Recommended Miscellaneous Items There are no new miscellaneous items selected.

Re	commended Labour			
No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING.	New	100.00	50.00
2	SPRAY PAINT ON AFFECTED AREA.	New	100.00	80.00
		Gross Labour Cost (S\$)	200.00	130.00
	Report was	unsubmitted during this print-out.		

< END OF ESTIMATES >

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 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 lod-pament 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

A	C	CI	D	E١	IT	ST	Αī	13	М	=	V	ī

19/05/2016 16:11 Date Of Report

19/05/2016 10:00 Date Of Accident

CTE SLIP ROAD > OUTRAM RD Exact Location Of Accident

Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

SHC8325A Vehicle Registration Number

Insured/Policyholder

COMFORT TRANSPORTATION PTE LTD Name Of Registered Owner

199303821R Co Reg No

fleetsafety@cdgtaxi.com.sg Email Address

Mobile Phone No

Office-65508768 Alternative Phone No.

Vehicle Particulars

HYUNDAI Manufacturer

SONATA-2.0 (A) Model

Exact Purpose for which vehicle was being used

at time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

Third Party If No. Please state action to be taken

Taxi Vehicle Category

Insurance Company

India International Insurance Pte Ltd Name of Insurance Company

Third Party Fire and/or Theft Type Of Coverage

Yes Fleet Policy

MCOM0016 Policy Number

Cover Note Number

Driver

IBRAHIM B SALLEH Name of Driver

S1466444J NRIC No 28/05/1961 Date Of Birth Outdoor Occupation 05/06/1984 Date Of Driving Pass

31 Years And 11 Months Driving Experience

Male Gender

Mobile Number Fax Number

Contact Number NOEMAIL EMail Address

Address

614 BEDOK RESERVOIR ROAD #06-1198

S470614

Postcode

Was driver an employee of the Insured's Company No

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

Other - TAXI DRIVER

General Information of the Accident

Type Of Accident

Weather Conditions

Road Surface

Hit and run

Clear

Dry

Other Information

Was any foreign vehicle involved in this accident?

Was any body injured in the Accident?

Was any other material or property damaged?

Was there any video captured by Car Camera?

Number of Passengers (Including Driver)

No

No Yes

Yes

2

Details of Police Action

Was the accident reported to the police?

Yes

If Yes, Please state which Police Station

Police Station Name

Police Station Address

Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Pasir Ris Neighbourhood Police Centre

ROAD: 1 Pasir Ris Drive 4 , POSTCODE: 519457 , COUNTRY: Singapore

TEL NO: 1800-5852999 - FAX NO: 65855261

Circumstances of Accident

PLS SEE ATTACHED POLICE REPORT

Are accident photos available for attachment?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage No. Of Passenger (Including Driver) SKZ5689M

AIG Asia Pacific Insurance Pte. Ltd.

NOT SURE

Details of Witness

Name

Phone Number

Email Address

Nur Syafigah (LKKAuto) From: Monday, 12 June, 2017, 6:48 PM AN Sent: Jim Wong See Pah To: Admin A; Hsiao Tong (LKKAuto); Nur Syafiqah (LKKAuto) Cc: IMPORTANT NOTICE Your ref: SH 8352P - ACCIDENT INVOLVING VEHICLES GBB 6987D AND SH 8352P Subject: Please report <u>correctly</u> the ONi07(04,2017 into speed up the claims process. Attachments: This Formmest be complete BB 69870 estrateMENT. Dan uthorised Driver. Information provided must be as truthful and accurate as possible. Any wiful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability. ue and acceptance of this Formby insurance companies is not an admission of policy liability on the part of the insurance "WITHOUT PREJUDICE" Your ref: SH 8352P Our ref: CC3/EQI17007114/H1da3 be referred to the Police for investigation. 5. 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. 7. By the ladgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the Dear Jim Wongort being made available aforesaid. 8. Consent under the Personal Data Protection Act (PDPA) ACCIDENT INVOLVING VEHICLES GBB 6987D AND SH 8352P ON 07.04.2017 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 We refer to the above matter (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 "Insurars"), the Insurers' law yers/law firms, the Monetary Authority of Singapore and any relevant We are of the opinion that this is a case of liability unclear. There is no conclusive evidence yet to substantiate either party's version. Enclosed herewith in this email is a copy of our insured's accident report for your perusal. (ii) investigating the accident and/or my claims: We are in a course of investigating into the circumstances of the accident. After verifying further with our OI we will revert with our opinion on the cause of the accident. Kindly do not refer to any party for legal assistance until you heard further from usud/or (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. As per our principal instruction, kindly provide us a copy of your client video footage. may are permitted to collect use, disclose and/or process my Personal Information for one or more of the above Purposes; and We shall revert upon hearing from you be disclosed by any of the insurers and/or GIA to their third party service providers or agents g their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes. Thank you. hund Best Regards, Witnessed by Reporting Centre Driver's Signature (# driver is not the policyholder) / Date Syaf (Ms) | Case Handler ature / Date & Personnel LKK Auto Consultants Pte Ltd TO AMK Phone: 6749-5792 | email: NurSyafiqah@lkkauto.com fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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Save the Earth. Print only when necessary.

