

22/03/2008

ASS. REC. BY:

REF: CS/AIG18002431/ Kvd3m Special Instruction:

Surveyor:

Kenneth

ASSIGNMENT (Office)

From (Person):

Noor Mariesa

of

AIG

Date/Time:

1/2/18 @ 5:19pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SGJ 4018M

Insured:

SLD7529H

at Workshop m/s

Trust Autaworks

Tel:

9108 2728

of

BLK 5035, # 01-345 AMK Ind Prk 2.

Policy No:

2100472594

Claim No:

9361003843 SG

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

31/01/2018

CA / REV / REP. / REV 24 HRS

lwp

05/02/2018

H.O.D. Endorsement:

Date/Time:

10:39am @ 2/2/18

Person Contacted:

Anthony

Vehicle IN (OUT)

Date/Time

Action/Instruction (✓) Estimate

SGJ 4018M - NA / INC 10007924 / W1

D.O.A.: 23/4/2010

SLD 7529H - X

2/2/18 11pm @ 5100d Confirm (Red 4077.35, 44%)

REF: AIG

ASSIGNMENT

From: Date: 05/02/2018

Estimated Cost:

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

To inspect Vehicle No:

SGJ 4018 M

at/Workshop No:

Trust Autoworks

of: BLK 5035 # 01-345 Amk Ind. Prk 2

Insured:

Policy No:

Claims No:

Sum Insured:

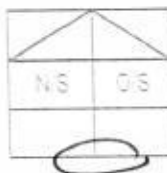
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bel. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GLA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

06

days:

Res:

Yes or No

Lum Sum:

20

%

3 Val:

Yes or No

CA / REV / REP:

24 HRS

w/p

Date:

Person Contacted:

Vehicle IN / OUT

Vehicle: SGJ 4018 M Reg: 07 06

Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover

Truck / Trailer or

Make:

Toy (A) Alphard

2362

Colour:

M. D. Blue

A/C

Insured / Std / Nil / NA

Sp. Reading:

153662

A/P

Insured / Std / Nil / NA

Eng No:

AN111C 0147679

O/N:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt

Brake: In order / Jammed / Leaked / Burnt

Mod: Nil / STD / Rim / STD A/Rim /

Tyre Size:

R:

225/50ZR18

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI

TOYO / YOKO or

Front:

Rear:

R.Bal:

5

mm

R.Bal:

6

L.Bal:

5

mm

L.Bal:

6

D.O.A:

30/1/18

D.O.A:

5/2/18

Survey held at:

Des. of Damages: Fr / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision

Date / Time / Action / Instruction

12 Feb pass to Catherine, car not ready

RECEIVED 23 FEB 2018

Date/Time File Passed:

☐ Prelim. Report
☐ Final Report

Days Of Repair:

6

Resurvey No. of Trip:

1

Survey Fee:

250

Transport:

20

Date/Time File Returned:

>> p - typist

Add Fee:

☐ Site Intd
☐ Intd
☐ Tech
☐ Insd

Site Intd:

Intd:

Tech:

Insd:

Report Format:

merimen

Lum Sum / IB /

LS \$5100p

270

Survey Department Check List (Case Handler)

Reference No.: OS / AIG 1800 2131 / Kvd3

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

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

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:

VERON

22/2/18

Case Handler

Date

*C: Critical *N: Non-Critical

21/05/20



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

AIG ASIA PACIFIC INSURANCE PTE LTD

Ref : CS/AIG18002131/Kvd3

78 SHENTON WAY #08-16
CHARTIS BUILDING
SINGAPORE 079120

Date : 02-02-2018



Code : AIG

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLD 7529H	Veh. Inspected	SGJ 4018M
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	NOOE MARRIESA	Assign Date	02/02/2018

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. Description of Damages

--

5. General Information

Accident Date	31/01/2018	Inspection Date
Survey held at	BLK 5035 # 01-345 AMK IND.PRK 2	
Repairer	TRUST AUTOWORKS	

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

...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	02 Feb 2018 Edit Reg		08 Feb 2018 00:00 Edit Adj Rpt				Pending for Survey Report Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by adjuster]

Insured:	Lee Boon Chuan (Li Wenchuan), ID: S7226304I		
Main Claimant:	SIN HOCK LEONG BATTERY, Co. Reg. No.: 53187912K		
Vehicle Reg. No.:	SGJ4018M	Date of Loss:	31/01/2018 23:00 - :59
Claim Type:	TP / 9361003842SG	Policy/Cover Note No.:	2100472594 (Comprehensive)
Vehicle Reg. No. (Insured):	SLD7529H	Policy No. (Claimant):	
		Excess:	
Repairer:	Trust Autoworks - Ang Mo Kio (HQ) Blk 5035, #01-345 Ang Mo Kio Industrial Pk 2, 569538 Ang Mo Kio - Tel: 91082728		
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Tan, Bennie-WZ - 6419 1718] Bennie-WZ.Tan@aig.com		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 20/02/2018]		

ASSOCIATED MAIL RECEIVED

[View All](#) [Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#) [Search Tasks](#) [Create New Task](#) [Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Nivitha (LKK Auto)

From: Abu Kassim, Noor Mariesa <NoorMariesa.AbuKassim@aig.com>
Sent: Thursday, 1 February 2018 5:19 PM
To: 'assignments@lkkauto.com'; 'admin-a@lkkauto.com'
Cc: Tan, Lily (AIG); Fong, Andy-SY; Kaur, Baljit; Chin, Lee-Ying; Lim, Sheng Yang; Md Ishak, Mohd Imran; Chan, Yoke Shi; Supramaniam, Darshene
Subject: aigencrypt - Pre repair inspection request - SGJ4018M VS SLD7529H (OI) DOA: 31/01/2018
Attachments: Re: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SLD75... (75.2 KB); 20180201145635701.pdf

10:39am @ 2/2/2018

Person @ Anthony

Vehicle Not In
Arrange on 05/02/2018

Hi,

Please refer to the enclosed request from **Chia S Arul LLC**

Kindly carry out Policy coverage verification **first** before conducting the pre-repair inspection within 48 hours

If you have any queries/concerns, please let us know.

Kindly assist to assign Kenneth Kong as Single Joint Expert as requested.

Thank you.

Best Regards,

Mariesa Abu Kassim (Mariesa)

AIG

Claim Adjuster II, Singapore FNOL, Claims Operations – Auto

Shared Services – Malaysia | Global Business Services

AIG Shared Services (M) Sdn Bhd (887191-D)

Menara Worldwide, Level 12, 198 Jalan Bukit Bintang, 55100 Kuala Lumpur, Malaysia

Tel +6 03 2719 6000 | Ext 1012202 | Fax +6 03 2685 5898

NoorMariesa.AbuKassim@aig.com | www.aig.com

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CHIA S ARUL LLC
ADVOCATES & SOLICITORS
UEN 201330709H

ARULCHELVAN S

Our Ref : SGJ 4018M (kc/jr)

Your Ref :

1 February 2018

AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way #08-16
Chartis Building
Singapore 079120

BY EMAIL

Dear Sir,

RE: PROPERTY DAMAGE CLAIM
CLAIMANT : SIN HOCK LEONG BATTERY
ACCIDENT INVOLVING SGJ 4018M & SLD 7529H ALONG CTE TOWARDS
SLE EXIT OF ANG MO KIO AVENUE 5 ON 31 JANUARY 2018

1. We act for **Sin Hock Leong Battery**, the owner of motor vehicle no. SGJ 4018M, which was involved in the aforesaid accident.
2. We hereby give you **NOTICE** that we are claiming against your insured motor vehicle no. SLD 7529H for damages, costs and disbursements as a result of your insured driver's negligence.
3. Kindly let us know if you wish to conduct a pre-repair inspection on our client's motor vehicle at M/s Trust Autoworks at Blk 5035 #01-345 Ang Mo Kio Industrial Pk 2 Singapore 569538 and kindly arrange with Mr Anthony Cheong at T: 9108 2728.
4. If we do not hear from you within the next **two (2) working days**, we shall advise our client to proceed with their own inspection and repairs.
5. Please reply either by fax at 6733 8183 or by email to kelly@chiaarul.com.

Yours faithfully,

MR ARULCHELVAN S

cc: Client (By email)

151 CHIN SWEE ROAD • #03-09
MANHATTAN HOUSE • SINGAPORE 169876
TEL : (65) 6733 4647 • FAX : (65) 6733 8183 (not for Service of Court documents)
EMAIL : info@chiaarul.com

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	7912K
Vehicle Details	
Vehicle No.:	SGJ4018M
Vehicle to be Exported:	No
Intended De-registration Date:	08 Feb 2018
Vehicle Make:	TOYOTA
Vehicle Model:	ALPHARD WELCAB 2.4 A
Primary Colour:	Black
Manufacturing Year:	2006
Engine No.:	2AZB202138
Chassis No.:	ANH100147679
Maximum Power Output:	117.0 kW (156 bhp)
Open Market Value:	\$37,577.00
Original Registration Date:	10 Jul 2006
First Registration Date:	10 Jul 2006
Transfer Count:	6
Actual ARF Paid:	\$41,335.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	30 Jun 2021
COE Category:	B - Car (1601cc & above)

