

TP SURVEYOR	TP WORKSHOP @ Sun May E M solution Tel: 6456 0226	TP LAWYER NAME: Vision Law Tel: 6534 2811	LOD date: 14days: 8 Weeks later: Final Due Date:
INS. CASE OWNER: <u>Elaine</u>	CS3/AIG1400 8289 + P 63		LKK: IDAC:

Surveyor: Raj Bryan
Pre-assign / CCU / FTE

ASSIGNMENT
DOI: 07/05/14 Date / Time: 05/05/14
Registered in Merimen: 05/05/14

Claim No. : 697446481256
Policy No. : 2100259244
Make / Model :
Place of Accident :



Insured Vehicle No. : SJF 4948P
Name of Insured :
Insured Tel No. : HP:
Excess Sec II : SS D.O.A : 26/04/14

Is driver the owner? (YES / NO) Nature of Accident :
If NO, Driver Name / Age :
Driver Tel No. :
OI GIA REPORT: YES / NO TP GIA REPORT: YES / NO
(V/L: YES / NO Insured Liability : % Final ? Yes / No

URGENT

	INSRS: WSP: <u>E M solution</u> Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:
--	---	--	---	--	---	--	---

Date/ Time	FOR CSO ONLY:	STAGE	DATE / PIC
	Is driver the owner? (YES / NO)	Finalisation:	
	If NO, Does driver got his/her owned vehicle? : (YES / NO)	Email AIG for OI GIA:	
	Driver's Own Vehicle Number: Insurance Company:	Apt letter to OI:	
	<u>SJP 4913L - X</u>	Call OI:	
	<u>SJF 4948P - X</u>	After call ltr to OI:	
		Type Report:	
		Prepare Invoice:	
		Others:	
<u>28/05/14</u>	<u>File pass to next to close.</u>	Documentation Check List:	Handler Typist
<u>16/18</u>	<u>Recd email from FTA: Pls upload paper & invoice in Merimen.</u>	OI Apt Ltr:	<input type="checkbox"/>
<u>25/9/18</u>	<u>File pass to close.</u>	Authorisation To Act:	<input type="checkbox"/>
		Release Voucher:	<input type="checkbox"/>
		Final Repair Bill:	<input type="checkbox"/>
		Car Rental Invoice:	<input type="checkbox"/>
		LTA / GIA :	<input type="checkbox"/>
		Medical Bill:	<input type="checkbox"/>
		Approval Email:	<input type="checkbox"/>
		Payment Breakdown Form:	<input type="checkbox"/>
		Others:	<input type="checkbox"/>

Paper survey
→ TP report
→ Pls upload report & invoice in Merimen.

COPY SENT
28/05/14

FINAL SETTLEMENT	Date :	Confirm with	BOLA S/N No. :
Repair Cost:	SS	Final Liability	If NO or B 28, Ass. Lia :
Loss of Rental:	SS	(days)	
Loss of Use:	SS	(\$ x days)	1) Claim status: Normal/Reject/Private Settle
Disbursement:			2) Report Form Report Format : <u>One 100 + 120</u>
Legal Cost	SS		3) Survey fee: <u>\$150.00</u>
Total:	SS	Global Sum: SS	<u>Paper survey - TP.</u>

(08/11/13) PRE

REF: Mth

Surveyor: Arj

VSS

ASSIGNMENTFrom: _____ Date: 07/05/14

Estimated Cost: _____

OD (P) / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: SJP 4913Lat Workshop m/s Em Solutionof Blk 17 Sin Ming # 01-59

Insured: _____

Policy No. _____

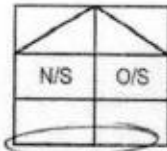
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SJP 4913L Yr Regn: Mar / 2009Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Kia Cerato Forte 1.6(m) Ex ABS DAB c.c. 1591Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 139508 T/Radio: Insured / Std / NI / NAEng/No: GAFCH222497C/No: KRAPH221295024165Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 215 / 45 R17R: 215 / 45 R17

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

TOYO / YOKO or Roadstone

Front

Rear

R/Bal. 8 mm R/Bal. 8 mmL/Bal. 8 mm L/Bal. 8 mmD.O.A. _____ D.O.I. 7/5/14Survey held at Em SolutionDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop orRear

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

Date / Time Action / Instruction

7/5/14 1230hr- TPD- GIA

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format : _____

Lump Sum / I.B.I: (\$ _____)

Jojo Ngai

From: Elangkovan, Sulosana [Sulosana.Elangkovan@aig.com]
Sent: Monday, 5 May, 2014 11:18 AM
To: SUR; Admin-A (LKK Auto); Admin-C (LKK Auto)
Cc: Chandrahekanan, Mooventhiran; Tong, Fong Fong; Kunnasiger, Vimalan; Lopez, Kristelli; Tan, Lily (AIG)
Subject: Pre repair inspection request - SJP4913L VS SJF4948P (OI) DOA 26/04/2014
Attachments: SJF4948P-PRI.TIF

Hi,

Please refer to the enclosed request from VISION LAW LLC.

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

Claim no : 6974464812SG

Case Owner : To be advised

Thank you.

Regards,

Sulosana
AIG
Claims Department
Global Operations and Systems | AIG Shared Services
sulosana.elangkovan@aig.com

IMPORTANT NOTICE:

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by American International Group, Inc. or its subsidiaries or affiliates either jointly or severally, for any loss or damage arising in any way from its use.

Sally Chong

From: Sally Chong <sallychong@visionlawllc.com>
Sent: Monday, 5 May, 2014 10:43 AM
To: 'admin-c@lkkauto.com'; sur@lkkauto.com
Cc: EMAUTO (emautosolution@singnet.com.sg); 'admin-a@lkkauto.com'
Subject: Our Ref.: E21-misc.14 (SJP 4913L @ 26/4/14) Yr Ref.: SJF 4948P (AIG Asia Pacific)

VERY URGENT

Dear Sir,

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS PURSUANT TO PARAGRAPH 6.2 OF PRE-ACTION FOR NIMA CASES

CLAIMANT: CHONG HAI CHOO

ACCIDENT INVOLVING SJP 4913L & SJF 4948P ON 26 APRIL 2014 ALONG WOODLANDS CAUSEWAY BRIDGE BEFORE MALAYSIA IMMIGRATION AT ABT 12:40 HRS

We act for E M SOLUTION PTE LTD who has been entrusted with motor vehicle no. **SJP 4913L** with instructions to repair the same.

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

Venue : **E M SOLUTION PTE LTD**

Block 17, #01-59, Sin Ming Industrial Estate Sector A, Singapore 575675

Contact : Mr. Bernard / Ms. Ivy (Tel.: 6456-0226 / 9101-8302)

If you fail to conduct the pre-repair inspection within the next 2 working days excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference to you.

Thank you.

Sally Chong
VISION LAW LLC
133 NEW BRIDGE ROAD,
#18-01/02, CHINATOWN POINT,
SINGAPORE 059413
TEL.: 6534-2811 (ext 115)

C.c.: AIG (Fax : 6415 3727)

FOR SURVEYOR

Please initial here after completion of pre-repair inspection. Thank you.

Appointed Surveyor:
(Name & Signature)

Date & Time of Inspection:

02/05 veh in

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 willful 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	05/05/2014 16:52
Date Of Accident	26/04/2014 12:40
Exact Location Of Accident	WOODLANDS CAUSEWAY BRIDGE BEF MALAYSIA IMMIGRATION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJP4913L
Insured/Policyholder	
Name Of Registered Owner	CHONG HAI CHOO
NRIC No	S1327514I
Vehicle Particulars	
Manufacturer	KIA
Model	CERATO FORTE 1.6(M) EX ABS D/AB 2WD 4DR
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	AIG Asia Pacific Insurance Pte. Ltd.
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100129074
Cover Note Number	
Driver	
Name of Driver	NG TIEN MING, FRANCIS
NRIC No	S8218649B
Date Of Birth	09/06/1982
Occupation	Indoor
Date Of Driving Pass	19/07/2003
Driving Experience	10 Years And 9 Months
Gender	Male
Mobile Number	(Local) +65-90096881
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	BLK 325A SENGKANG EAST WAY #15-505
Postcode	541325
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 Collision- Head to Rear (TP Hit Insured)

Weather Conditions Clear

Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident? No

Was any body injured in the Accident? No

Was any other material or property damaged? Yes

Was there any video captured by Car Camera? No

Details of Police Action

Was the accident reported to the police? No

If Yes, Please state which Police Station

Was notice of intended Prosecution given? No

If Yes, against whom?

Circumstances of Accident

Refer to attachment

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJF4948P

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address


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 Authorized 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 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.

Sketch Plan



A - SJP 4913L
B - SJP 4948P

Describe Circumstances of the Accident

On this date: 26/4/14 (at about: 12:40 pm hrs) (was/was driving / riding / reversing / parking)

My vehicle registration number: SJP 4913L (at / along: Woodland Causewaybridge before Malasia Immigration)

Heavy traffic slow moving vehicle, rear vehicle collided into the rear of my vehicle. Driver of SJP 4948P had initially wanted to pay for my vehicle repair but until Friday 2/5/14 he then told me to claim from his insurance company. That's why I'm late reporting.

Signature

Date

HO

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	28/04/2014 11:18
Date Of Accident	26/04/2014 12:00
Exact Location Of Accident	SINGAPORE TOWARD M'SIA (BRIDGE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJF4948P

Insured/Policyholder

Name Of Registered Owner HASSAN BIN YAAKOB
NRIC No S7204635H

Vehicle Particulars

Manufacturer DAIHATSU
Model F700RG-GQDF TERIOS SX 1.5 AT
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 Private Car

Insurance Company

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type Of Coverage Comprehensive
Fleet Policy No
Policy Number 2100259244-02000
Cover Note Number

Driver

Name of Driver HASSAN BIN YAAKOB
NRIC No S7204635H
Date Of Birth 13/02/1972
Occupation Outdoor
Date Of Driving Pass 27/10/1993
Driving Experience 20 Years And 5 Months
Gender Male
Mobile Number (Local) +65-82015857
Fax Number
Contact Number
Email Address sanhash@yahoo.com
Address
Postcode

Was driver an employee of the Insured's Company No

Condition (CON)

(1)13 Rear (2)20 Dented (3)30 Distorted (4)40 Cracked (5)50 Cut (6)60 Scratched
(7)70 Deformed (8)80 Shifted (9)90 Buckled (10)100 Broken (11)Necessary
(12)Missing (13)Torn (14)Unconfirmed (15)Not Working

MOTORCAR (Rear)

(1)13 Repeat (2)20 Not Constant (NC)

Rear Portion King Cords Fork (2009)

AKA

7/5/14

Vehicle No: SSP 4913L

NAC	INC	Item	CON	AC	Qty
1137	993626	Rear Number Plate			
1138	993627	Rear Number Plate Base			
1139	993630	Rear Number Plate Garnish			
1140	993632	Rear Number Plate Lamp			
1141	992958	Rear Bumper	DD	/	
1142	993085	Rear Bumper Upper			
1143	993017	Rear Bumper Lower			
1144	993054	Rear Bumper Side			
1145	993103	Rear Bumper Tow Cover			
1146	992341	Rear Bumper Clips	NEC	/	6
1147	992976	Rear Bumper Bracket	br	/	2
1148	993068	Rear Bumper Side Retainer	8r	/	2
1149	993045	Rear Bumper Reinforcement			
1150	992970	Rear Bumper Beam			
1151	993077	Rear Bumper Sponge			
1152	992999	Rear Bumper Damper			
1153	993040	Rear Bumper Protector			
1154	993036	Rear Bumper Pad			
1155	993026	Rear Bumper Moulding			
1156	993044	Rear Bumper Reflector			
1157	993023	Rear Bumper Lower Spoiler			
1158	994023	Reverse Sensor			
1159	993327	Rear End Panel			
1160	993339	Rear End Panel Top Garnish			
1161	993333	Rear End Panel Inner Trim			
1162	990333	Boot Compartment Inner Trim			
1163	993851	Rear LH Taillamp			
1164	993853	Rear LH Taillamp Garnish			
1165	993859	Rear LH Taillamp Panel			
1166	995116	Rear RH Taillamp			
1167	993853	Rear RH Taillamp Garnish			
1168	993859	Rear RH Taillamp Panel			
1169	993554	Rear Apron Panel			
1170	992895	Bootlid			
1171	991328	Bootlid Emblem			
1172	990356	Bootlid Handle			
1173	995250	Bootlid Moulding			
1174	990376	Bootlid Reflector			
1175	995222	Bootlid Lamp LH			
1176	992899	Bootlid Lamp RH			
1177	995243	Bootlid Lock			
1178	990377	Bootlid Rubber			
1179	990382	Bootlid Hinge			
1180	993877	Bootlid Spoiler			
1181	994543	Tailgate			
1182	991328	Tailgate Emblem			
1183	994643	Tailgate Outer Handle			
1184	994640	Tailgate Moulding			
1185	994545	Tailgate Garnish			
1186	994648	Tailgate Reflector			
1187	994549	Tailgate Lamp			
1188	994646	Tailgate Protector			
1189	994676	Tailgate Wiper Arm			
1190	994677	Tailgate Wiper Blade			
1191	994679	Tailgate Wiper Nozzle			
1192	994555	Tailgate Wiper Motor			
1193	994602	Tailgate Glass			
1194	994606	Tailgate Glass Rubber			
1195	994604	Tailgate Glass Moulding			
1196	994607	Tailgate Glass Sealant			
1197	994629	Tailgate Lock			
1198	994651	Tailgate Rubber			
1199	994611	Tailgate Hinge			
1200	994594	Tailgate Damper			
1201	994613	Tailgate Inner Board			

NAC	INC	Item	CON	AC	Qty
1202	993784	Spare Tyre Board			
1203	994328	Spare Tyre Panel			
1204	995065	Spare Tyre			
1205	994326	Spare Tyre Lock Screw			
1206	993787	Spare Tyre Cover			
1207	995323	Triangle Breakdown Sign			
1208	990507	CD Changer Assy			
1209	990164	Antenna			
1210	990534	Centre Exhaust Pipe Assy			
1211	990532	Centre Exhaust Mounting			
1212	993364	Rear Exhaust Pipe			
1213	993357	Rear Exhaust Chrome Pipe			
1214	993361	Rear Exhaust Mounting			
1215	993358	Rear Exhaust Heat Shield			
1216	995223	Rear LH Chassis Member			
1217	993165	Rear RH Chassis Member			
1218	993436	Rear LH Fender			
1219	993449	Rear LH Fender Protector			
1220	993420	Rear LH Fender Inner Panel			
1221	993431	Rear LH Fender Inner Trim			
1222	993415	Rear LH Fender Inner Garnish			
1223	993425	Rear LH Fender Inner Shield			
1224	993621	Rear LH Mudflap			
1225	993933	Rear LH Wheel Rim			
1226	994025	Rear LH Rim Cover			
1227	995065	Rear LH Tyre			
1228	993456	Rear RH Fender			
1229	993450	Rear RH Fender Protector			
1230	993420	Rear RH Fender Inner Panel			
1231	993431	Rear RH Fender Inner Trim			
1232	993415	Rear RH Fender Inner Garnish			
1233	993425	Rear RH Fender Inner Shield			
1234	993622	Rear RH Mudflap			
1235	993934	Rear RH Wheel Rim			
1236	994025	Rear RH Rim Cover			
1237	995065	Rear RH Tyre			
1238	995162	Rear Fender Extension Panel LH			
1239	993401	Rear Fender Extension Panel RH			
1240	993430	Rear Fender Inner Top Garnish			
1241	993673	Rear Fender 1/4 Glass			
1242	993452	Rear Fender 1/4 Glass Rubber			
1243	993453	Rear Fender 1/4 Glass Sealant			
1244	993949	Rear Windscreen Glass			
1245	993976	Rear Windscreen Rubber			
1246	993961	Rear Windscreen Moulding			
1247	993955	Rear Windscreen Sealant			
1248	994729	Third Brake Light			
1249	993385	Rear Fender Air Grille			
1250	992167	Fuel Lid			
1251	992168	Fuel Neck			
1252	992179	Fuel Tank			
1253	992184	Fuel Tank Bracket			
1254	992191	Fuel Tank Float			
1255	990247	Sticker			

No of Items: _____

Assessor: _____

2 days

[Signature]

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

PR1

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth ed	Status
Main	05 May 2014 00:00 Edit Reg		05 May 2014 00:00 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All				
CLAIM SUBFOLDER DETAILS [Created by adjuster]								
Insured: HASSAN BIN YAAKOB, NRIC: S7204635H								
Main Claimant: CHONG HAI CHOO, NRIC: S13275141								
Vehicle Reg. No.: SJP4913L Date of Loss: 26/04/2014 12:00 - :59								
Claim Type: TP / 6974464812SG Policy/Cover Note No.: 2100259244 (Comprehensive) Coverage: 30/05/2013 - 29/05/2014								
Vehicle Reg. No. (Insured): SJF4948P Policy No. (Claimant): 2100129074								
Repairer: E M Solution Pte Ltd (HQ) BLOCK 17, #01-59 SIN MING INDUSTRIAL ESTATE SECTOR A, 575675 Sin Ming - Tel: 64560226								
Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. (SG) - Tel: 65-6419-3000 ... [Handled by Ngu, Elaine-SM]								
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 THANARAJ KRISHNASAMY] ... [Final Rpt due 15/05/2014]								
Driver/Custodian (Insured): HASSAN BIN YAAKOB (), NRIC: S7204635H								
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	Done?
No results.								

Claim Documents

*SJP4913L (6974464812SG)
[SJF4948P]

TP
CHONG HAI CHOO
[HASSAN BIN YAAKOB]

Upload Documents			Upload Photos			Compose New Letter			View Use Viewer		
Photos/Images						3 per page			<input checked="" type="checkbox"/>		
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)				Thumbnail			Print		
1	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
2	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
3	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
4	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
5	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
6	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
7	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
8	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
9	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
10	07/05/14 18:07	General View					Load JPG			<input checked="" type="checkbox"/>	
11	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
12	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
13	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
14	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
15	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
16	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
17	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
18	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
19	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
20	07/05/14 18:08	General View					Load JPG			<input checked="" type="checkbox"/>	
21	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
22	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
23	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
24	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
25	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
26	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
27	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
28	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
29	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
30	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
31	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
32	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
33	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
34	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
35	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
36	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
37	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
38	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
39	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
40	07/05/14 18:09	General View					Load JPG			<input checked="" type="checkbox"/>	
Documentation						1 per page			<input checked="" type="checkbox"/>		

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	28/05/14 11:46	TP GIA REPORT	Load PDF	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	06/05/14 10:44	OI GIA REPORT	Load PDF	

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: account@lkkauto.com;admin-c@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/AIG14008289/PB3D1
Date: 28/05/2014

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100259244
Claimant Vehicle No: SJP4913L Insured Vehicle No: SJF4948P
Date of Loss: 26/04/2014 Nature of Claim: TP Claim No: 6974464812SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SJP4913L Engine No: G4FC8H222497
Make & Model: KIA CERATO FORTE, 1.6 EX (M) Chassis No: KNAFH221295024165
Reg. Date: 26/03/2009 (Man. Year: 2008) Odometer: 139508 km
Colour: Silver
Engine Capacity: 1591 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: Steering (Serviceable): Yes Footbrake (Serviceable): Yes
Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition: Yes

CONDITION OF TYRES

Front Tyre Size: 215/45R17 Rear Tyre Size: 215/45R17
Front Left Side: Roadstone 8 mm Rear Left Side: Roadstone 8 mm
Front Right Side: Roadstone 8 mm Rear Right Side: Roadstone 8 mm

The above values represent the remaining tyre treads depth

	Repairer's	Adjuster's	Difference	Diff %
COST OF CLAIMS				
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (\$\$)	0.00	0.00	0.00	
Global Sum Settlement (\$\$)		0.00		

INSPECTION

Date of Assignment: 05/05/2014
Date Inspected: 07/05/2014 Inspected At: E M Solution Pte Ltd (HQ)
Est Repair Period: 2.0 days BLOCK 17, #01-59 SIN MING
INDUSTRIAL ESTATE SECTOR A
Singapore 575675

Adjuster: THANARAJ KRISHNASAMY

Manager: JOJO NGAI SIEW WEN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Dented	-	-
2	6		*REAR BUMPER CLIPS	Necessary	-	-
3	2		*REAR BUMPER BRACKET	Broken	-	-
4	2		*REAR BUMPER SIDE RETAINER	Bent	-	-
5	1		*REAR BUMPER REINFORCEMENT	* Check	-	-
6	1		*REVERSE SENSOR	*Check	-	-
Total Parts (S\$)					0.00	0.00

Report was unsubmitted during this print-out.

Adjuster Report

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >

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	28/04/2014 11:18
Date Of Accident	26/04/2014 12:00
Exact Location Of Accident	SINGAPORE TOWARD M'SIA (BRIDGE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF4948P
Insured/Policyholder	
Name Of Registered Owner	HASSAN BIN YAKOB
NRIC No	S7204635H

Vehicle Particulars

Manufacturer	DAIHATSU
Model	F700RG-GQDF TERIOS SX 1.5 AT
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	Private Car

Insurance Company

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100259244-02000
Cover Note Number	

Driver

Name of Driver	HASSAN BIN YAKOB
NRIC No	S7204635H
Date Of Birth	13/02/1972
Occupation	Outdoor
Date Of Driving Pass	27/10/1993
Driving Experience	20 Years And 5 Months
Gender	Male
Mobile Number	(Local) +65-82015857
Fax Number	
Contact Number	
Email Address	sanhash@yahoo.com
Address	
Postcode	
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 (Insured Hit TP)
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No

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

Are accident photos available for attachment?	Yes
---	-----

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJP4913L
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

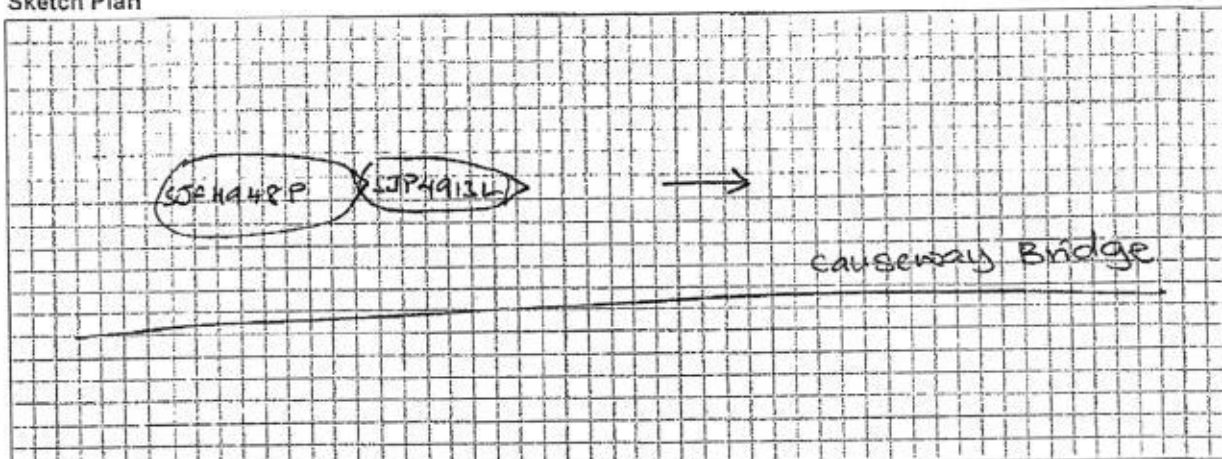
Details of Witness

Name	
Phone Number	
Email Address	

SKETCH PLANIMPORTANT 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 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.

Sketch Plan



Describe Circumstances of the Accident

During the jam at causeway bridge. I accidentally hit the back of a car. (KIA FORTE licenced plate SOP4913L). While ~~the~~ my car is engaged at D, I failed to step my brake fully. Unknowingly my car slowly moved and hit the back of the car.

Declaration

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

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO

Accident Photo



Accident Photo



Accident Photo



Accident Photo



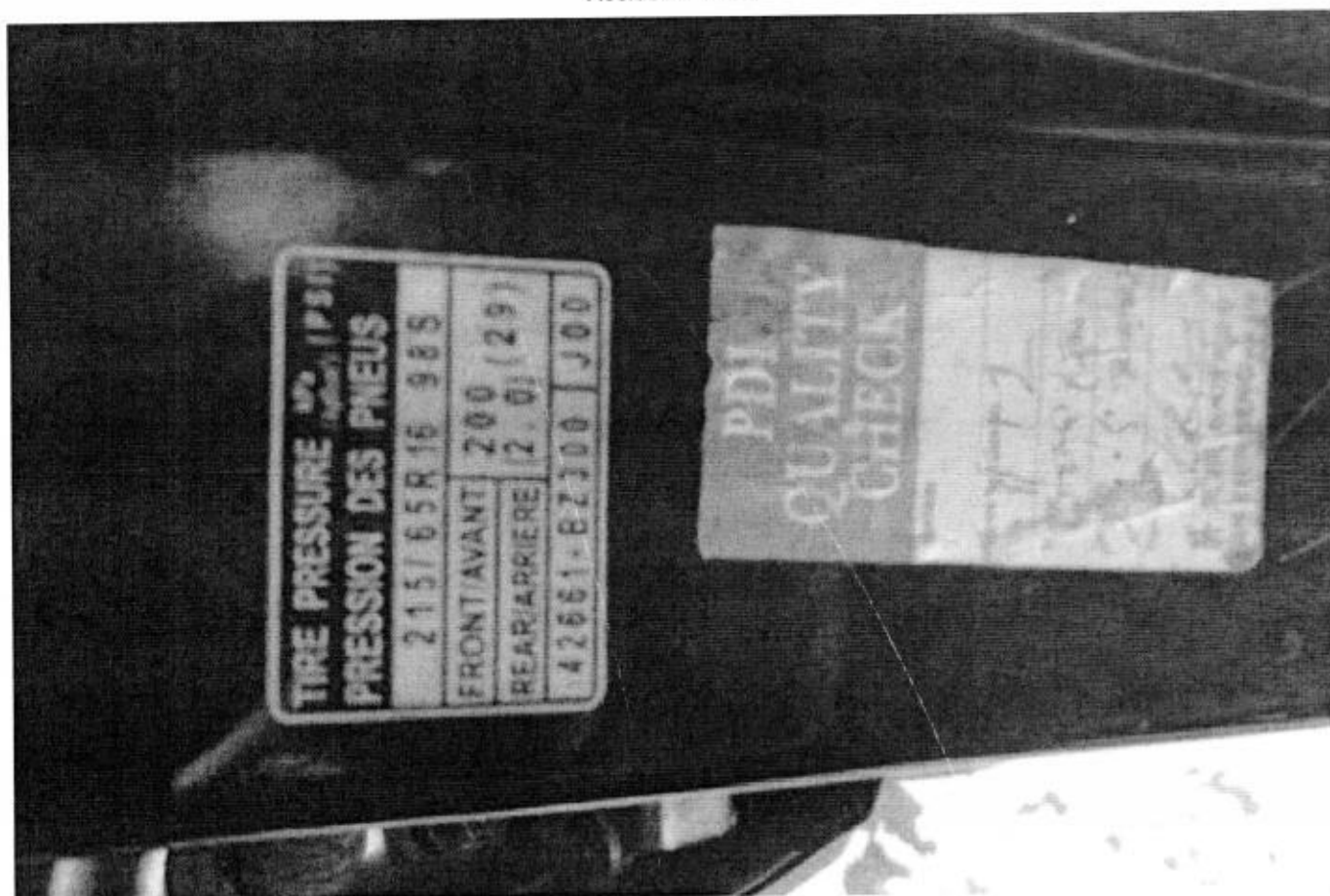
Accident Photo



Accident Photo



Accident Photo



Hsiao Tong (LKKAuto)

From: Alvin Yit <alvinyit@fta.com.sg>
Sent: Monday, 4 June 2018 10:05 AM
To: Hsiao Tong (LKKAuto)
Cc: Syed-Yusoff, Saliha
Subject: RE: #6974464812SG003#027#

Dear Hsiao Tong,

As spoken, please upload your paper survey report/ invoice in merimen and let us know when this is done. Thank you!

Alvin Yit

From: Syed-Yusoff, Saliha <Saliha.Syed-Yusoff@aig.com>
Sent: Friday, 1 June, 2018 3:20 PM
To: Alvin Yit <alvinyit@fta.com.sg>
Subject: RE: #6974464812SG003#027#

Dear Alvin,

please proceed.

thanks

Ht Bryan,
Paper Survey
(Alvin Yit).
You may refer
Merimen for photos.
Tg.

21/09/2018 Invoice 2/5 25001 -
with 2 days with
response.

PLEASE NOTE THAT CONTENTS OF THIS EMAIL SHOULD NOT BE CONSTRUED AS ANY ADMISSION OF LIABILITY ON THE PART OF OUR INSURED AND/OR INSURERS. WE HEREBY MAINTAIN FULL RESERVATION OF RIGHTS AND ALL DEFENCES AVAILABLE TO US

Saliha Syed Yusoff
AIG
Complex Claims Examiner
Claims | AIG Asia Pacific Insurance Pte. Ltd
78 Shenton Way #08-16 Singapore(079120)
Tel +(65) 6419 1917 | Fax +(65) 68357416
saliha.syed-yusoff@aig.com | www.aig.com.sg

To close and forward
Paper survey report
to Alvin Fit. FTA.
for his handling with
TP lawyers.

IMPORTANT NOTICE:

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by AIG for any loss or damage arising in any way from its use.

IMPORTANT NOTICE:

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must