B=SKZ5689M

Sketch Plan Pg.2

	ances of the Accide	le f	epo it	
	atte	achel		
eclaration				
Ve declare the foregoing pa a EFCRT TEAMSR 267 STATE STATES	officulars are true in every ORTAHON PAGE ORTAE	respect.		

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

Policyholder's Signature / Date & Time

Page 4 of 11

Witnessed by Reporting Centre Personnel





1 of 3

Report No. T/20160519/2055

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Tel No: 1800-5852999 REPORT OF A TRAFFIC ACCIDENT Station Diary No.: Vide Report No.: Date/Time Report Made: 39 19/05/2016 11:44 Informant's Particulars APT BLK 614 BEDOK RESERVOIR ROAD #06-1198 Address: Name of Informant: IBRAHIM BIN SALLEH SINGAPORE 470614 Contact No.: ID Type / ID No.: Mobile: 97550014 Home/Office: NRIC NO / S1486444J Email: Nationality: SINGAPORE CITIZEN Type of Informant: Date of Birth: Age: Sex: 28/05/1961 Driver 54 Institution / School Name: Male Language; Race: Malay Driving Licence Information: Date of Expiry: Occupation: Class: 2A,3 Taxi driver

Fype of Accident Hit and Run		Drink Drive: No	Date/Time of Accident: 19/05/2016 10:00	Type of Location Slip road	
Location: Along Road ' OUTRAM RO Slip road Weather.	1 DAD	Road Surface:		Road Speed Limit	
Clear Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate	
One Way Type of Coll	ision:	wipe - Same Direction		Anyone conveyed by ambulance: No	

Details of V	ehicle Invol	ved		Color	Condition	No of
Vehicle No.		Make	Model	Color	Slightly	1
SHC8325A	Taxi				Damaged	•
						0
SKZ5689M	Car					

Sketch Plan Pg.4



2 of 3 Report No. T/20160519/2056

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #61-01 SINGAPORE Tel No: 1800-5852999

CONTINUATION OF REPORT

On 19/05/2016 at about 10am while I was driving along CTE slip road to Outram road a vehicle (SKZ5689M) came from my right side trying to cut into my lane. After the said vehicle hit the my right side mirror, the said car just move off without stopping. Nobody was injured.





3 of 3

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-91 SINGAPORE 519457 Tel No. 1800-5852999

Report No. 7/20160519/2055

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: G / Staff Sgt ELFIAN BIN TAMAM	Signature Of Informant
Signature Of Interpreter. Not applicable	Date/Time: 19/05/2016 11:44
Officer In Charge Of Case TP / HRT / SI ROSLAN BIN AHMAD Contact No.: 65476194	Classification Of Case.
Authentication Stamp NP168	

Asher Sng (LKKAuto)

From:	Sukimin, Nurasikin <nurasikin.sukimin@aig.com></nurasikin.sukimin@aig.com>
Sent:	Thursday, 11 January 2018 2:00 PM
To:	Asher Sng (LKKAuto)
Cc:	Vic (LKKAuto); Loh, Chee-Heng; Chan, Kian Meng; Dally Amri, Mimi Zarina
Subject:	RE: [URGEN!] RE: Your Ref: 5500940491SG
Without Prejudice	
Hi Asher	
After se soviewing all case	e facts, please proceed with the TP claim and to manage insured expectation that liability is
more on our side.	E races, preuse process remaining
Thank you,	
Sincerely,	
Ekin	
NURASIKIN SUKIMIN	
AIG	5 December Claims Operations
Team Manager - Singapo	ore Auto Express & Recovery, Claims Operations
Nurasikin.Sukimin@aig.c	com www.aig.com

Sent: Friday, January 05, 2018 6:46 PM

To: 'Asher Sng (LKKAuto)'

Cc: Vic (LKKAuto); Loh, Chee-Heng; Chan, Kian Meng; Dally Amri, Mimi Zarina

Subject: RE: [URGEN!] RE: Your Ref: 5500940491SG

Without Prejudice

Hi Asher

Taking into consideration that no evidence on insured negligence that caused the damage, and no impact from the

Also quoting the fact that "Traffic police charged insured as the way insured drive, however did not prove that insured did hit third party vehicle", we agree on the matter.

Sincerely,

Ekin

NURASIKIN SUKIMIN

Team Manager - Singapore Auto Express & Recovery, Claims Operations

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

Case	Notified	Est Submitted	Adj Assigned		Adj Rpt	Adj S	ubmitted	Ins Au	th'ed	Status	
Main	06 Jun 2016 Edit Reg		02 Jun 2016 00:00 Edit Adj Rpt	1	S\$130.00 Edit Estimates		80.00 w Rpt				g for Report
	Main	Refer	ence		Claim Detail	s		Documen	ts	ب	show All
CLAIM S	UBFOLDER DET	AILS						[Creat	ed by ad	juster]	
Insured:			G, ID: 5768682								
Main Clain	nant:	COMFORT T	RANSPORTATIO	N P	TE LTD, Co. R	eg. No.:	19930382		8000 E 1900 Z		
Vehicle Re	eg. No.:	SHC8325	١		Date of Lo	ss:		19/05/2	016 10:0	00 - :59	
Claim Typ	e:	TP / 55009	TP / 5500940491SG			er Note N	No.:	2100452857			
Vehicle Re	icle Reg. No. (Insured): SKZ5689M Policy No. (Claimant): MCOM0016		016	16							
	- Marian Carlotte Control				Excess:						
Repairer:	3	ComfortDel	Gro Engineering	Pte	Ltd (Sin Ming) 383 SI	N MING DR	IVE, 5757	17 Sin Mir	ng - Tel:	
Handling	Insurer:	Visaline]						3000 [Handled by Suriamurthy,			
Claimant's	s Insurer:	India Interi	national Insurar	ice	Pte Ltd (HQ) -	Tel: 6347	76100				I D
Adjuster:		due 15/01,				-3561	[Handled	by XING	SUO QIA	NG] [F	inai Kpi
Driver/Cu	stodian (Insured)	: XU JINGFENO	G (), NRIC: S76	868	223						
ASSOCI	ATED MAIL REC	EIVED							iew All	Compose	Case Mail
AIG_S AIG_S	G_EXPRESS (11/ G (08/06/2016):	01/2018): Report Re: Request for	Send Back Aler OI GIA report	ts -	SHC8325A (TP)					
ALL ASS	SOCIATED TASK	cs⊡				View All	Search	Tasks	Create No	w Task	Complete
Due Da		Type Task Gr	oup Subject	-	landler Ass	igned B	y Cor	npleted C	n C	reated Or	Done

Claim Documents

*SHC8325A (5500940491SG)

[SKZ5689M]

TP

COMFORT TRANSPORTATION PTE LTD

May 19 2016 10:00AM

[XU JINGFENG]

ComfortDelGro Engineering Pte Ltd

Vide	10		1 pe	r page 💟	✓
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)		Thumbnail	Print
1	23/11/17 11:16	TP video - SHC8325A	0	Load AVI	
			1 ne	r page	V
-	ers/Corresponde		12.00	Thumbnail	Print
No:	Finalized On	LKK Auto Consultants Pte Ltd (HQ) Third Party Express Settlement – Payment Breakdown	0	Edit	
1	(Draft)	Inira Party Express Settlement - Payment Sicardotti			
Pho	tos/Images		3 pe	r page 🔻	V
No		LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	06/06/16 17:56	Odometer Reading	0	Load JPG	✓
2	06/06/16 17:56	Chassis Number	0	Load JPG	✓
3	06/06/16 17:56	General View	0	Load JPG	V
4	06/06/16 17:56	General View	0	Load JPG	~
5	06/06/16 17:56	General View	0	Load JPG	~
6	06/06/16 17:56	General View	0	Load JPG	V
7	06/06/16 17:56	General View	0	Load JPG	V
8	20/10/16 09:47	Reinspection Photo	0	Load JPG	~
9	20/10/16 09:47	Reinspection Photo	0	Load JPG	V
9	20/10/16 09:47	Remspection Photo			
Doc	umentation		1 pe	er page 🔍	✓
No		LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Prin
1	06/06/16 17:55	TP ESTIMATE - MARKED	0	Load PDF	
2	06/06/16 17:55	TP GIA REPORT & POLICE REPORT	0	Load PDF	
3	08/06/16 09:22	NON REPORTING LETTER	0	Load PDF	
4	13/06/16 10:27	OI GIA REPORT	0	Load PDF	
5	05/10/16 10:44	EMAIL FROM AIG DD 260816	0	Load PDF	
6	05/10/16 10:44	EMAIL TO WSP DD 051016	6	Load PDF	
7	31/10/16 09:22	AUTHORISATION TO ACT	0	Load PDF	
8	31/10/16 09:22	LTA SEARCH	0	Load PDF	
9	31/10/16 09:22	RENTAL RECEIPT	•	Load PDF	-
10	31/10/16 09:22	WORKSHOP INVOICE	0	Load PDF	
11	23/05/17 09:16	TP PIR	0	Load PDF	
12	16/01/18 14:30	LETTER TO OI	0	Load PDF	
13	16/01/18 14:32	EMAIL FROM AIG DD 110118	0	Load PDF	
14	18/01/18 15:42	RELEASE VOUCHER	0	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset Save	Print

Our Checklist Remarks - LKK Auto Consu	tants Pte Ltd (HQ)	
	^	
	~	

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM		

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

	SKZ5689M (Insd veh)		- Model:	Model:		HYUNDAI SONATA 2.0 (A)		
	SHC8325A (TP veh) 19/05/2016							
Date of Accident:								
				f 1 No		1		
Global Sum Settler	nent :	[X] Yes		[] No	000.0			
Repair Estimate			: \$		680.8	-		
Final Repair Cost			: \$		500.0		0.00 4	out of \$50,00 per day
Loss of Use			: \$			-	Man de con	ays at \$50.00 per day
Rental (if any)			: \$				2 da	ays
LTA / GIA Search I	ee		: \$			4		
Others:			: \$			-		
)			: \$			_		
Final Settlement S			:\$		500.0 ES	[]	NO	(Kindly indicate
A) For Non GIA B) For GIA Regis BOLA Liability * Assessed Liability Remarks	stered Worl	(%)	chain	NIL Assesse	pplica d Lial	ble: Ye		BOLA Scenario No:(%) BOLA does not apply.
Payment Instruct	ion: Payee'	s Breakdown	l'			Z-a		10000
Payment Instruct 1) ComfortDelG			1:		: \$	7===		500.0
			1		: \$			500.0
ComfortDelG								500.0
Payment Instruct	on: Pavee'	s Breakdown	10			Z-s		
ComfortDelG C					: \$			500
1) ComfortDelG 2) 3) 4)		ABDOL		18 Ja 2018 Date	: \$: \$: \$			500.

Please attach all the supporting documents to the form. (Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any)

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:

CC3/AIG16010360/GES3S2-1

Date:

18/01/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd.

2100452857 Policy No:

Claimant Vehicle SHC8325A

Insured Vehicle No: SKZ5689M

No: Date of Loss:

19/05/2016

Nature of Claim: TP

Claim No: 5500940491SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHC8325A

Make & Model:

HYUNDAI SONATA, 2.0 (A)

D4FDFU530431 Engine No:

Reg. Date:

04/08/2015 (Man. Year: 2015)

Chassis No: Odometer:

KMHLB41UMGU075777

Colour:

Blue

1685 cc

Engine Capacity: 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:

Yes

Good Steering (Serviceable): Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

205/60R16

Rear Tyre Size:

205/60R16

106631 km

Front Left Side:

Hankook 7 mm

Rear Left Side: Rear Right Side:

Hankook 7 mm Hankook 7 mm

Hankook 7 mm Front Right Side: The above values represent the remaining tyre treads depth

COST OF CLAIMS		Repairer's	Adjuster's	Difference	Diff %
Parts		436.32	0.00	436.32	100.00
Miscellaneous Items		0.00	0.00	0.00	
Labour		200.00	130.00	70.00	35.00
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Gross Total (S\$)	636.32	130.00	506.32	79.57
	+ GST 7.00/7.00% (S\$)	44.54	9.10	35.44	79.57
	Nett Amount (S\$)	680.86	139.10	541.76	79.57
	+ Loss of Use (2.0 x	S\$50.00/day) (S\$)	100.00		
	+ Car Rental (2.0 x S		263.22		
	+ Doo	c/Search Fee (S\$)	5.35		
	ñ	Nett Liability (S\$)	507.67		
	Global Sum Settlement (S\$)		500.00		

INSPECTION

Date of Assignment:

Date Inspected:

02/06/2016

02/06/2016 Inspected At:

ComfortDelGro Engineering Pte Ltd

59 LOYANG DRIVE SINGAPORE 508969 Estimated Period of Repair:

1.0 days

Adjuster: XING GUO QIANG

Manager: Asher Sng Rong Yi

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

Recommende	d Parts
------------	---------

No.	Qtv	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*WING MIRROR RH	Repair	545.40 FL	*-F
F=Fra	anchise	part. L=ListItem[Disc.	Sub Total (S\$)	545.40	0.00
			- List Item Discount or	109.08	0.00	
				Total Parts (S\$)	436.32	0.00
			Report was uns	submitted during this print-out.		

Adjuster Report Page 4 of 4

Recommended Miscellaneous Items There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING.	New	100.00	50.00
2	SPRAY PAINT ON AFFECTED AREA.	New	100.00	80.00
		Gross Labour Cost (S\$)	200.00	130.00
	Report was	s unsubmitted during this print-out.		

< END OF ESTIMATES >