INVOLVING VEHICLES NO SKF6961A AND SLP8815L

I/We Ms Pang Yan Ming Cynthea NRIC No : S1651202H
OF Blk 123 Rivervale Drive #03-121 Singapore 540123

hereby authorise Harmony Motor (AMK) Pte Ltd, my repairer, to give all further instructions on my/our behalf concerning the said claim and as such, all future correspondence should be addressed to the said firm.

Appoint my/our repairer as my/our attorney and to sign any discharge voucher or any other documents in connection with this claim on my/our behalf and that the agreed settlement sum including the Loss of Use be made in favour of my/our repairer's name.

Appoint my/our repairer to engage a licensed vehicle surveyor on my/our behalf to determine reasonable costs of repair and period of repair and to begin or commence repairs to my/our motor vehicle.

Instruct solicitor M/s _____ on my/our behalf to negotiate a settlement office or attend Court in connection with my/our claim, if necessary. I/We shall give my/our full co-operation and support for the said claim.

Confirm that in the event of partly successful or unsuccessful or cannot be proceeded with and/or if any judgment or settlement is not honored or satisfied by third party. I/We agreed to pay the repairer the sum of monies (as agreed) or as certified by the surveyor appointed, being the cost of repair, survey fee and/or any other expenses reasonably incurred. Repairer may use the recovered amount from my/our claim for Loss of Use partially offset the difference.

For the avoidance of doubt, the owner shall be responsible for the payment of all repair costs, recovery costs (including legal fees) incurred.

Dated this 5/1/2018

SIGNATURE 

NAME Ms Pang Yan Ming Cynthea

NRIC No S1651202H

WITNESS 

NAME 

NRIC No _____



Harmony Motor (AMK) Pte Ltd

Blk 10 Ang Mo Kio Industrial Park 2A
#02-12 AMK AutoPoint Singapore 568047
Tel : 6482 2444 Fax : 6482 2224
Email : amk@harmony.com.sg
Business & GST Reg. No : 200915481C

TO : S1651202H

Pang Yan Ming Cynthea
BLK 123 Rivervale Drive
03-121
SINGAPORE 540123
TEL: FAX:
PH: 97877027
ATTN:

TAX INVOICE

Number : IVB0012325
Date : 20/02/2018
Vehicle No : SKF6961A
Mileage :
Term: CASH
Model : VOLKSWAGON Golf 6
Chassis : WVVWZZZ1KZCW311359

DESCRIPTION	QTY	U_PRICE	DISC	AMOUNT
A-316 (DOA 19/12/2017) REPAIR COST	1.0	4,600.00	0.00	4,600.00
SUBTOTAL				4,600.00
SINGAPORE DOLLARS : FOUR THOUSAND NINE HUNDRED TWENTY-TWO AND CENTS ZERO ONLY				0.00
				Less Excess
				SUBTOTAL
				GST 7.00%
				TOTAL

Date of accident : 19/12/2017 09:55 AM. Place : Carpark of Jurong West Street 91 & 92

E. & O. E.

Harmony Motor (AMK) Pte Ltd



CUSTOMER SIGNATURE

AUTHORISED SIGNATURE

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No : M4-0006529-2

Print Date/Time 20 Dec 2017 / 15:00:51

Receipt Date/Time 20 Dec 2017 / 14:59:21

Tax Invoice/Receipt

Receipt No : ITNET-00000-171220-001426

Previous Receipt No :



Result of Insurance Enquiry - SLP8815L

As at 19 Dec 2017/09:55:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1 Insurance Enquiry - SLP8815L

Enquiry Fee

20171220145752867122

	7.00	0.49	7.49
Sub-Total	7.00	0.49	7.49
Total Before Rounding	7.00	0.49	7.49
Rounding Difference			0.04
Total Amount Payable			7.45
Paid By			
20171220145814800	Direct Debit: eNETS Debit (Internet Banking)		7.45
Total			7.45
Cash Change			0.00
Tendered Amount			7.45
Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!



PAR Automotive Consultancy

Regn. No: S2986974L

Thomson Rd Post Office PO Box 029 Singapore 915701. Tel : 645 31173, Fax : 645 36131.

Report No: 0067-18-HMP

18 January 2018

Pang Yan Ming Cynthia
Blk 123 #03-121 Rivervale Drive
Singapore 540123

INVOICE No. 0067-18-HMP

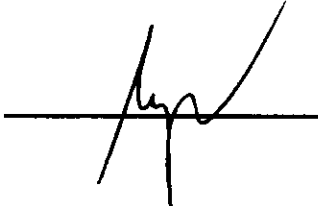
Vehicle No. SKF6961A

<u>S/NO.</u>	<u>SERVICES RENDERED</u>	<u>Amount due</u>
1	Being accident vehicle appraisal services, transport, photographs and re-inspection (work in progress and post repair inspection).	\$515.00
Total amount payable		<u>\$515.00</u>

Kindly cross your cheque in favour of "PAR Automotive Consultancy"

We thank you in anticipation for your prompt payment.

PAR Automotive Consultancy



PAR Automotive Consultancy

Regn. No. S2906974L

Thomson Rd Post Office PO Box 029 Singapore 915701. Tel : 645 31173, Fax : 645 36131.

Report No: 0067-18-HMP

18 January 2018

ACCIDENT VEHICLE SURVEY REPORT

Pang Yan Ming Cynthia
Blk 123 #03-121 Rivervale Drive
Singapore 540123

VEHICLE INFORMATION:

<i>Vehicle Reg No.:</i>	SKF6961A	<i>Odometer:</i>	72515km
<i>Make & Model:</i>	Volkswagen New Golf 1.4	<i>Colour:</i>	Black
<i>Chassis number:</i>	WVWZZZ1KZCW311359	<i>Date of accident:</i>	19/12/2017
<i>Year of Regn.:</i>	27/06/2012	<i>Date inspected:</i>	02/01/2018
<i>Repairer at:</i>	Harmony Motor Pte Ltd 10 Ang Mo Kio Ind Park 2A AMK AutoPoint #02-12 Singapore 568047		

STATIC CHECKS, where applicable:

<i>Steering :</i>	serviceable
<i>Footbrake :</i>	serviceable
<i>Handbrake :</i>	serviceable
<i>Paintwork :</i>	Good
<i>General condition :</i>	Good

TIRE CONDITION:

	<u>LH / Make</u>	<u>RH / Make</u>	<u>Size</u>
<i>Front:</i>	5mm/Falken	5mm/Falken	205/55R16
<i>Rear:</i>	5mm/Falken	5mm/Falken	205/55R16

POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the front RH portion.
Please see details as described in the Annex for parts and labour.

REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

Parts and Labour Assessment

Report No: 0067-18-HMP

Vehicle No: SKF6961A

Description of part	Qty	Condition as inspected	Repairer's estimate	Our adjustment
Front headlamp RH	1	fractured	<i>Sm</i> 1,209.22	1,209.22 X
Front head lamp bracket RH	1	bent	<i>Sm</i> 37.33	37.33 X
Front grille	1	fractured	421.70	421.70
Front grille logo "Volkswagen"	1	necessary	91.33	91.33
Front bumper	1	squashed	1,207.60	1,207.60
Front bumper fog lamp garnish RH	1	deformed	118.25	118.25
Front bumper fog lamp RH	1	fractured	<i>Sm</i> 165.50	165.50 X
Front bumper lower centre grille	1	deformed	<i>Sm</i> 174.75	174.75 X
Front bumper reinforcement	1	bent	487.50	487.50
Front bumper top retainer	1	deformed	160.99	160.99
Front bumper side retainer RH/LH	2	necessary	<i>Sm</i> 66.22	66.22 X
Front support panel	1	repair	861.11	0.00
Front number plate c/w frame	1	bent	50.00	50.00 <i>95Sm</i>
<i>Subtotal before discount</i>			5,051.50	4,190.39
<i>Percentage discount 0% and 0%</i>			0.00	0.00
Sub-total			5,051.50	4,190.39
Parts-total			5,051.50	4,190.39

LABOUR

1. To straighten and panel beating bonnet, front support panel, front fender RH/LH and front RH frame members. To re-align front support panel. To remove and refit above parts.

1,000.00 660.00 *400*

2. To putty, re-spray painting and polish affected areas.

1,200.00 800.00 *280*

3. To check and rectify wiring system.

80.00 50.00 *20*

4. To rust proof affected areas.

Sm 90.00 60.00 X

Labour total 2,370.00 1,570.00

Parts & Labour total 7,421.50 5,760.39

Results of inspection of the accident vehicle are as shown above.

We have taken into consideration the age and condition of the vehicle in our recommendation.

Hence, the recommended cost of repairs based on LUMP SUM repairs is :
and the recommended number of working days for the repairs is :

\$4,600.00

16
B J Loi (I Eng., MIM, AIRTE)
Automotive Appraiser

3

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.

Date Of Report	19/12/2017 14:45
Date Of Accident	19/12/2017 09:55
Exact Location Of Accident	CARPARK OF JURONG WEST ST 91 & 92
Country/State of Loss	SINGAPORE

Vehicle Registration Number	SKF6961A
Insured/Policyholder	
Name Of Registered Owner	PANG YAN MING CYNTHIA
NRIC No	S1651202H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97877027
Alternative Phone No	OTHERS-90221206

Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	NEW GOLF
Exact Purpose for which vehicle was being used at time of accident	PERSONAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
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	5094274062
Cover Note Number	

Driver	
Name of Driver	TAN CHIN YAM
NRIC No	S1234429E
Date Of Birth	12/08/1957
Occupation	INDOOR
Date Of Driving Pass	05/03/1980
Driving Experience	37 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90221206
Fax Number	
Contact Number	
Email Address	BTCTY12@GMAIL.COM

Address	BLK 123 #03-121 RIVERVALE DRIVE
Postcode	540123
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800 - 3438999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ATTACHED ACCIDENT SKETCHPLAN AND POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

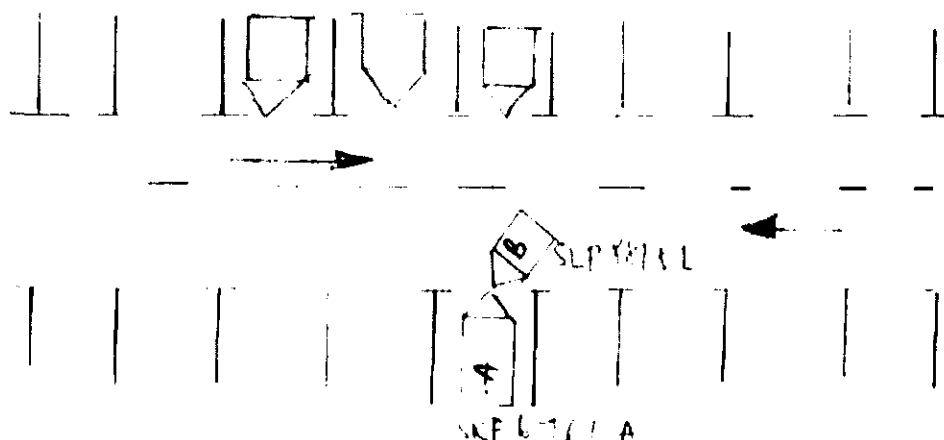
Vehicle Registration Number	SLP8815L
Vehicle Make/Model/Colour	TOYOTA/ ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

N6. Of Passenger (Including Driver)

SKETCH PLAN

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 Authorized Driver.
3 Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts
4 may allow insurance companies to revoke policy liability.
5 The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of the insurance
6 companies.
7 Any false statement may be referred to the Police for investigation.
8 The report will be forwarded by the Insurers to the GIA Records Management Centre established by the General Insurance
9 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
10 interested parties.
11 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
12 report being made available aforesaid.
13 **B. Consent under the Personal Data Protection Act (PDPA)**
14 I understand, acknowledge, agree and consent that:
15 (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose
16 and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or
17 possessed by my insurer (collectively the "Personal Information and disclose and transfer such Personal Information to all insurer(s)
18 who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be
19 collectively referred to as the "Insurers"); the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant
20 government agency/authority (such as the police), for the purpose(s) of
21 (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations
22 relating to the claims;
23 (ii) investigating the accident and/or my claims,
24 (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
25 (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could
26 involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of
27 envelopes/mail packages); and/or
28 (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
29 (collectively the "Purposes")
30 (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect
31 use, disclose and/or process my Personal Information for one or more of the above Purposes; and
32 (c) My Personal Information may/can be disclosed by any of the Insurer and/or GIA to their third party service providers or agents
33 (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

19.12.2014 10:25hr S
Witnessed by Reporting Centre
Personnel STEW MOON



Sketch Plan #2

Describe Circumstances of the Accident (Continue)

Refer to Police Report.

T/20191219/2066

Declaration

We declare the foregoing particulars are true in every respect.

Coyler
Policyholder's Signature / Date
& Time

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

19. 12. 2017 14:25 hrs
Witnessed by Reporting Centre
Personnel SIEW HUON

Note: Please note that your insurer may have 14 days Time Frame for you to submit an Own Damage Claim under your own policy. Please check your policy for more information.

☐ Claim Own Policy

() Claim TP

☒ Claim OD/TP at other workshop

() Reporting Only



**SINGAPORE
POLICE FORCE**

T/20171219/2088

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No. T/20171219/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/12/2017 13:15		Video Report No.:		Station Diary No.: 68	
Name of Informant: TAN CHIN YAM		Address: APT BLK 123 RIVERVALE DRIVE #03-121 SINGAPORE 540123			
ID Type / ID No.: NRIC NO / S1234429E		Contact No.: Home/Office: Mobile: 90221208			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 60	Date of Birth: 12/08/1957	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: RETIRED		Driving Licence Information: Class: 3		Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 19/12/2017 09:55	Type of Location: carpark
Location: Along Road 1 Traveling Toward Road 2 JURONG WEST STREET 91 Jurong west street 91 and Jurong west street 92 carpark				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

SKF0001A	Car				Slightly Damaged	0
SLP8815L	Car					0



**SINGAPORE
POLICE FORCE**

T/20171219/2088

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

2 of 3

Report No. T/20171219/2088

CONTINUATION OF REPORT

Brief Details.

On the said mention date and time, I parked my vehicle at the said incident location. Upon coming back from my breakfast, I discovered scratches and dent on my right bumper of my said vehicle. I immediately download my built in camera and saw vehicle (2) turning out from a parking lot and hit onto my vehicle and fled the scene. The built in camera video shows the time is 0952hrs of the incident that happened. I wish to state that the vehicle (2) did not stop nor did the driver put any notice at all. This is the first time such incident had happen and I have no suspect in mind. That is all.



**SINGAPORE
POLICE FORCE**



T/20171219/2066

3 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20171219/2066


CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 2 LEE CHOON BOON	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/12/2017 13:15
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case:
Authentication Stamp NP168	Signature: SN 085


 Signature: _____
 Singapore Police Force

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5094274062

Cover : drive CLASSIC

- | | |
|--|-------------------------|
| 1. Index mark and Registration Number of Vehicle | : SKF6961A |
| Chassis Number | : WVWZZZ1KZCW311359 |
| 2. Name of Policyholder | : PANG YAN MING CYNTHIA |
| 3. Effective Date of Insurance | : 22 Sep 2017 |
| 4. Expiry Date of Insurance | : 21 Sep 2018 |

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

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 reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TAN CHIN YAM
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: DBS BANK LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : GENIE FINANCIAL SERVICES PTE LTD (00000573508)

Date of Issue : 22 Sep 2017 15:20 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorized Officer



Chief Executive

...CLAIM SUBFOLDER...(Pending for Survey Report)

PRI

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	27 Jan 2018 Edit Reg		16 Mar 2018 00:00 Edit Adj Rpt	S\$2,600.00 Edit Estimates	S\$2,600.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
-------------	------------------	----------------------	------------------	--------------------------



































CLAIM SUBFOLDER DETAILS	[Created by adjuster]
Insured:	Peh Leng See , ID: S1178694D
Main Claimant:	PANG YAN MING CYNTHIA , ID: S1651202H
Vehicle Reg. No.:	SKF6961A
Claim Type:	TP / 4092254154SG
Vehicle Reg. No. (Insured):	SLP8815L
Repairer:	HARMONY MOTOR (AMK) PTE LTD (HQ) Block 10, Ang Mo Kio Industrial Park 2A, #02-12, AMK AutoPoint, 568047 Ang Mo Kio - Tel: 64822444
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Chan, Kian-Chuan] Kian-Chuan.Chan@aig.com
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 06/02/2018]

ASSOCIATED MAIL RECEIVED	View All Compose Case Mail
<ul style="list-style-type: none"> AIG_SG (29/01/2018): No OI GIA Report AIG_SG (29/01/2018): Request To Upload TP GIA Report 	

ALL ASSOCIATED TASKS	View All Search Tasks Create New Task Complete																				
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Due Date</th> <th style="text-align: left;">Priority</th> <th style="text-align: left;">Type</th> <th style="text-align: left;">Task Group</th> <th style="text-align: left;">Subject</th> <th style="text-align: left;">Handler</th> <th style="text-align: left;">Assigned By</th> <th style="text-align: left;">Completed On</th> <th style="text-align: left;">Created On</th> <th style="text-align: left;">Done?</th> </tr> </thead> <tbody> <tr> <td colspan="10">No results.</td> </tr> </tbody> </table>	Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?	No results.										
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?												
No results.																					

Claim Documents

***SKF6961A (4092254154SG)**
[SLP8815L]
TP
PANG YAN MING CYNTHIA
Dec 19 2017 9:00AM
[Peh Leng See]
HARMONY MOTOR (AMK) PTE LTD

Upload Documents			Upload Photos			Compose New Letter			Upload Video			Upload Audio			View View in Browser <input type="button" value="v"/>		
Photos/Images												3 per page <input type="button" value="v"/>		<input checked="" type="checkbox"/>			
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)											Thumbnail	Print			
1	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
2	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
3	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
4	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
5	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
6	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
7	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
8	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
9	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
10	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
11	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
12	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
13	27/01/18 12:49	General View											Load JPG	<input checked="" type="checkbox"/>			
14	27/01/18 12:49	Chassis Number											Load JPG	<input checked="" type="checkbox"/>			
15	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
16	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
17	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
18	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
19	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
20	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
21	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
22	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
23	27/01/18 12:53	Photographs of Damaged Parts											Load JPG	<input checked="" type="checkbox"/>			
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36	27/01/18 12:53	Photographs of Damaged Parts	1	Load JPG	<input checked="" type="checkbox"/>
37	27/01/18 12:53	Photographs of Damaged Parts	1	Load JPG	<input checked="" type="checkbox"/>
38	27/01/18 12:53	Photographs of Damaged Parts	1	Load JPG	<input checked="" type="checkbox"/>
39	27/01/18 12:53	Photographs of Damaged Parts	1	Load JPG	<input checked="" type="checkbox"/>
40	27/01/18 12:53	Photographs of Damaged Parts	1	Load JPG	<input checked="" type="checkbox"/>
41	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
42	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
43	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
44	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
45	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
46	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
47	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
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50	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
51	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
52	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
53	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>
54	27/01/18 12:53	Photo After Spray	1	Load JPG	<input checked="" type="checkbox"/>

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; width: 500px; margin: 5px 0;"></div> <div style="text-align: right; margin-right: 5px;"> ^ v </div>
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>

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/AIG17024294/KTBE2

Date: 20/03/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 1700025329
Claimant Vehicle SKF6961A **Insured Vehicle No :** SLP8815L
No :
 Date of Loss: 19/12/2017 Nature of Claim: TP Claim No: 4092254154SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SKF6961A**
 Make & Model: VOLKSWAGEN NEW GOLF, 1.4 TSI (A) Engine No: HIDDEN
 Reg. Date: 01/06/2012 (Man. Year: 2012) Chassis No: WWWZZZ1KZCW311359
 Colour: Metallic Black Odometer: 72515 km
 Engine Capacity: 1390 cc
 Market Value/New Car Price: N/A
 Sum Insured (S\$): **Market Value/New Car Price**

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes
 Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 205/55 R16 Rear Tyre Size: 205/55 R16
 Front Left Side: Falken 2 mm Rear Left Side: Falken 4 mm
 Front Right Side: Falken 2 mm Rear Right Side: Falken 4 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	5,051.50	2,532.37	2,519.13	49.87
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,370.00	700.00	1,670.00	70.46
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	7,421.50	3,232.37	4,189.13	56.45
Approved Total (Overridden) (S\$)		2,600.00		
(S\$)	7,421.50	2,600.00	4,821.50	64.97
+ GST 7.00/7.00% (S\$)	519.51	182.00	337.51	64.97
Nett Amount (S\$)	7,941.01	2,782.00	5,159.01	64.97

INSPECTION

Date of Assignment: 16/03/2018
 Date Inspected: 02/01/2018 Inspected At: HARMONY MOTOR (AMK) PTE LTD (HQ)
 Block 10, Ang Mo Kio Industrial Park 2A,
 #02-12, AMK AutoPoint
 Singapore 568047
 Estimated Period of Repair: 3.0 days

Adjuster: KENNETH KONG**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

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT HEADLAMP RH	Serviceable	1,209.22 F	*- F
2	1		*FRONT HEAD LAMP BRACKET RH	Serviceable	37.33 F	*- F
3	1		*FRONT GRILLE	Fractured	421.70 F	*421.70 F
4	1		*FRONT GRILLE LOGO VOLKSWAGEN	Necessary	91.33 F	*91.33 F
5	1		*FRONT BUMPER	Squashed	1,207.60 F	*1,207.60 F
6	1		*FRONT BUMPER FOG LAMP GARNISH RH	Deformed	118.25 F	*118.25 F
7	1		*FRONT BUMPER FOG LAMP RH	Serviceable	165.50 F	*- F
8	1		*FRONT BUMPER LOWER CENTER GRILLE	Serviceable	174.75 F	*- F
9	1		*FRONT BUMPER REINFORCEMENT	Bent	487.50 F	*487.50 F
10	1		*FRONT BUMPER TOP RETAINER	Deformed	160.99 F	*160.99 F
11	2		*FRONT BUMPER SIDE RETAINER RH/LH	Not Necessary	66.22 F	*- F
12	1		*FRONT SUPPORT PANEL	Repair	861.11 F	*- F
13	1		*FRONT NUMBER PLATE C/W FRAME	Bent	50.00 FS	*45.00 FS
Total Parts (S\$)					5,051.50	2,532.37

F=Franchise part. S=SpcNett.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO STRAIGHTEN AND PANEL BEATING, BONNET, FRONT SUPPORT PANEL, FRONT FENDER RH / LH AND FRONT RH FRAME MEMBERS. TO RE-ALIGN FRONT SUPPORT PANEL. TO REMOVE AND REFIT ABOVE PARTS	New	1,000.00	400.00
2	TO PUTTY, RE-SPRAY PAINTING AND POLISH AFFECTED AREAS	New	1,200.00	280.00
3	TO CHECK AND RECTIFY WIRING SYSTEM	New	80.00	20.00
4	TO RUST PROOF AFFECTED AREAS	New	90.00	0.00
Gross Labour Cost (S\$)			2,370.00	700.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >