ASS.REG.EX: REF	cs3/116/1800/163/ 8936	Z Speská Ingrastach
	ASSIGNMENT (Office)	
From Persons Chin tu Ying Estimated Costs	_ ef	25/1/1883:49
OD THE WEST TO RES ! OD RES ! E		* *
To Inspect Veticle No:	SIC 1851X	1. SKU14484
To Inspect Vehicle Not. The Workshop mile John To Blk E5, Woodlands Rd	SLC 1851X. Auto Survices 395 A. Yew Tee Ind. E	SKU14484
To Inspect Vehicle Not th Westschop mit Blk F5, Woodlands Rd Follow Not	SLC 1851X. Auto Services 395 A. Yew Tee Ind.	SKU14484
Tohn Tohn Blk F5, Woodlands Rd Follow No. Sunt Insured: Make of Veh.	Auto Services 395 A- Yew Tee Ind. &	SKU 1448 4 8508 1258 23/01/2018
Tohn Tollow 19:: Sum Insured: Make of Vehical Cheen's Record	Auto Services 395 A- Yew Tee Ind. F	St. 8508 1258
Tohn Tohn Blk F5, Woodlands Rd Follow No. Sunt Insured: Make of Veh.	Auto Services 395 A- Yew Tee Ind. F	
Tohn of Bik F5, Woodlands Rd Foliop No. Sunt Insurati Make of Vehi (Client's Record CA REV REP. REV 24 HRS	Auto Services 395 A. Yew Tee Ind. E Claim 1901 Excess: /wp Person Contains john X Total 1	23 01 2018

Sixvenior. REF: 419	Afrer 2pm
ASSI	GNMENT
From: Date:Estimated Cost:	Veh No: SLC 1851 X r Regn: 31/11/2009 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: BINW 526 c.c / 395
at Workshop m/s	Colour Black A/C: Insured / Std / NI / NA
of	Sp.Reading / 38 C62 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	CNO: WBANT 12070 CX 306/4
Claims No.	Gen. Cond: Good / Pary / Poor / Burnt
Sum Insured: Excess:	Steering: Inerater / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Goder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: (ii) / S/Rim / STD A/Rim or
· · · · · · · · · · · · · · · · · · ·	Tyre Size: F: 245/35-219 Hadilead R: 275/30 2819 Hadilead
(Policy Condition)	
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal, or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 23/1/18 D.O.I. 26/1/18
Lum Sum: % 3 Val.: Yes or No	Survey held at John Hato Services
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
:	
: 	
	t en
•	
	ays Of Repair:
1 to	esurvey No. of Trip: Survey Fee: 180
Date/Time, File Return to?	Transportation:
2) Add Fee:	
Report Format: DAR	: Interview (\$) Photos : Tech. Invs (\$) Copers 20
Lump Sum / I.B.I: (\$:Weekend (\$
	TOTAL 200

- FW: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SKU1448U AND SLC1851X ON 23/01/2018

From:	Chin,	Lee-Ying
-------	-------	----------

To: 'assignments', Admin A

Cc: Fong, Andy-SY

Sent: 25/1/2018 3:49:55 PM Attachments: <u>Fax2CC9.tif</u>

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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AMY LIM LAW PRACTICE

High Street Centre 1 North Bridge Road **#08-08**

Singapore 179094

T: 9625 8742 / 9639 3110

F: 6491 5638

BY FAX: (6835 7416) ONLY

UEN: 53361230)

We do not accept service by fax

Our Ref:

2018.1061.PD.JAS >

Your Ref:

SKU1448U_

25 January 2018

AIG Asia Pacific Insurance Pte Ltd

(Motor Claims Dept) 78 Shenton Way #08-16 AIG Building Singapore 079120

Attn: Motor Claims Department

Dear Sirs

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION

CLAIMANT: TUTI HASLINDA BINTE MOHAMAD PADILAH / TRAFFIC ACCIDENT ON 23 JANUARY 2018 AT 15:50 HRS ALONG BKE TOWARDS WOODLANDS INVOLVING VEHICLES NO. SLC1851X & SKU1448U

We are instructed by Tuti Haslinda Binte Mohamad Padilah to notify you of a road accident on 23 January 2018 at about 15:50 along BKE towards Woodlands involving our client's vehicle registration number SLC1851X and vehicle registration number SKU1448U driven by your insured at the material time. A copy of the Singapore accident statement/traffic police report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know within 2 working days (excluding any intervening Saturday, Sunday and Public Holiday) 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 shall proceed to repair the vehicle without further reference to you.

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

Venue: Address: M/S John Auto Services Block E5, Woodlands Road

395A, Yew Tee Industrial Estate

Singapore 677984

Contact:

John @ 8508 1258

Email:

khoman999@gmail.com

Please liase with the above workshop directly.

Yours faithfully

≝sther Moev

Email: daims@esthermoey.com

encs

PLEASE LET US KNOW THE DATE OF THE PRE-REPAIR INSPECTION





Police Station Of Origin, Chos Chu Kang N.P.C. 20 Chos Chu Kang Street 52 #01-02 SINGAPORE 689286 Tel No. 1800 7659999

Kepert No. 1/20180124/21/0

iei No	1800 7659	9999			
REPOR	T OF A TRAF	FIC ACCIDENT			
	Time Report 2018 17:32		Vide Report No.	Station Clary No. 198	
Inform	ant's Parti	culars			
-	of Informan EBIN MOH	-	Address APT BLK 166B TECK WHYE SINGARORE 062165	CRESCENT #10-361	
3D Type / ID No NRIC NO / \$1750971C		71C	Contact No Home/Office Mobile 87211114		
Nationa SINGAR	hty PORE CITIZ	2EN	Email	Committee and the second of the particle of the stage of the product of the second of	
Sex Maid	Age 51	Date of Birth 08/05/1966	Type of Informant	emininteriorismo mai esta martina esta esta esta esta esta esta esta est	
Race Javanes	e	•	Language:	Institution / School Name	
Occupat OPERA	ION MAN	AGER	Driving Licence Information: Class: 3,4	Date of Expiry	

Meneral infor	mation of the Acc	ident		
Type of Accident	Injury Others	Drink Drive: No	Date/Time of Acadent 23/01/2018 15.50	Type of Location Straight Road
Location Along Road 1 BUKIT TIMAH BKE towards 1	EXPRESSWAY			
Weather Onzzling		Road Surface: Wet		Road Speed Limit
Traffic Flow Dual Carriage		Traffic Control: Not Controlled	· · · · · · · · · · · · · · · · · · ·	Traffic Volume. Moderate
Type of Collision Between Movin	on og Vehicles - Hoad	To Rear	(:	Anyone conveyed by ambulance No

Details of Vehicle Involved Vehicle No. Type Model Condition No of Passenger SKU1448U | Car Slightly Damaged SLC1851X Car Sightly Damaged

Any Pedestrian Involved No	9.00 (2005)
7	
No. of Pedestrians Injured NIL	Use of Pedestrian Crossing NA
	The second secon



Police Station Of Origin. Chos Chu Kang N P C 20 Chos Chu Kang Street \$2 #0 1-62 SINGAPORE 689286 Tel No. 1800-7659999

24607 to 72(1931247118

CONTINUATION OF REPORT

Orlywe Name	where the contract was the contract of the con			* * * * * * * * * * * * * * * * * * *
ĺ	YONG JONG SHYAN	•	Die	51512230
Related Vehicl	e SKU1048IJ (Car,	* - FTF , about a fee sum	College College	The state of the second of the
Hospital/Clinic	NIL	e stante emple	Classich Driving Artende Si Expiry Dese	Class No. Date of Sicily, No.
Date Treatment	NII.	Figure 1. Jan		and the control of th
No of Days ora	nted Medical Leave NIL	Figures v	harte ()	
Driver		000,550		
Name	SUZALI BIN MOHAMAD		(E) (v5)	5-50-2
Related Vehicle	SLC1851X (Car)	· · · · · · · · · · · · · · · · · · ·	Contact to	8721114
tospital/Clinic	NATIONAL HEALTHCARE GRO POLYCLINICS (CHOA CHU KAI	NG)	Chassier Driving Sucerice & Exerty Cate	Class, 2.4 Date of Seprity No.
ate Treatment	24/01/2018	Date Disc	marge 24.0s	F 18 2 19
 o of Days grant 	ed Medical Leave 03	Degree of	10 257 S. 25	

Brief Details.

On 23/01/2018 about 1550hrs, I was driving along Bubit Timah Excressival towards vicco ands Road There was a road work conducted at lane 1, hence, I changed lane to lane 2 and signed bown as the vehicles infront me all slowed down. However, the vehicle based of macco and size in time and necessary vehicle's rear.

The other driver and I got down our vehicle, exchanged particulars and decided to go for insurance dia minute of time, no one was injured.

However, on 24/01/2018 morning, I felt pain and stiffness at my fehiness, encoder and idea decide consult a doctor. The doctor said that it could be due to muscle strained and given me 3 days. Medical Leave.

I have CCTV installed in my vehicle but it is not working



THE SECOND SECON

Police Station of Congri Chos Chicking N.P.C. 20 Chos Cho Kang Street 10 act p.c. SINGAPORE mischen Tel No. 1800 - disting

3.66 a. Propositio - 1000 (8012) 400 t Eg

CONTINUES INSTITUTE RELIGIOS

Sketch Plan

the contact is the able to an oxide should place

MPORTANT. Please attach a copy of your vehicle's incurance Certificate to this report. If you continue the certificate with you now, please fax a copy to 65474865 stating the report number as reference

Signature Of Officer Recording The Report

Signature Of Informant

Signature Of Informant

Signature Of Informant

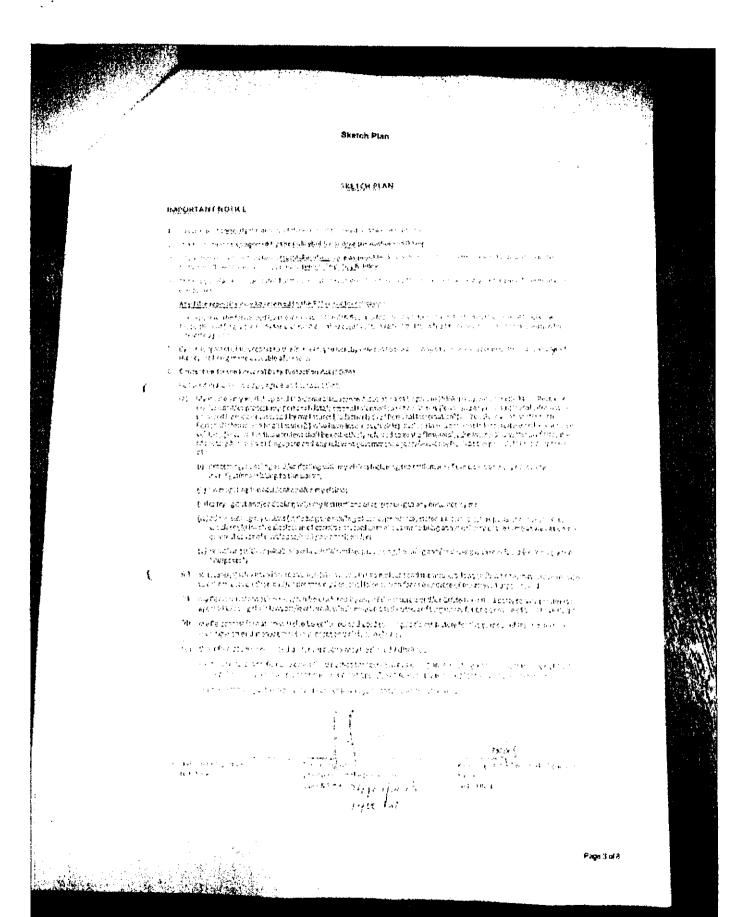
Date/Time
24/01/2018 17 32

Officer in Charge Of Case

TP - AEIT /
Staff Sigt Wong Signature

Contact No : 85476423

Authentication Stamp



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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 <u>truthful</u> and <u>accurate</u> 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 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	24/01/2018 13:56
Date Of Accident	23/01/2018 15:50
Exact Location Of Accident	LANE 2 BKE > WOODLANDS NEAR BT PANJANG EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SLC1851X
nsured/Policyholder	
Name Of Registered Owner	TUTI HASLINDA BTE MOHD PADILAH
NRIC No	S7124883F
Email Address	NOEMAIL

(LOCAL) +65-87495290

OFFICE-87495290

Alternative Phone No Vehicle Particulars

Mobile Phone No

Manufacturer BMW

Model 520I-2.0 ABS AIRBAG 2WD XENON HEADLAMP (A)

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?

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 5091337428

Cover Note Number

Driver

Name of Driver SUZALI BIN MOHAMAD

 NRIC No
 \$1750971C

 Date Of Birth
 08/05/1966

 Occupation
 INDOOR

 Date Of Driving Pass
 25/11/2016

Driving Experience 1 YEAR AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-87211114

Fax Number

Contact Number

EMail Address NOEMAIL

Address

BLK 166B TECK WHYE CRESCENT #10-361

` Postcode

682166

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

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

NO

Was any body injured in the Accident? Was any injured conveyed to hospital by

NO

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)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT

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

SKU1448U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver YONG JONG SHYAN

NRIC/Passport Number

S1530253D

Contact Number

97732933

Address

BLK 551 CHOA CHU KANG ST 52 #06-57

Postcode

680551

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the cisins process.
- This Form must be completed by the Policyholder and/or the Authorised Oriver.
- 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 liability.
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- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this seport at the centre and to copies of the report being made available aforeseld.
- 8. Consent under the Personal Data Protection Act (PDPA)

t understand, achnowledge, agree and consent that:

- (c) 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 insurar (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' tawyors/law firms, the Monetary Authority of Sings pore 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 daims and any necessary investigations relating to the claims;
 - (li) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by ma;
 - (iv) administering my dalms (actuding the majiing of correspondence, statements, invoices, reports or nutices 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 try claims. (collectively the "Ригрозез"}
 - (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 for 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.
 - my Personal information will also be collected and used to compile dains 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 froud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (iii) for complying with requirements under any regulations, laws or court orders.

Pateryharder's Signature Date & Time:

Driver's Signature

it dayer is not the pulcyloiden) Date & Time: 24/01/5018

Reporting Captre NEIC/FIN No :

Name:

Electionical's Signature

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	nave declare the following parth	दाह शह से प्रस्ति किया है। 		
		A milkers	perfect.	
	koloyboleer's Signature Date & Time:	Oriver's Agrature ht driver is not the policyholder;	Reporting Centre Pérsonnel's Signature Name: Dest' Université	
		Date & Time: 1400 low	BEIC/HIR Soc:	

MOTORCAR (Rear)

(1)Replace (√) (2)Repair() (3)Check (7) (4)Not Consistent (NC)

	(12)Missing (13)Tora (14)Unconfirmed (15)Not Working			<u>M(</u>	01	
Rear P	ortion					
NAC	INC	Item	CON	AC	Qt)	
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 Bumper	DI			

	Portion				
		Item	CON	AC	Qty
1137	993626	Rear Number Plate	1		
		Rear Number Plate Base	1		
1139	993630	Rear Number Plate Garnish			
1140	993632	Rear Number Plate Lamp	 		
1141	992958	Rear Bumper	D 1)		-
		Rear Bumper Upper	1		
1143	993017	Rear Bumper Lower Cover	CAY	F	
1144	993054	Rear Bumper Side	()		
1145	993103	Rear Bumper Tow Cover	MIS		_
1146	992341	Rear Bumper Clips	MEC		~
1147	992976	Rear Bumper Bracket	100	7	~
	993068	Rear Bumper Side Retainer	05.		-
1149	993045	Rear Bumper Reinforcement			_
1150	992970	Rear Bumper Beam	Ďΰ		
1151	993077	Rear Bumper Sponge	CRA		-
1152	992999	Rear Bumper Damper	KKH		
1153		Dear Dumper Damper	<u> </u>		
1154	002026	Rear Bumper Protector			
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1156		Rear Bumper Reflector	<u> </u>		
1157	993023	Rear Bumper Lower Spoiler]	
1158	994023	Reverse Sensor	DW	_	Z
1159		Rear End Panel	00	Ķ	
1160	993339	Rear End Panel Top Garnish		17	
1161	993333	Rear End Panel Inner Trim			
1162	990333	Boot Compartment Inner Trim			
1163		Rear LH Taillamp		T	
1164		Rear LH Taillamp Garnish	T		
1165	993859	Rear LH Taillamp Panel			
1166	995116	Rear RH Taillamp		?	
1167	993853	Rear RH Taillamp Garnish			
1168	993859	Rear RH Taillamp Panel			
1169		Rear Apron Panel			
1170		Bootlid	OD	$\overline{}$	•
1171	991328	Bootlid Emblem	NEC		
1172	990356	Bootlid Handle			
1173	995250	Bootlid Moulding			
1174	990376	Bootlid Reflector	1		
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		Vehicle No: SLC 1	BF.	1 >	~
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1202		Spare Tyre Board	İ		
1203	994328	Spare Tyre Panel	DD	R	
		Ѕраге Туге			
		Spare Tyre Lock Screw			-
1206	993787	Spare Tyre Cover			
		Triangle Breakdown Sign			
1208	990507	CD Changer Assy			
1209	990164	Antenna			
1210		Centre Exhaust Pipe Assy			
1211		Centre Exhaust Mounting			
1212		Rear Exhaust Pipe			
1213	993357	Rear Exhaust Chrome Pipe			
1214	993361	Rear Exhaust Mounting			
		Rear Exhaust Heat Shield			
		Rear LH Chassis Member			
1217		Rear RH Chassis Member			
1218		Rear LH Fender	<u> </u>		
		Rear LH Fender Protector			
		Rear LH Fender Inner Panel			
		Rear LH Fender Inner Trim			
		Rear LH Fender Inner Garnish			
1223	993425	Rear LH Fender Inner Shield			
		Rear LH Mudflap			
		Rear LH Wheel Rim		\Box	
		Rear LH Rim Cover			
		Rear LH Tyre			
		Rear RH Fender	ļļ	_	
		Rear RH Fender Protector		_	
		Rear RH Fender Inner Panel	 		
		Rear RH Fender Inner Trim Rear RH Fender Inner Garnish			
	993413	Rear RH Fender Inner Garnish Rear RH Fender Inner Shield		_	
1234	993622	Rear RH Mudflap		_	
		Rear RH Wheel Rim			-
		Rear RH Rim Cover		\dashv	
		Rear RH Tyre			-
		Rear Fender Extension Panel LH		\dashv	-
1239	993401	Rear Fender Extension Panel RH			_
1240	993430	Rear Fender Inner Top Garnish			_
1241	993673	Rear Fender 1/4 Glass			
		Rear Fender 1/4 Glass Rubber			
		Rear Fender 1/4 Glass Sealant		i	
		Rear Windscreen Glass			ᅥ
		Rear Windscreen Rubber			\neg
1246	993961	Rear Windscreen Moulding			
1247	993955	Rear Windscreen Sealant			\neg
		Third Brake Light			\neg
		Rear Fender Air Grille		T	\neg
		Fuel Lid			
1251		Fuel Neck			
		Fuel Tank			
		Fuel Tank Bracket			
		Fuel Tank Float			
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No of Items:	Assessor:	
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...CLAIM SUBFOLDER...(Pending for Survey Report) $_{ m PRI}$

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Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Ar	di Submitted	d Ins Auth'ed	d Sta	atus	
Main	29 Mar 2018 Edit Reg	Cot Sommers	25 Jan 2018 00:00 Edit Adj Rpt	S\$0.00	S	\$0.00 View Rpt		Pe Re	Pending for Survey Report Cancel Case	
	Main	R	eference	C	Claim Details	,	Docum	ients	<u> </u>	Show All
CLAIM SU	BFOLDER DE	ETAILS				[Create	ed by adjuster]		
Insured:	Yong Jon	g Shyan, ID: S1	1530253D							
Main Claimant:	-				400 TH					
Vehicle Red No.:	9. SLC185	1X			Date of Loss		2018 00:00 - :59 nths and 23 Days		Reg Date (Man Yr)]
Claim Type	:: TP / 318	35201316SG			Policy/Cove Note No.:	r (Compre	ehensive)			
Vehicle Reg No. (Insured):	skU1448	U			Policy No. (Claimant):					
					Excess:					
Repairer:		olicable - (-)								
Handling Insurer:	Jaclyn-M.	Kesaval@aig.com	ce Pte. Ltd. (Expres							
Adjuster:	LKK Auto 09/04/20		e Ltd (HQ) - Tel: 62	56-3561	. [Handled by	[,] Sebastian	ı Yeang Wai Ke	en] [Fir	nal Rpt d	ue
Claimant's Solicitor:	AMY LIM	LAW PRACTICE								
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Claim Documents

*SLC1851X (3185201316SG) [SKU1448U] TP

Jan 23 2018 12:00AM [Yong Jong Shyan]

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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/AIG18001631/SD3E2

Date:

04/04/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd.

SKU1448U

No: Date of Loss:

Claimant Vehicle

SLC1851X 23/01/2018

Nature of Claim:

Insured Vehicle No:

TP

Claim No: 3185201316SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SLC1851X

Make & Model:

BMW 320I, 2.0 (A)

Engine No:

A725I579N46B20BE

Reg. Date: Colour:

31/12/2009 (Man. Year: 2009) Black

Chassis No: Odometer:

WBANT12070CX30614 138062 km

Engine Capacity:

1995 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):

Engine Modification: Yes

No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

245/35Z R19

Rear Tyre Size:

275/30Z R19

Front Left Side:

Habilead 6 mm

Rear Left Side:

Achilles 6 mm

Front Right Side:

Habilead 6 mm

Rear Right Side:

Achilles 6 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:

25/01/2018

Date Inspected:

26/01/2018

Inspected At:

JOHN AUTO SERVICES

395A WOODLANDS ROAD

SINGAPORE 677984

Estimated Period of Repair:

5.0 days

Sebastian Yeang Wai Keen Adjuster:

Manager:

Nivitha Govindasamy

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		*REAR BUMPER	Dented	0.00 F	*-F
2	1		*REAR BUMPER LOWER COVER	Cracked	0.00 F	*- F
3	1		*REAR BUMPER TOW COVER	Missing	0.00 F	*- F
4	6		*REAR BUMPER CLIPS	Necessary	0.00 F	*- F
5	2		*REAR BUMPER BRACKET	* Check	0.00 F	*- F
6	2		*REAR BUMPER SIDE RETAINER	Distorted	0.00 F	*- F
7	1		*REAR BUMPER REINFORCEMENT	Dented	0.00 F	*- F
В	1		*REAR BUMPER BEAM	Dented	0.00 F	*- F
9	1		*REAR BUMPER SPONGE	Cracked	0.00 F	*- F
10	2		*REVERSE SENSOR	Damaged	0.00 F	*- F
11	1		*REAR END PANEL	Repair	0.00 F	*- F
12	1		*REAR END PANEL TOP GARNISH	* Check	0.00 F	*-F
13	1		*REAR RH TAILLAMP	* Check	0.00 F	*- F
14	1		*BOOTLID	Dented	0.00 F	*- F
15	1		*BOOTLID EMBLEM	Necessary	0.00 F	*- F
16	1		*BOOTLID LOCK	* Check	0.00 F	*- F
17	1		*BOOTLID RUBBER	Cut	0.00 F	*- F
18	1		*SPARE TYRE PANEL	Repair	0.00 F	*- F
F=Fra	nchise	part.	•			
				Total Parts (S\$)	0.00	0.00

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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 >