COE Period(Years):	5
PQP Paid:	\$24,240.00
COE Rebate Amount:	\$16,456.00
Total Rebate Amount:	\$16,456.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 08 Feb 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the 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	01/02/2018 13:16
Date Of Accident	31/01/2018 23:00
Exact Location Of Accident	CTE TOWARDS SLE EXIT ANG MO KIO AVE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ4018M
Insured/Policyholder	
Name Of Registered Owner	SIN HOCK LEONG BATTERY
Co Reg No	53187912K
Email Address	TAN_ROY@YAHOO.COM
Mobile Phone No	
Alternative Phone No	OFFICE-86540008

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALPHARD-2.4 CVT (A)
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A80407073MCX
Cover Note Number	

Driver

Name of Driver	TAN CHOON KEAT
NRIC No	S7522741H
Date Of Birth	06/08/1975
Occupation	INDOOR
Date Of Driving Pass	14/07/1997
Driving Experience	20 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86540008
Fax Number	
Contact Number	
Email Address	TAN_ROY@YAHOO.COM

Address	BLK 127A KIM TIAN ROAD #25-533
Postcode	161127
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	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)	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 ATTACHED

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLD7529H
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE BOON CHUAN
NRIC/Passport Number	S7226304I
Contact Number	97451724
Address	
Postcode	
Insurance Company Name	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

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

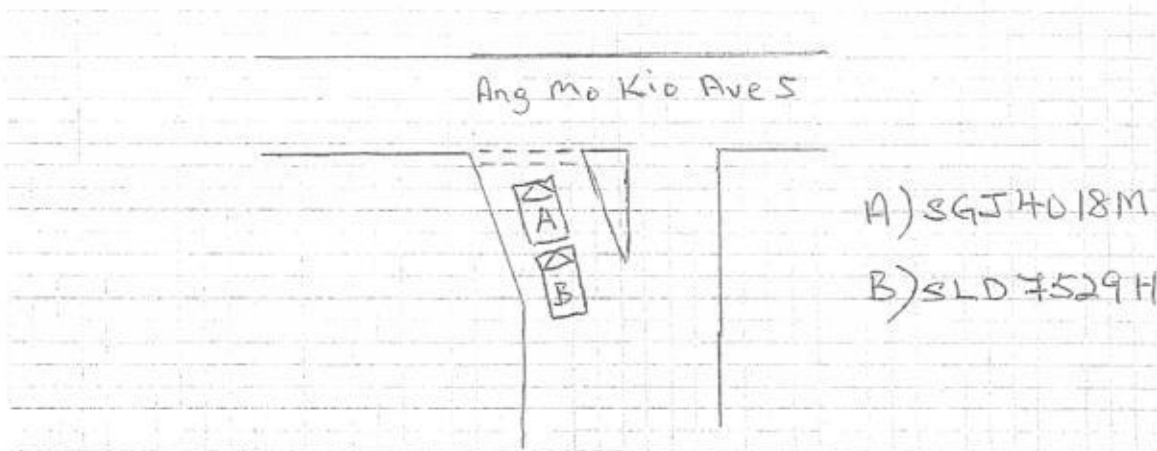
SIN HOCK LEONG BATTERY

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stop at the give way Junction waiting main Road traffic to clear then suddenly vehicle B didn't stop in time and hit onto my rear portion of my car.

DECLARATION

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

SIN HOCK LEONG BATTERY

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

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Mobile Phone No	
Alternative Phone No	OFFICE-86540008

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Model	ALPHARD-2.4 CVT (A)
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A80407073MCX
Cover Note Number	

Driver

Name of Driver	TAN CHOON KEAT
NRIC No	S7522741H
Date Of Birth	06/08/1975
Occupation	INDOOR
Date Of Driving Pass	14/07/1997
Driving Experience	20 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86540008
Fax Number	
Contact Number	
EMail Address	TAN_ROY@YAHOO.COM

Address	BLK 127A KIM TIAN ROAD #25-533
Postcode	161127
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	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)	1

Details of Police Action

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If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

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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	SLD7529H
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE BOON CHUAN
NRIC/Passport Number	S7226304I
Contact Number	97451724
Address	
Postcode	
Insurance Company Name	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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.
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 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

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

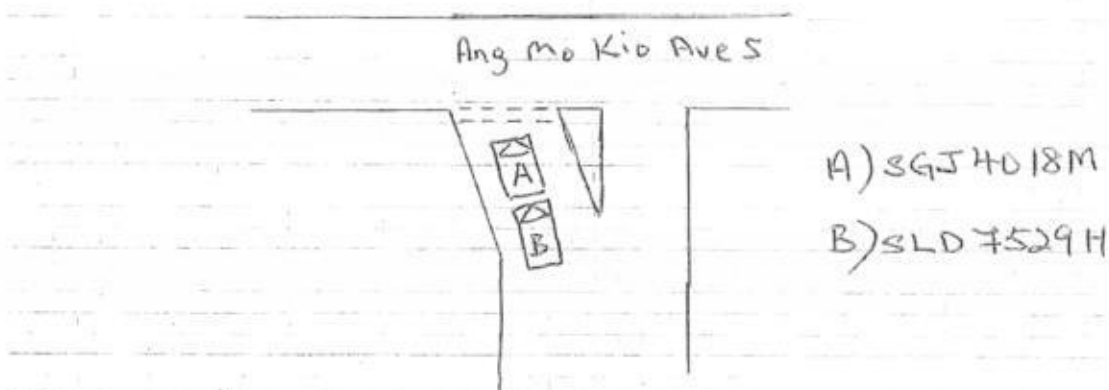
SIN HOCK LEONG BATTERY

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stop at the give way Junction waiting main Road traffic to clear then suddenly vehicle B didnt stop in time and hit onto my rear portion of my car .

DECLARATION

I/We declare the foregoing particulars are true in every respect.
SIN HOCK LEONG BATTERY

Policyholder's Signature
 Date & Time:

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

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

KV

Massive Trading & Auto

Mailing address : Blk 225 #07-579 Ang Mo Kio Ave 1 Singapore 560225
Tel : 91082728

Fax : 64816131

Sin Hock Leong Battery
Blk 127A Kim Tian Road
#25-533
Singapore 161127

Vehicle No : SGJ 4018 M
Make : Toyota Alphard
Year : 2007

Not Notified
618pm @ 5100f

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Re-survey After Paint
6 days

Qty	Description	Acknowledged by Repairer Signature:	Unit Price	Amount
		Date:		

Estimate Cost Of Repair

1 pc	Rear tail-gate assy
2 pcs	Rear tail-gate reflector
1 pc	Rear tail-gate emblem " Logo "
1 pc	Rear tail-gate emblem " Alphard "
1 pc	Rear tail-gate inner lock
1 pc	Rear windscreen moulding
1 pc	Rear tail-gate inner trim board
1 pc	Rear boot rubber
1 pc	Rear end panel
1 pc	Rear end panel inner garnish
1 pc	Rear bumper
1 pc	Rear bumper reinforcement
2 pcs	Rear bumper bracket
2 pcs	Rear bumper retainer
1 pc	Rear bumper sponge
1 set	Rear reverse sensor
1 pc	Rear exhaust silencer

	By	\$1,855.70	✓
\$485.10	Sm	\$970.20	X
	na	\$48.90	✓
	na	\$56.70	✓
	na	\$285.60	✓
	na	\$105.10	✓
	na	\$476.10	✓
	na	\$225.70	80% 112.85na
	na	\$665.90	✓
	na	\$285.10	✓
	na	\$1,055.80	✓
	na	\$305.60	X
	na	\$150.40	✓
	na	\$111.80	X
	na	\$165.30	X
	na	\$570.20	✓ 220na
	na	\$955.70	✓
		\$8,289.80	
	Less 25 %	\$2,072.45	
		\$6,217.35	

S Nett

1 pc	Rear tail-gate glass sealant
15 pcs	Rear bumper clip

	na	\$45.00	✓ 40na
\$2.00	na	\$30.00	✓
		\$75.00	

Labour Charges

Remove/renew the above parts including knocking, welding & cutting.

\$1,000.00 *600*

To putty & spray paint front & rear accident affected portion.

\$1,000.00 *600*

balance c/f \$8,292.35

SGJ 4018 M

balance b/f \$8,292.35

Labour Charges

Check/reconnect wiring.

\$45.00 202

To spray anti rust on accident affected portion.

\$180.00 602

Remove/refit rear tail-gate mechanism & trim board to new door.

\$120.00 602

Remove/refit rear boot upholstery to facilitate repair.

