

Surveyor
M. M. M.

REF: CS1 / 18008042 / L 9052

Special Instruction:

254.43

From (Person): Joel Nkh of II Date/Time: 02052018

Estimated Cost: Bill to:

Third Parties:

Claimant:

Surveyor:

Workshop: Trans Eumkars.

OD/TP Re-inspection / (Evaluation)

To Inspect Vehicle No: SLL 3236L Insured: SH 8122L

at Workshop m/s Trans Eumkars Tel:

of 12 Sungai Kadut Ave

Policy No: Claim No: MCT17121116 / 01 / SP

Sum Insured: Excess:

Make of Veh: D.O.A. 23-12-2017

(Client's Record)

H.O.D. Endorsement/Date:

Date/Time: Person Contacted: Vehicle IN / OUT

Date/Time: Confirmed with Final Fig , days (Red \$ / %; Original days)

Date/Time: 15/5/18 Submit Final Fig m443 , 4 days (Red \$ 0 / 0 %; Original days)

Date/Time	Action/Instruction
	SLL 3236L - NA/MSH17004376/r3
	SH 8122L - CS/IMC17012911/Kigh301
	DUA 03032017
	DUA: 010717
	14/5
	For & reasonable 4 days

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 15 MAY 2018

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value :

Inspected/
Evaluated by:

Fee Charged:

Basic & Add

Transport

Photos

Others

Total

Date:

250

1) Date/Time 15/5/18 File Pass to Trans

2) Date/Time File Return to

3) Date/Time File Pass to

4) Date/Time File Return to

5) Date/Time File Pass to

6) Date/Time File Return to

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	23 Jan 2018		02 May 2018 09:16 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:		COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R							
Main Claimant:		NG MUAN LEONG, ID: S2620327I							
Vehicle Reg. No.:		SLL3236L	Date of Loss:	23/12/2017 15:00 - :59					
Claim Type:		TP UL / MCT17121116	Policy/Cover Note No.:	MCOM0015 (Third Party Only)					
Vehicle Reg. No. (Insured):		SH8122L	Policy No. (Claimant):	MCOM0015					
			Excess:						
Repairer:		- Not Applicable - (-)							
Handling Insurer:		India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Sherini Pillai]							
Claimant's Insurer:		India International Insurance Pte Ltd (HQ) - Tel: 63476100							
Adjuster:		LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561							
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
<div> </div> 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.									

Catherine Chong (LKK Auto)

From: Olivia Lau (LKKAuto) <olivialau@lkkauto.com>
Sent: Wednesday, 2 May, 2018 9:28 AM
To: Joel Nah Shern Ern; assignments
Cc: Sherini Pillai; SUR
Subject: [III]: YOUR REF: MCT17121116/01/SP; III INSURED: SH8122L /OUR REF: SLL3236L (DOA: 23/12/2017)

Thanks, Joel.

Hi Catherine,

New assignment please.

Best Regards,

Olivia Lau | Admin Manager

LKK Auto Consultants

phone: 6256-3561 | email: olivialau@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Joel Nah Shern Ern <JoelNah@iii.com.sg>
Sent: Wednesday, 2 May 2018 9:21 AM
To: Olivia Lau (LKKAuto)
Cc: Sherini Pillai
Subject: RE: YOUR REF: MCT17121116/01/SP; III INSURED: SH8122L /OUR REF: SLL3236L (DOA: 23/12/2017)

Dear ALL,

I have granted rights to LKK for viewing this LOD by Trans Eurokars pte ltd.

Joel Nah

Motor Claims Department

India International Insurance Pte Ltd

64 Cecil Street #04-02 IOB Building

Singapore 049711

Tel: 6347 6100 Ext 206 Fax: 6224 4174

From: Sherini Pillai
Sent: Monday, 30 April, 2018 10:45 AM
To: Joel Nah Shern Ern <JoelNah@iii.com.sg>
Subject: FW: YOUR REF: MCT17121116/01/SP; III INSURED: SH8122L /OUR REF: SLL3236L (DOA: 23/12/2017)
Importance: High

Hi Joel,

Can you please get our surveyor either LKK or VAC to do a paper survey.

TP paid for the repair costs (cash job).

Regards,

Sherini Pillai

Motor Claims Department

India International Insurance Pte Ltd

64 Cecil Street, #04/#05 IOB Building, Singapore 049711

DID: 6347 6128 Fax: 6224 4174



From: tommywoon@eurokars.com.sg [mailto:tommywoon@eurokars.com.sg]

Sent: Thursday, April 12, 2018 4:50 PM

To: Sherini Pillai <sherini@iii.com.sg>

Cc: jen.lim@eurokars.com.sg; ngjunquan96@gmail.com

Subject: RE: YOUR REF: MCT17121116/01/SP; III INSURED: SH8122L /OUR REF: SLL3236L (DOA: 23/12/2017)

Importance: High

Dear Sherini,

As per your request, herewith attached are the colored photos of our client's vehicle.

Please let us have settlement offers to resolve the case. Thank you.

Best regards,



Tommy Woon

Assistant Manager - Insurance Claims

12 Sungei Kadut Ave

Singapore 729648

DID: (+65) 6360 2447

Fax: (+65) 6360 2899

Email to: tommywoon@eurokars.com.sg

From: Sherini Pillai [mailto:sherini@iii.com.sg]

Sent: Thursday, 12 April 2018 10:33 AM

To: Woon Wui Tew Tommy <tommywoon@eurokars.com.sg>

Cc: Jen Lim <jen.lim@eurokars.com.sg>; ngjunquan96@gmail.com

Subject: RE: YOUR REF: MCT17121116/01/SP; III INSURED: SH8122L /OUR REF: SLL3236L (DOA: 23/12/2017)

Without Prejudice

Dear Tommy,

We refer to your email of 7 March 2018.

Please let us have the colored photos of your client's vehicle and we will revert to you in due course.

Thank you.

Regards,

Sherini Pillai

Motor Claims Department

India International Insurance Pte Ltd

64 Cecil Street, #04/#05 IOB Building, Singapore 049711

DID: 6347 6128 Fax: 6224 4174



From: tommywoon@eurokars.com.sg [mailto:tommywoon@eurokars.com.sg]

Sent: Wednesday, March 07, 2018 4:04 PM

To: Sherini Pillai <sherini@iii.com.sg>

Cc: jen.lim@eurokars.com.sg; ngjunquan96@gmail.com

Subject: RE: YOUR REF: MCT17121116/01/SP; III INSURED: SH8122L /OUR REF: SLL3236L (DOA: 23/12/2017)

Importance: High

WITHOUT PREJUDICE

Dear Ms Sherini,

We refer to your email below.

Our client has rejected your assessment of this accident case. Our client is firmed with his accident statement that he has already completed the lane filter from the left and was way ahead when you insured driver filtered & thereafter cut in from the right lane causing the accident.

We hope you re-evaluate & re-assess the accountabilities and liabilities. As our client has mentioned, in this case where the facts in his GIA report are crystal clear, he WILL NOT accept any responsibility nor liability.

We look forward to hear from you with a favourable response to resolve the matter. Thank you.

Best regards,



Tommy Woon

Assistant Manager - Insurance Claims

12 Sungei Kadut Ave

Singapore 729648
DID: (+65) 6360 2447
Fax: (+65) 6360 2899
Email to: tommywoon@eurokars.com.sg

From: Sherini Pillai [<mailto:sherini@iii.com.sg>]
Sent: Wednesday, March 7, 2018 2:12 PM
To: Jen Lim <jen.lim@eurokars.com.sg>
Subject: OUR REF: MCT17121116/01/SP; YOUR REF: SLL3236L

Dear Jenny,

We refer to the above matter and to your email dated 22.1.18.

We have perused our insured's report and we note that your client had encroached into our insured driver's lane.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A) SH8122L
B) SLL3236L

On 23rd of December 2017 (Saturday) at about 3 pm, I drove my vehicle SH8122L along Scott's Road with an Indian male passenger. Along the way, vehicle (B) SLL3236L changed lane on my left and tried to avoid it. My taxi grazed passed the Mini Cooper car. As a result, my taxi had slight scratch marks on the left rear bumper.

In the event you have any evidence to prove our insured driver's negligence, please forward to us and we will look into the matter again.

Regards,
Sherini Pillai
Motor Claims Department
India International Insurance Pte Ltd



Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

DISCLAIMER:

This email is intended solely for the person to whom it has been addressed.

It may contain confidential and/or legally privileged information.

If you are not the person for whom this e-mail was intended, or if this e-mail has reached you by mistake, please delete it immediately and inform us of the error and also be hereby notified that any use, distribution, transmission, printing, copying or dissemination of this information in any way or in any manner is strictly prohibited and may be unlawful.

Internet communications may not be entirely secure or accurate as information could be intercepted, corrupted, lost, delayed or contain viruses.

Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

Motor Claim - III

From: jen.lim@eurokars.com.sg
Sent: 22 January, 2018 3:32 PM
To: Motor Claim - III
Cc: tommywoon@eurokars.com.sg; jobithomas@eurokars.com.sg
Subject: Your ref: SH8122L Our ref: SLL3236L (DOA 23.12.2017 / Uninsured losses claim)
Attachments: 1676_001.pdf

Your Ref: SH8122L
Our Ref: SLL3236L

CDH
CTIL

Uninsured losses claim

Dear Claims Team,

Attached herewith are copies each of the Cash Invoice, SAS statement, Sketch plan, Certificate of Insurance, IC & Driving License & your insured noted for your perusal.

The breakdown of our client's claims are as follows: -

(NR)

- | | |
|--------------------|---------------------------------------|
| • \$ 2,369.44 | Cash Invoice |
| • \$ 240.00 | Loss of use for 4 days @ \$60/- p/day |
| <u>\$ 2,609.44</u> | Total |

Kindly revert to us on your offer.

Thanks you.

Best Regards,
Jenny Lim
Admin Assistant

TRANS EUROKARS PTE LTD
12 Sungei Kadut Avenue
Singapore 729648
Tel: +65 63633003
DID: +65 63602444
Fax: +65 63602899

We are in receipt of your letter, which is receiving our attention.
We shall revert shortly. Kindly note that we are preserving our
rights to conduct a medical re-examination on your client where
necessary.

Our Ref: SH 8122L
Name : Sherin
Date : 22/1/18
India International Insurance P L

Eurokars Habitat Pte Ltd

Distributor of MINI Vehicles and Parts

27 Leng Kee Road Singapore 159098
Tel: (+65) 6473 3777 Fax: (+65) 6473 0500**TAX INVOICE**CODE: c0003
CUSTOMER: Mr Ng
ADDRESS: 3 Jalan Buloh PerinduGST Reg No: M90364005A
PAGE NO: 1
DOCUMENT NO: 13324455
DATE IN: 08/01/2018
DATE PRINTED: 13/01/2018
JOB NO: 15434
PRINTED BY: Phipps Sarah Can
EXT. WTY:
REGN NO: SLL3236L
REGN DATE: 21/02/2017
MILEAGE: 12922
SERVICE ADV: Phipps Sarah Can
REQUISITION NO:TEL NO: Singapore 457661
MODEL: Mobile: 97887084
MODEL: MINI Cooper S Clubman RHD
CHASSIS NO: WMWLN720X02F25303
ENGINE NO: F854H392B48A20A
DESCRIPTION: Body repair

Item	Description	Unit	U/Price	Disc%	Con%	Amount
01	BODY REPAIRS	0.00	0.00	0.00		0.00
02	To Repair FRT Bumper & Bonnet	400.00	1.00	0.00		400.00
03	To Respray FRT Bumper & Bonnet	1000.00	1.00	0.00		1000.00
04	To Check Electrical System For Proper Function	150.00	1.00	0.00		150.00
51.11.1.908.077	EXPANDING RI <i>hlc</i>	10.0	0.63	0.00		6.30
51.11.7.376.367	Black band s <i>hlc</i>	1.0	286.13	0.00		286.13
51.77.7.348.906	Cover, wheel <i>hlc</i>	1.0	165.44	0.00		165.44
51.14.7.351.370	MINI emblem <i>hlc</i>	1.0	72.06	0.00		72.06
51.13.7.351.371	Trim ring, h <i>hlc</i>	1.0	67.25	0.00		67.25
51.13.7.351.372	Trim ring, h <i>hlc</i>	1.0	67.25	0.00		67.25

Parts 664.43
Surcharge 0.00
Labour 1,550.00
Menus 0.00Net 2214.43
G.S.T. 7% 155.01
Total 2369.44
Paid 0.00
Amount Due 2369.44

Note: MINI car that are found with non-approved tuning or conversion installed are not subject to MINI warranty and the warranty of the car will be void accordingly.

Certified True Copy



Customer's Signature

Authorized Signature

ID:M05

GST REGN. NO. M90364005A
CO. REGN. NO. 199806095Z

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	26/12/2017 11:14
Date Of Accident	23/12/2017 15:00
Exact Location Of Accident	SCOTTS ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL3236L
Insured/Policyholder	
Name Of Registered Owner	NG MUAN LEONG
NRIC No	S2620327I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97887084
Alternative Phone No	OTHERS-97887084

Vehicle Particulars

Manufacturer	MINI
Model	MINI COOPERS CLUBMAN
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700084822
Cover Note Number	

Driver

Name of Driver	NG JUN QUAN
NRIC No	S9613591B
Date Of Birth	19/04/1996
Occupation	INDOOR
Date Of Driving Pass	13/05/2016
Driving Experience	1 YEAR AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96495806
Fax Number	
Contact Number	
Email Address	NGJUNQUAN96@GMAIL.COM

Address	3 JALAN BULOH PERINDU
Postcode	457661
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	SUNNY
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)	2

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 SKETCH PLAN & STATEMENT

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	SH8122L
Vehicle Make/Model/Colour	HYUNDAI SONATA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR LEFT SIDE BUMPER
No. Of Passenger (Including Driver)	

SKETCH PLAN

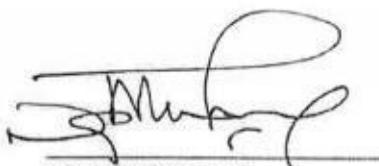
IMPORTANT NOTICE


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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.


Policyholder's Signature
Date & Time: 26/12/17


Driver's Signature
(If driver is not the policyholder)
Date & Time: 26/12/17 1045


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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S26203271



Name

NG MUAN LEONG

黄满量

Race

CHINESE

Date of birth

02-01-1967

Country/Place of birth

MALAYSIA

Sex

M

72880327

REPUBLIC OF SINGAPORE DRIVING LICENCE

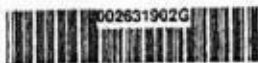
S26203271



NG MUAN LEONG

Exp. Date: 02 Jan 1967

Issue Date: 23 Nov 2014



0026319020

5380755



NPIC No. S26203271



Date of issue

12-11-2014

Address

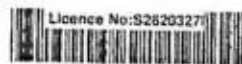
3 JALAN BULOH PERINDU
SINGAPORE 457661

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg 12 Dec 1962

NP 428A



Licence No: S26203271

REPUBLIC OF SINGAPORE DRIVING LICENCE

002567284H

NG JUN QUAN

19 Apr 1995

13 May 2018

002567284H

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9613591B



Name

NG JUN QUAN

黃健權

Race

CHINESE

Date of birth

19-04-1995

Country of birth

SINGAPORE

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3A Motor cars without clutch pedals (Auto) with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight \leq 2500kg

EFFECTIVE DATE

13 May 2018

NP 428A



Licence No. S9613591B



4783820

NRIC No. S9613591B



Date of issue

04-11-2011

Address

**3 JALAN BULOH PERINDU
 SINGAPORE 457661**



CERTIFICATE OF INSURANCE

AUTOPLAN PRIVATE VEHICLE

Name of Policyholder : NG MUAN LEONG
Period of Insurance : 01 Dec 2017 To 30 Nov 2018
Engine No. : F854H392B48A20A
Chassis No. : WMWLN720X02F25303

Vehicle No. : SLL3236L
Policy No. : 17Q0084822
Endorsement No. :
Issued Date : 01 Dec 2017

ABOUT THE COVER

Make/Model : MINI Cooper S Clubman AT LED NAV
Engine Capacity/Tonnage : 1,998.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
Insuring with COE/PAF : Yes

Person 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.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 199) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
Fire - \$0. Own Damage - \$1000. Theft - \$0. Flood Cover - \$0.

Section 2
Property Damage - \$0.

Windscreen : \$100.

Named Driver and Excess (where applicable)

NG MUAN LEONG

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres/AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 199), Part IV of the Road Transport Act, 1987 (Malaysia), and Motor Vehicles (Third-Party Risks) Rules, 1989 (Malaysia).

0501630000

SG ALLIANCE PTE LTD
78 SEA BREEZE AVENUE
SINGAPORE 497582

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.



Janile

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

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	31/01/2018 15:22
Date Of Accident	23/12/2017 15:00
Exact Location Of Accident	SCOTTS RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH8122L
-----------------------------	---------

Insured/Policyholder

Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	HYUNDAI
Model	SONATA
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	REPORTING ONLY
Vehicle Category	TAXI

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

Driver

Name of Driver	FOO HEE CHEW
NRIC No	S6813114F
Date Of Birth	23/03/1968
Occupation	OUTDOOR
Date Of Driving Pass	06/04/2010
Driving Experience	7 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	18 12-61 BEDOK SOUTH ROAD
Postcode	460018
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : - GENDER: : MALE

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

SEE ATTACH.(NO MORE DRIVING THIS TAXI)

Attachment(s)

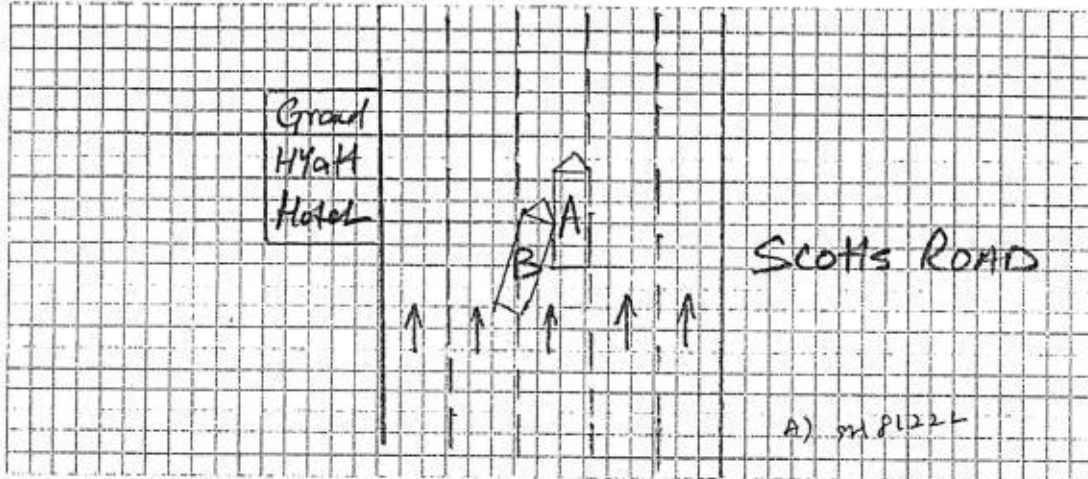
Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL3236L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG JUN QUAN
NRIC/Passport Number	S9613591B
Contact Number	96495806
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT RHT
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23rd of December 2017 (Saturday) at about 3 pm, I drove my vehicle SH8122L along Scott's Road with an Indian male passenger. Along the way, vehicle (B) SLL3236L changed lane on my left and I tried to avoid it. My taxi grazed passed the . . . Mini Cooper car. As a result, my taxi had slight scratch marks on the left rear bumper.

1 Indian male passenger was unhurt.
There is no video footage.

REMARK: The 3rd party vehicle (SLL3236L) owner wanted to make private settlement. However, I lost his contact number.

DECLARATION

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

COMFORT TRANSPORTATION PTE L.
CO. REG. NO. 199303821R

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 Pg. 2

IMPORTANT NOTICE

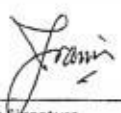
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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.

COMFORT TRANSPORTATION PTE L.
CO. REG. NO. 199303821R

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.:

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	23 Jan 2018		22 May 2018 09:39 Edit Adj Rpt	S\$2,214.43 Edit Estimates	S\$2,214.43 View Rpt		Pending for Survey Report Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R		
Main Claimant:	NG MUAN LEONG, ID: S2620327I		
Vehicle Reg. No.:	SLL3236L	Date of Loss:	23/12/2017 15:00 - :59 [10 Months and 2 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / MCT17121116	Policy/Cover Note No.:	MCOM0015 (Third Party Only)
Vehicle Reg. No. (Insured):	SH8122L	Policy No. (Claimant):	1700084822
		Excess:	
Repairer:	Eurokars Habitat Pte Ltd (HQ) 12 Sungei Kadut Avenue, 729648 Sungei Kadut - Tel: 63602845		
Handling Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Sherini Pillai]		
Claimant's Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (SG) - Tel: 65-6419-3000		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Lau Kwok Kwong] ... [Final Rpt due 01/06/2018]		

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.									

Claim Documents

***SLL3236L (MCT17121116)**
[SH8122L]

TP

NG MUAN LEONG

Dec 23 2017 3:00PM

[COMFORT TRANSPORTATION PTE LTD]

Eurokars Habitat Pte Ltd

Upload Documents Upload Photos Compose New Letter

View View in Browser ▼

Documentation			1 per page ▼	✓
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	22/05/18 09:40	TP LOD FROM EUROKARS HABITAT PTE LTD From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load PDF	
2	22/05/18 09:40	Singapore Accident Statement - IV From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load PDF	
3	22/05/18 09:40	7.3.18 - Reject claim From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load PDF	
4	22/05/18 09:40	Photo 1 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
5	22/05/18 09:40	Photo 2 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
6	22/05/18 09:40	Photo 3 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
7	22/05/18 09:40	Photo 4 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
8	22/05/18 09:40	Photo 5 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
9	22/05/18 09:40	Photo 6 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
10	22/05/18 09:40	Photo 7 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
11	22/05/18 09:40	Photo 8 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
12	22/05/18 09:40	Photo 9 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
13	22/05/18 09:40	23.4.18 - Email from CTPL to inform no damage photos of their taxi available From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load PDF	
14	22/05/18 09:40	Letter of Demand from Third Party TRANS EUROKARS PTE LTD From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load PDF	
15	22/05/18 09:40	PICTURE 02 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
16	22/05/18 09:40	PICTURE 03 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
17	22/05/18 09:40	PICTURE 04 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
18	22/05/18 09:40	PICTURE 05 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
19	22/05/18 09:40	PICTURE 10 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
20	22/05/18 09:40	PICTURE 06 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
21	22/05/18 09:40	PICTURE 07 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
22	22/05/18 09:40	PICTURE 08 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
23	22/05/18 09:40	PICTURE 09 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
24	22/05/18 09:40	PICTURE 01 From:TP UL - Reg. No: SLL3236L, Claimant: NG MUAN LEONG	Load JPG	✓
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	25/05/18 10:39	LETTER	Load PDF	

Linked Accident Report Documents

			View	View in Browser ▼
Assessment Reports			1 per page ▼	✓
No	Finalized On	Eurokars Habitat Pte Ltd (HQ)	Thumbnail	Print
1	26/12/17 11:29	Accident Statement	1 Load HTM	
2	12/01/18 15:20	Addendum Sheet	1 Load TIF	
3	12/01/18 15:22	Accident Statement Addm. #1	1 Load HTM	
Photos/Images			3 per page ▼	✓
No	Finalized On	Eurokars Habitat Pte Ltd (HQ)	Thumbnail	Print
1	26/12/17 11:23	Accident Photo	1 Load JPG	✓
2	26/12/17 11:23	Accident Photo	1 Load JPG	✓
3	26/12/17 11:23	Accident Photo	1 Load JPG	✓
4	26/12/17 11:23	Accident Photo	1 Load JPG	✓
5	26/12/17 11:23	Accident Photo	1 Load JPG	✓
6	26/12/17 11:23	Accident Photo	1 Load JPG	✓
7	26/12/17 11:23	Accident Photo	1 Load JPG	✓
Documentation			1 per page ▼	✓
No	Finalized On	Eurokars Habitat Pte Ltd (HQ)	Thumbnail	Print
1	26/12/17 11:21	Sketch Plan	1 Load TIF	

Documents Checklist

DOCUMENTS CHECKLIST

[Reset](#) [Save](#) [Print](#)

There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

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

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

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS1/III18008042/LQBS2

Date: 25/05/2018

REFERENCE

Handling Insurer:	India International Insurance Pte Ltd	Policy No:	MCOM0015
Claimant Vehicle No:	SLL3236L	Insured Vehicle No:	SH8122L
Date of Loss:	23/12/2017	Nature of Claim:	TP
		Claim No:	MCT17121116

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLL3236L	Engine No:	F854H392B48A20A
Make & Model:	HYUNDAI SONATA, 2.0 (A)	Chassis No:	WMWLN720X02F25303
Reg. Date:	21/02/2017 (Man. Year: 2016)	Odometer:	12922 km
Colour:	White		
Engine Capacity:	1998 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

CONDITION OF TYRES

Front Tyre Size:		Rear Tyre Size:	
Front Left Side:	0 mm	Rear Left Side:	0 mm
Front Right Side:	0 mm	Rear Right Side:	0 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	664.43	664.43	0.00	0.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,550.00	1,550.00	0.00	0.00
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (\$\$)	2,214.43	2,214.43	0.00	0.00
+ GST 7.00/7.00% (\$\$)	155.01	155.01	0.00	0.00
Nett Amount (\$\$)	2,369.44	2,369.44	0.00	0.00

INSPECTION

Date of Assignment:	22/05/2018		
Date Inspected:	02/05/2018	Inspected At:	TRANS EUROKARS PTE LTD 12 Sungei Kadut Avenue Singapore 729648
Estimated Period of Repair:	4.0 days		

Adjuster: Lau Kwok Kwong

Manager: SHIAU CHAN

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

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 24 May 2018)
Parts:	143	HYUNDAI SONATA 2.0 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLL3236L)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	10		*EXPANDING RI	Necessary	6.30 FS	*6.30 FS
2	1		*BLACK BAND S	Cut	286.13 FS	*286.13 FS
3	1		*COVER, WHEEL	Cut	165.44 FS	*165.44 FS
4	1		*MINI EMBLEM	Necessary	72.06 FS	*72.06 FS
5	1		*TRIM RING, H	Necessary	67.25 FS	*67.25 FS
6	1		*TRIM RING, H	Necessary	67.25 FS	*67.25 FS
Total Parts (S\$)					664.43	664.43

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	BODY PARTS. (NPA)	New	0.00	0.00
2	TO REPAIR FRT BUMPER & BONNET.	New	400.00	400.00
3	TO RESPRAY FRT BUMPER & BONNET.	New	1,000.00	1,000.00
4	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTION.	New	150.00	150.00
Gross Labour Cost (\$\$)			1,550.00	1,550.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >