

Surveyor

REF: CSI / SPF 18008947 / TIRB 52

Special Instruction:

From (Person): Abdul Rahman of SPF Date/Time: 14052018

Estimated Cost: Bill to:

Third Parties:

Claimant:

Surveyor:

Workshop:

OD/TP Re-inspection / (Evaluation)

To Inspect Vehicle No: SLS 7567T Insured: TP 118S

at Workshop m/s Cycle & Carriage Tel:

of TBS Pandan Loop

Policy No: Claim No: AEMD/105/009/2018/012

Sum Insured: Excess:

Make of Veh: D.O.A. 10.03.2018

(Client's Record)

H.O.D. Endorsement/Date:

Date/Time: Person Contacted: Vehicle IN / OUT

Date/Time: Confirmed with Final Fig days (Red \$ / %; Original 5 days)

Date/Time: 22/5/18 Submit Final Fig \$3932.14, 5 days (Red \$ 0 / 0 %; Original days)

Date/Time	Action/Instruction
	SLS 7567T - x Repair cost fair and reasonable
	TP 118S - x
	Fair & Reasonable
22/5/18	Mr Lan said charges waive discount 50%.

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

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

Para(3) : Nett Value

RECEIVED 22 MAY 2018

Market Value :

Salvage Value :

Nett Value :

Inspected/
Evaluated by:

Fee Charged:

Basic & Add
Transport
Photos
Others
Total

Date:

300

1) Date/Time 22/5/18 File Pass to tips

3) Date/Time File Pass to

5) Date/Time File Pass to

2) Date/Time File Return to

4) Date/Time File Return to

6) Date/Time File Return to

Catherine Chong (LKK Auto)

From: Abdul Rahman MOHAMAD SALIM (SPF)
<Abdul_Rahman_Mohamad_Salim@spf.gov.sg>
Sent: Monday, 14 May, 2018 4:13 PM
To: Catherine Chong (LKK Auto)
Cc: 'Olivia Lau'; Rosalyn TAN (SPF); Frankie THAY (SPF)
Subject: SLS7567T - Request Paper Survey
Attachments: SLS7567T LOD of AIG.pdf

Your Ref: SLS7567T
Our Ref : AEMD/105/009/2018/042

Dear Cath,

Your preceding mail and our assignment on 18 Apr 2018 have reference.

Attached as requested.

Regards

Abdul Rahman (Mr)
Accident Claims Officer
Automotive Engineering & Management Division
Police Logistics Department
Singapore Police Force
DID: (65) 6478 4840 | FAX: (65) 6478 4848



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From: Catherine Chong (LKK Auto) [mailto:admin-d@lkkauto.com]
Sent: Saturday, 12 May 2018 3:30 PM
To: Abdul Rahman MOHAMAD SALIM (SPF) <Abdul_Rahman_Mohamad_Salim@spf.gov.sg>
Subject: Request Paper Survey

Dear Mr Abdul Rahman,

Kindly refer to the attachment.

Please assist provide us the LOD for all vehicle for us conduct Paper Survey.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



SINGAPORE POLICE FORCE

SPF Accidents Claims Section
Automotive Engg & Mgmt Div
Police Logistics Department
No. 1 Mount Pleasant Road
Block 8 Old Police Academy
#02-12 Singapore 298333

Your Ref : SLS7567T

Our Ref : AEMD/105/009/2018/042A

Date : 18 April 2018

Tel: 64784840

Fax: 64784848

M/s LKK Auto Consultants Pte Ltd
Paya Ubi Industrial Park
51 Ubi Avenue 1 #01/02-25
Singapore 408933

Via Fax only: 62564315

Dear Sir/Madam,

ACCIDENT ON 10 MARCH 2018 INVOLVING GOVT VEH TP1118S & TP1123B AND OTHER VEH SLS7567T

We refer to the above matter.

- 2 Please arrange for **Pre-Repair Inspection** of vehicle no. SLS7567T at **Cycle & Carriage Industries Pte Ltd of 188 Pandan Loop, Singapore 128378.**
- 3 For appointment, please contact Lynn Wong at DID: 67714314.
- 4 Estimates were not provided by the workshop.
- 5 Thank you.

Yours faithfully,

Abdul Rahman
Accident Claims Officer
for ASST DIRECTOR

A FORCE FOR THE NATION

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	12/03/2018 16:23
Date Of Accident	10/03/2018 10:50
Exact Location Of Accident	PIE TWDS CHANGI NEAR EUNOS LINK EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS7567T
Insured/Policyholder	
Name Of Registered Owner	YEO ANNA (YANG ANNA)
NRIC No	S7441183E
Email Address	ANANYEO@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-91711417
Alternative Phone No	OFFICE-91711417

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	A180

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? YES

If No, Please state action to be taken

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	1700058831
Cover Note Number	

Driver

Name of Driver	QUEK CHIN TECK (GUO JINDE)
NRIC No	S7306824Z
Date Of Birth	22/02/1973
Occupation	INDOOR
Date Of Driving Pass	06/10/1997
Driving Experience	20 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96865301
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 346 YISHUN AVE 11 #07-121
Postcode	760346
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - PARTNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO MOTORCYCLIST
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?	YES
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

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20180310/2130

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	TP1118S
Vehicle Make/Model/Colour	F800GS BLACK
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	TP1123B
Vehicle Make/Model/Colour	F800GS BLACK
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	UNKNOWN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	TP1118S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the 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;
 - (ii) for complying with requirements under any regulations, laws or court orders.

13/07/18 15:15pm
Policyholder's Signature
Date & Time

13/07/18 15:15pm
Driver's Signature
(If driver is not the policyholder)
Date & Time

13/07/18 15:15pm
Reporting Centre Personnel's
Name
NRIC/FIN No.

Vincent Seah
Cycle & Carriage Industries Pte Ltd
100-1171 Jooi Road, Singapore 6873172
Email: vincent.seah@ccic.com.sg

Sketch Plan #2

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer Police Report

DECLARATION

We declare the foregoing particulars are true in every respect.

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature
Date & Time

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

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

Sketch Plan #3





CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : YEO ANNA (YANG ANNA)
 Period of Insurance : 04 Oct 2017 To 03 Oct 2018
 Engine No. : 27091031393028
 Chassis No. : WDD1760422J658635

Vehicle No. : SLS7567T
 Policy No. : 1700056831
 Endorsement No. : 00000000177909
 Issued Date : 01 Feb 2018

ABOUT THE COVER

Vehicle Model: MERCEDES BENZ A180 BE STYLE
 Capacity/Tonnage: 1.595.00 CC
 Sum Insured: Off Peak Car
 Market Value: No
 First Year of Registration: 2017
 Insuring with COE/PARF: Yes
 Licence for Classes of Persons Entitled to Drive:
 The cover shall extend to the insured vehicle with 100% premium
 The cover shall extend to the insured vehicle with 100% premium
 The cover shall extend to the insured vehicle with 100% premium

Age Condition: All Age Condition

Condition as to use:

The cover shall extend to the insured vehicle with 100% premium
 The cover shall extend to the insured vehicle with 100% premium
 The cover shall extend to the insured vehicle with 100% premium

Excess:

The cover shall extend to the insured vehicle with 100% premium
 The cover shall extend to the insured vehicle with 100% premium
 The cover shall extend to the insured vehicle with 100% premium

EXCESS

Excess 1: 100% (100% Excess)
 Excess 2: 100% (100% Excess)
 Excess 3: 100% (100% Excess)
 Excess 4: 100% (100% Excess)
 Excess 5: 100% (100% Excess)

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

The cover shall extend to the insured vehicle with 100% premium
 The cover shall extend to the insured vehicle with 100% premium
 The cover shall extend to the insured vehicle with 100% premium

IMPORTANT NOTES

1. The cover shall extend to the insured vehicle with 100% premium

2. The cover shall extend to the insured vehicle with 100% premium

3. The cover shall extend to the insured vehicle with 100% premium

4. The cover shall extend to the insured vehicle with 100% premium

5. The cover shall extend to the insured vehicle with 100% premium

6. The cover shall extend to the insured vehicle with 100% premium

7. The cover shall extend to the insured vehicle with 100% premium

8. The cover shall extend to the insured vehicle with 100% premium

Signature

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORIZED REPRESENTATIVE

18, Shuang Way #05-18 AIG Building 5079120 T: +65 6418 3000 F: +65 6418 3023 www.aig.com.sg

AIG Asia Pacific Insurance Pte. Ltd.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait photo of a man

Licence Number: **S7306824Z**
Name: **QUEK CHIN TECK (GUO JINDE)**

Birth Date: **22 Feb 1973**
Issue Date: **20 Sep 2003**

Barcode: 000850706D

FOR C&C USE ONLY

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

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	06 Oct 1997

NF 428A

Licence No: S7306824Z

Barcode



FOR C&C USE ONLY



Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20180310/2130

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

1 of 3

Report No: T/20180310/2130

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/03/2018 16:48	Vide Report No.: G/20180310/0103	Station Diary No.: 113
--------------------------------------------	-------------------------------------	---------------------------

Informant's Particulars

Name of Informant: QUEK CHIN TECK			Address: APT BLK 346 YISHUN AVENUE 11 #07-121 SINGAPORE 760346		
ID Type / ID No.: NRIC NO / S7306824Z			Contact No.: Home/Office: Mobile: 96865301		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 45	Date of Birth: 22/02/1973	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: ENGINEER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 10/03/2018 10:50	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
ALONG PIE TOWARDS CHANGI NEAR EUNOS LINK EXIT				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB6592A	Car	KIA	OPTIMA	Silver		0
SLS7567T	Car	MERCEDES BENZ	A180	Blue	Slightly Damaged	1
TP1118S	Motorcycle	BMW	F800GS	Black		1
TP1123B	Motorcycle	BMW	F800GS	Black		1

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20180310/2130

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

2 of 3

Report No. T/20180310/2130

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	QUEK CHIN TECK	ID No.	S7306824Z
Related Vehicle	SLS7567T (Car)	Contact No.	96865301
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/03/2018 at about 1050hrs, I was driving a car SLS7567T along PIE towards the direction of Changi (near Eunos Link exit).

Based on the video footage captured from my car camera, I was travelling on the first lane and there were two Police Special Operations Command motorcycles (TP1123B and TP1118S) travelling on the second lane, behind a Silvercab taxi SHB8592A. The taxi brake and the police motorcycle TP1123B swerved right to avoid the taxi. The other police motorcycle TP1118S tried to overtake the motorcycle TP1123B on the right but they collided into each other. The video also captured that TP1118S did not signal when overtaking and changing lane to the right.

Both motorcycles collided into each other. I braked and swerved abit to the right but one or both motorcycles hit into my car. My partner (vehicle owner) was seated at the front passenger seat. Both of us were not injured during the accident. Two of the officers were injured and conveyed to hospital by ambulance. My car's front bumper was dislodged and suffered major cracks and dents. There were also dents and scratches on the front left of the car.

Accident Sketch Plan



SINGAPORE
POLICE FORCE



T/20180310/2130

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

3 of 3

Report No. T/20180310/2130

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report
F /
Staff Sgt MUHAMMAD IMRAN BIN MESLAN

Signature Of Informant

Signature Of Interpreter:
Not applicable

Date/Time:
10/03/2018 16:48

Officer In Charge Of Case:
TP / AEIT /
SI ANG YI TING, STEPHANIE
Contact No.: 65476414

Classification Of Case:

Authentication
NP158



Signature:

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0032
 Operating Hours: Monday to Friday, 09:00 - 17:00
 UEN: S66330200 / GST Reg. No.: M400017755

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MCC 418034217 Vehicle Registration No: SLS 7567 T
 Name (as shown in NRIC): YEO ANNA NRIC/FIN/Passport No: _____
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate.
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: _____
 Email Address: _____
 Date of Accident: 10/03/18 Time of Accident: 10:50
 Place of Accident: PIE TRODS Changi Near Euro Link Exit
 Insurance Company: AIH

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Revert to DD claims.

P
 Policyholder / Driver's Signature
 Date: _____

Vincent Seah
 Reporting Centre Personnel's Signature
 Name: _____
 NRIC/FIN No.: _____
 Date: _____



AIG
COR

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building
78 Shenton Way #07-16
Singapore 079120
Tel : 65-6419-3000
Fax : 65-6835-7416
www.AIG.com.sg
CLAIMS DEPARTMENT
Co. Reg. No. 201009404M

SPF Accident Claims Section
Automotive Engg. & Mgmt Div
Police Logistics Department
1 Mount Pleasant Road
Blk 8 Old Police Academy
Singapore 298333

Date : 24 Apr 2018

Your Ref : TP1118S

Our Ref : M 5706534787SG (REC / 5209404)
(Please quote our reference when replying)

ACCIDENT INVOLVING SLS7567T & TP1118S
ON 10/03/2018
AT PIE TWDS CHANGI NEAR EUNOS LINK EXIT

WITHOUT PREJUDICE

We understand that you are the responsible party for vehicle no TP1118S at the material time of the above accident.

From the available information in our possession, it is beyond doubt that this accident was solely caused by your rider's negligence. As insurers of vehicle no. SLS7567T, we are subrogated to the rights of the car owner and now write to recover our outlay as follows:

(a) Cost of Repairs (nett of excess)	S\$	3,932.14
(b) Survey Fees	S\$	0.00
(c) Police Documents / ROV Search Fees etc	S\$	0.00
	S\$	3,932.14

Enclosed are all relevant supporting documents for your perusal.

Kindly let us hear from you within the next ten-(10) days from the date hereof. Should you have further queries, please do not hesitate to drop us an email at GRS-ExpressRecovery@aig.com or call our toll free number 8001206556, press option 3 followed by the Ext 1012293.

Yours faithfully
AIG Asia Pacific Insurance Pte. Ltd.

Ismail, Nuraisyah
Claims Department, Recovery
DID No: +8001206556 Ext 1012293

Encl.

*This is a computer generated letter. No signature is required.



AIG Asia Pacific Insurance Pte. Ltd.
AIG Building
78 Shenton Way #07-16
Singapore 079120
Tel : 65-6419-3000
Fax : 65-6835-7416
www.AIG.com.sg
CLAIMS DEPARTMENT
Co. Reg. No. 201009404M

Claim No: 5706534787SG Date of Survey: 12/03/2018
Repairer: CYCLE & CARRIAGE INDUSTRIES PTE LTD

REFERENCE

Insured: YEO ANNA (YANG ANNA) Policy No: 1700058831
Date of Loss: 10/03/2018 Nature of Claim: OD

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg. No: SLS7567T
Make & Model: MERCEDES-BENZ A180, 1.6 FL STYLE (R17 HLG) (A) Reg. Date: 04/10/2017
Engine No: 27091031393028 Chassis No: WDD1760422J656635

CONDITION OF TYRES

Front Tyre Size:		Rear Tyre Size:	
Front Left Side:	3 mm	Rear Left Side:	3 mm
Front Right Side:	3 mm	Rear Right Side:	3 mm

The above values represent the remaining tyre treads depth

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

TOTAL OFFER

Offer Authorized By:	CHANG, LOIS-KL on 22 Mar 2018 09:59
Offer Initiated By:	CHANG, LOIS-KL on 13 Mar 2018 11:03
Subrogation:	Yes
Rep. Gross Total:	S\$6,706.41 [Diff: S\$2,774.27, 41.37%]
Approved Gross Total:	S\$3,932.14
- Excess:	S\$0.00 [Waived: S\$800.00] [Remarks: Not Applicable]
	S\$3,932.14
+ GST (7.00%):	S\$275.25
Approved Nett Amount:	S\$4,207.39
	(No Betterment/Depreciation)

COST OF CLAIMS	Repairer's	Our Offer	Difference	Diff %
Parts	2,990.41	1,248.14	1,742.27	58.26
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,716.00	2,684.00	1,032.00	27.77
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (\$\$)	6,706.41	3,932.14	2,774.27	41.37

+ GST 7.00/7.00% (S\$)	469.45	275.25	194.20	41.37
Nett Amount (S\$)	7,175.86	4,207.39	2,968.47	41.37

SURVEYOR'S REMARKS

This inspection is conducted on a "Without Prejudice Basis"

Estimated repair period : 5.0 days

Authorised Repair : Yes

Inspection conducted by : Chang, Lois-KL (AIG Claims Dept)

Signature : -

REPAIR DETAILS

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	2		*GROMMET		4.46 FL	*4.46 FL / <i>rec</i>
2	1		*COMPANY SIGN		57.73 FL	*57.72 FL / <i>rec</i>
3	1		*LEFT FOGLAMP COVER		24.25 FL	*-FL x <i>nn</i>
4	1		*IMPACT ABSORBER		120.19 FL	*-FL x <i>nn</i>
5	1		*FRT BUMPER		1,146.15 FL	*1,146.15 FL / <i>de</i>
6	1		*LHF INTERMEDIATE LAYER		7.41 FL	*-FL x <i>nn</i>
7	1		*LH FRT FENDER		619.77 FL	Repair x <i>R</i>
8	1		*LH HEADLAMP UNIT		849.15 FL	*-FL x <i>nn</i>
9	1		*SUPPORT ENG. LOWER COVER		315.08 FL	*-FL x <i>nn</i>
10	1		*DISTANCE SENSOR		172.07 FL	*172.07 FL / <i>dis</i>
11	1		*SPACER RING		6.42 FL	*6.42 FL / <i>rec</i>

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	3,322.68	1,386.82
- List Item Discount on L Items 10.00/10.00% (S\$)	332.27	138.68
Total Parts (S\$)	2,990.41	1,248.14

AIG Asia Pacific Insurance Pte. Ltd./SLS7567T/22/03/2018 09:59

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	USING STAR DIAGNOSTIC TO CHECK ON CONTROL UNIT, RESET MEMORY TO IDEN. STD. NETT	New	380.00	380.00
2	TO REMOVE, REPLACE HEADLAMP WITH FOCUS. NETT	New	96.00	96.00
3	DISASSEMBLE & REPLACE FRT BUMPER, LHF FENDER	New	1,440.00	1,008.00
4	RESPRAY ON FRT BUMPER, LHF FENDER	New	1,800.00	1,200.00
Gross Labour Cost (S\$)			3,716.00	2,684.00

AIG Asia Pacific Insurance Pte. Ltd./SLS7567T/22/03/2018 09:59

< END OF REPORT >



Your Ref: AEMD/105/009/2018/042A

Date: 28th May 2018

Our Ref: CS1/SPF18008947/T1rbs2

M/s Automotive Engineering & MGT Division

Accident Claim Section

(Singapore Police Force)

1 Mount Pleasant Road

Blk 8 Old Police Academy

Singapore 298333

(The Motor Claims Department)

Attn: Abdul Rahman

Dear Sir / Madam,

**EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO.:
SLS 7567T INSURED VEHICLE NO: TP 1118S ACCIDENT ON 10/03/2018**

We thank you for your instruction on 14/05/2018.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of SLS 7567T from M/s AIG Asia Pacific Insurance Pte. Ltd.
- b) Singapore Accident Statement of Vehicles SLS 7567T.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number	: SLS 7567T
Make & Model	: Mercedes-Benz A180
Year of Registration	: 2017
Chassis Number	: WDD1760422J656635
Engine Capacity	: 1595 cc



2. Our finding is that the repair cost of \$3,932.14 (before GST) quoted by M/s Cycle & Carriage Industries Pte Ltd is fair & reasonable.
3. We recommend that the repairs of the entire damage require about 5 (Five) working days to complete.

Vehicle Inspection By:

MOHAMAD TAUFIKH
M.MATAI, AMSAE-A
Automotive Assessor

ADRIAN LING WAI PING
B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI
Licensed Appraiser



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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLS 7567T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
2	GROMMET	NECESSARY	4.46	4.46
1	COMPANY SIGN	NECESSARY	57.73	57.72
1	LEFT FOGLAMP COVER	NOT NECESSARY	24.25	-
1	IMPACT ABSORBER	NOT NECESSARY	120.19	-
1	FRT BUMPER	DEFORMED	1,146.15	1,146.15
1	LHF INTERMEDIATE LAYER	NOT NECESSARY	7.41	-
1	LH FRT FENDER	TO REPAIR SEE LABOUR	619.77	-
1	LH HEADLAMP UNIT	NOT NECESSARY	849.15	-
1	SUPPORT ENG. LOWER COVER	NOT NECESSARY	315.08	-
1	DISTANCE SENSOR	DISTORTED	172.07	172.07
1	SPACER RING	NECESSARY	6.42	6.42
	LESS 10% DISCOUNT		-332.27	-138.68
			2,990.41	1,248.14
LABOUR				
	USING STAR DIAGNOSTIC TO CHECK ON CONTROL UNIT, RESET MEMORY TO IDEN. STD.		380.00	380.00
	TO REMOVE, REPLACE HEADLAMP WITH FOCUS.		96.00	96.00
	DISASSEMBLE & REPLACE FRT BUMPER, LHF FENDER. INCLUSIVE OF THE REPAIR OF LH FRT FENDER.		1,440.00	1,008.00
	RESPRAY ON FRT BUMPER, LHF FENDER.		1,800.00	1,200.00
			3,716.00	2,684.00
GRAND TOTAL			6,706.41	3,932.14
RECOMMENDED COST OF REPAIRS				3,932.14

Report Ref No. CS1/SPF18008947/T1rbs2


MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor



ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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