\$120.00 602

Remove/renew rear reverse sensor and to reset same

\$180.00 502

Remove/refit rear tail-gate glass

\$120.00 ✓

Remove/renew rear exhaust silencer

\$120.00 602

Total \$9,177.35

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: CS/AIG18002131/KVD3N2

Date: 27/02/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100472594
 Claimant Vehicle No : SGJ4018M Insured Vehicle No : SLD7529H
 Date of Loss: 31/01/2018 Nature of Claim: TP Claim No: 9361003842SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SGJ4018M
 Make & Model: TOYOTA ALPHARD, 2.4 CVT (A) Engine No: 2AZB202138
 Reg. Date: 10/07/2006 (Man. Year: 2006) Chassis No: ANH100147679
 Colour: Metallic Dark Blue Odometer: 153662 km
 Engine Capacity: 2362 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: 225/50ZR18 Rear Tyre Size: 225/50ZR18
 Front Left Side: Michelin 5 mm Rear Left Side: Michelin 6 mm
 Front Right Side: Michelin 5 mm Rear Right Side: Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	6,292.35	4,802.20	1,490.15	23.68
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,885.00	1,630.00	1,255.00	43.50
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	9,177.35	6,432.20	2,745.15	29.91
Approved Total (Overridden) (S\$)		5,100.00		
Nett Amount (S\$)	9,177.35	5,100.00	4,077.35	44.43

INSPECTION

Date of Assignment: 01/02/2018
 Date Inspected: 05/02/2018 Inspected At: Trust Autoworks - Ang Mo Kio (HQ)
 Blk 5035, #01-345 Ang Mo Kio Industrial Pk 2
 Singapore 569538

Estimated Period of Repair: 6.0 days

Adjuster: KENNETH KONG

Manager: VERON CHEN

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 TAIL-GATE ASSY	Bent	1,855.70 FL	*1,855.70 FL
2	2		*REAR TAIL-GATE REFLECTOR	Serviceable	970.20 FL	*- FL
3	1		*REAR TAIL-GATE EMBLEM LOGO	Necessary	48.90 FL	*48.90 FL
4	1		*REAR TAIL-GATE EMBLEM ALPHARD	Necessary	56.70 FL	*56.70 FL
5	1		*REAR TAIL-GATE INNER LOCK	Dented	285.60 FL	*285.60 FL
6	1		*REAR WINDSCREEN MOULDING	Necessary	105.10 FL	*105.10 FL
7	1		*REAR TAIL-GATE INNER TRIM BOARD	Mtg Cracked	476.10 FL	*476.10 FL
8	1		*REAR END PANEL	Bent	665.90 FL	*665.90 FL
9	1		*REAR END PANEL INNER GARNISH	Mtg Distorted	285.10 FL	*285.10 FL
10	1		*REAR BUMPER	Bent	1,055.80 FL	*1,055.80 FL
11	1		*REAR BUMPER REINFORCEMENT	No such part	305.60 FL	*- FL
12	1		*REAR BUMPER BRACKET	N/s Bent	150.40 FL	*75.20 FL
13	2		*REAR BUMPER RETAINER	Serviceable	111.80 FL	*- FL
14	1		*REAR BUMPER SPONGE	No such part	165.30 FL	*- FL
15	1		*REAR EXHAUST SILENCER	Bent	955.70 FL	*955.70 FL
16	1		*REAR BOOT RUBBER (50%)	Dented/Distorted	169.28 FS	*112.85 FS
17	1		*SET REAR REVERSE SENSOR	Shorted/Dented	427.65 FS	*220.00 FS
18	1		*REAR TAIL-GATE GLASS SEALANT	Necessary	45.00 FS	*40.00 FS
19	15		*REAR BUMPER CLIP	Necessary	30.00 FS	*30.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$)	8,165.83	6,268.65
- List Item Discount on L Items 25.00/25.00% (S\$)	1,873.48	1,466.45
Total Parts (S\$)	6,292.35	4,802.20

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	REMOVE/RENEW THE ABOVE PARTS INCLUDING KNOCKING,WELDING & CUTTING	New	1,000.00	600.00
2	TO PUTTY & SPRAY PAINT FRONT & REAR ACCIDENT AFFECTED PORTION	New	1,000.00	600.00
3	CHECK/RECONNECT WIRING	New	45.00	20.00
4	TO SPRAY ANTI RUST ON ACCIDENT AFFECTED PORTION	New	180.00	60.00
5	REMOVE/REFIT REAR TAIL-GATE MECHANISM & TRIM BOARD TO NEW DOOR	New	120.00	60.00
6	REMOVE/REFIT REAR BOOT UPHOLSTERY TO FACILITATE REPAIR	New	120.00	60.00
7	REMOVE/RENEW REAR REVERSE SENSOR AND TO RESET SAME	New	180.00	50.00
8	REMOVE/REFIT REAR TAIL-GATE GLASS	New	120.00	120.00
9	REMOVE/RENEW REAR EXHAUST SILENCER	New	120.00	60.00
Gross Labour Cost (\$\$)			2,885.00	1,630.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >