From (Person	ehin le ying of	l Alg 18010079/1 SIGNMENT (Office) A lg	9	4/6/18/8 11.2
To Inspect V at Workshop	S/TP RES/OD RES/EVA/IN	8526P	Insured: SI	v 4545 K ss 7994
Policy No	I SIM DICI MAN	Claim No:		
Sum Insured		Excess:		
Make of Veh (Client's Recor			D.O.A.	31/05/2018
CA / REV Date/Time:	/ REP. / REV 24 HRS (UP) 1-240m@4/6/18 Person C	ontacted William	H.O.D. End	OUT
Date/Time	Action/Instruction (X) {	stimate		
	81C8526p-x	777		
	8LV 4545'K-X			
5 6 18	SLV 4545K-X			

Tech Invs (\$

Weekend (\$

Report Format:

Lump Sum / I.B.I: (S

) Others

TOTAL



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

Marin .	The Carrier of		rnationale Des Experts En Autor	nobile		
AIG	ASIA PACIFIC IN	SURANCE PTE LTD	Ref : CS3/AIG18010079/Dz4d3			
CHA	SHENTON WAY #0 ARTIS BUILDING GAPORE 079120	98-16	Date: 04-06-2018			
1.		Policy Particul	Code : AIG ars :- (THIRD PARTY CLA	IM)		
200	Insured Veh.	SLV 4545K	Veh. Inspected	SLC 8526P		
	Policy No.	301 101011	Coverage (\$)	0.00		
_	Claim No.		Excess (\$)	0.00		
	Assign From	CHIN LEE YING	Assign Date	04/06/2018		
2.	Driver of Notice		Particulars & Condition	04/00/2010		
100	Make & Model	Verilcie	c.c	0		
	Engine No.	HIDDEN	Year of Reg.	•		
	Chassis No.		Colour			
	Odometer	12	Steering			
	Brakes		Modification			
	General					
3.		Co	nditions of Tyres			
		Size	Make	Balance		
	R/H Front Tyre			mm		
	L/H Front Tyre			mm		
	R/H Rear Tyre			mm		
	L/H Rear Tyre			mm		
4.	A SCHOOL SEC	Desc.	ription of Damages			
5.	Lifeniuse May 15	Ger	neral Information			
	Accident Date	31/05/2018	Inspection Date	04/06/2018		
	Survey held at	NO.2 KAKI BUKIT AVE 2 #				
	Repairer	WILLIAM LEE CAR AIR CO	N ENGINEERING			
ā.	Gerand		Remarks	THE WELLSTON		
	B) THE REPAIR E: THE REPAIRER W	ON WAS CONDUCTED ON A STIMATE WAS NOT PRESEN (AS TOLD TO PREPARE THE EASE FIND DAMAGED VEH	"WITHOUT PREJUDICE" BAS NTED AT THE TIME OF INSPE E ESTIMATE. ICLE PHOTOGRAPHS.	SIS. CTION.		

Nivitha (LKK Auto)

From:

Chin, Lee-Ying <Lee-Ying.Chin@aig.com>

Sent:

Monday, 4 June 2018 11:22 AM

To:

assignments@lkkauto.com; Admin A

Cc:

Fong, Andy-SY

Subject:

FW: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE

SLV4545K AND SLC8526P ON 31/05/2018

Attachments:

Fax13BE.TIF

Hi LKK,

Kindly assist to survey.

Thanks.

Best Regards

Lee Ying, Chin

AIG

Claims | AIG Asia Pacific Insurance Pte. Ltd. 78 Shenton Way #08-16 Singapore 079120 Tel +(65) 6419 1947 | Fax +(65) 6835 7416 Lee-Ying.Chin@aig.com | www.aig.com.sg

IMPORTANT NOTICE:

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To:68357416

TOMMY CHOO, MARK GO LLC

Commissioner For Oaths Advocates & Solicitors UEN NO: 201523418E

(a law corporation with limited Hability)

Notary Public

151 CHIN SWEE ROAD #14-18/16 MANHATTAN HOUSE SINGAPORE 199876 TEL: (65) 6532 2455 FAX: (65) 6538 9860 (Services of Court Documents By Fax Not Accepted)

EMAIL: Iblinemicms.com.sg:mdmling@temg.com.sg
Our Ref: TCMG/SLC8526P/0618/WLC

Your Ref: SLV 4545 K

2 June 2018

M/s AIG Asia Pacific Insurance Pte Ltd 78 Shenton Way#07-16 Singapore 079120 AIG Building

BY FAX NO. 6835 7416 ONLY

Attn: Motor Claims Department

Dear Sirs,

PRE-REPAIR INSPECTION NOTICE

We act for Koek Boon Hwa, the owner and/or driver of motor vehicle no. SLC 8526 P, which was involved in an accident along Stadium Boulevard Round about on 31 May 2018 at 21:40 hours.

SLV 4545 K for damages and/or injuries, costs and disbursements as a result of your insured's We hereby give you NOTICE that we are claiming against your insured motor vehicle no.

Kindly let us know if you wish to conduct a pre-repair inspection on our client's motor vehicle at M/s William Lee Car Air Con, (No: 2 Kaki Bukit Auto hub #01-33 Singapore – William @ If we do not hear from you within the next two (2) working days, we shall deem that you have waived the requirement for the pre-repair inspection.

Yours (a) Khruik.

LING LEONGHOI (MR)

M/s William Lee Car Air Con (Yref: SLC8526P)

BY EMAIL

6/19/2018 E-FILE

MLHM18071374 / Lai Huaf (Meng Kee) Motor Pte Ltd - Sin Ming ENTRY DATE & TIME: 01/06/2018 18:01 SUBMITTED BY: Jenny Lim Lai Foong

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 witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies,
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report 01/06/2018 18:01 Date Of Accident 31/05/2018 21:40

Exact Location Of Accident STADIUM BOULEVARD ROUNDABOUT

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

PRIVATE USE

NO

Vehicle Registration Number SLC8526P

Insured/Policyholder

Name Of Registered Owner KOEK BOON HWA

NRIC No S1379585A Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-97866377

Alternative Phone No Others-97866377

Vehicle Particulars

Manufacturer MAZDA

Model 3

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?

THIRD PARTY If No. Please state action to be taken

Vehicle Category PRIVATE CAR

Insurance Company

SOMPO INSURANCE SINGAPORE PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

Fleet Policy

Policy Number D18MTPV01008979

Cover Note Number

Driver

KOEK JIN Name of Driver S8942919F NRIC No Date Of Birth 25/11/1989

OUTDOOR Occupation 19/06/2009 Date Of Driving Pass

6/19/2018

E-FILE

Driving Experience

8 YEARS AND 11 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-98378399

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

BLK 936 HOUGANG STREET 92 #12-57

Postcode

530936

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 - CHANGE/CROSS LANE

Weather Conditions

DRIZZLING

Road Surface

WET

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 NO

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN.

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

SLV4545K

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

CHWAY CHUN WHYE

6/19/2018

E-FILE

NRIC/Passport Number

S1691048A

Contact Number

97381486

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

6/19/2018 E-FILE

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 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.

Policyholder's Signature Date & Time:

- 1 JUN 2018

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

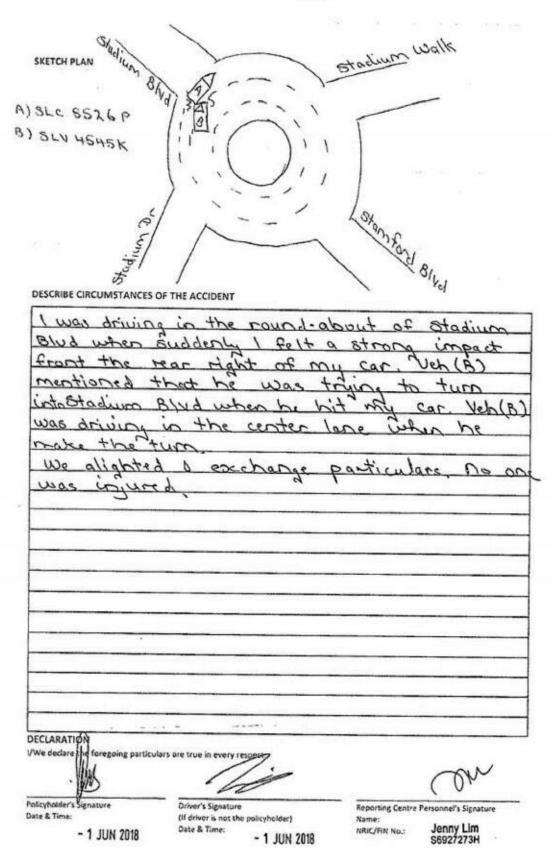
Date & Time:

- 1 JUN 2018

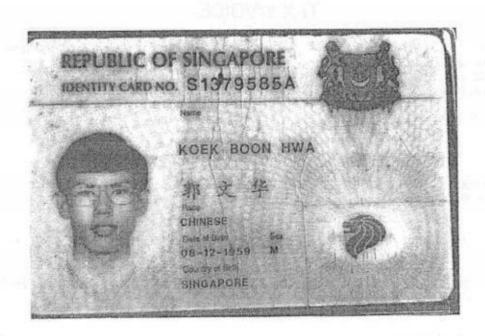
Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Jenny Lim S6927273H 6/19/2018



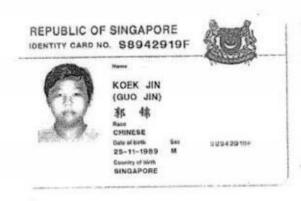
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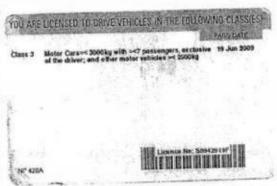
Owner

Driver's NRIC + Driving License









8LC 85277 DOA 31/05/2018

1.) Ru buy XI cont

2.) Rav bry chy X 1 set Hu

3.) Rev 7H Fender X 1 Pender

4.) Ra RH wheel rim x1 cm

5.) RN wondswer scalent X 1 Nuc

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

	Notified	Est Submitted	Adj Assigned	Adj Rpt		Adi Subr	nitted	Ins Auth'ed	Status		
Main	20 Jun 2018 Edit Reg	Est Submitted	04 Jun 2018 00:00 Edit Adj Rpt	S\$0.00 Edit Estimat	tes	S\$0.00 View Rp	errig		Pending for Survey Report Cancel Case		vey
	Main	Re	ference		laim [Details		Documen	nts	<u> </u>	how All
CLAIM S	UBFOLDER DE	TAILS	STATE OF THE PARTY OF THE PARTY.	The collection of the collecti	Section 10		[Create	ed by adjuster]			
insured:	CHWAY C	HUN WHYE, ID	S1691048A								
Main Claimant:	коек во	O HWA, ID: S1	379585A								
Vehicle Re	g. SLC852	6P			Date	of Loss:	oss: 31/05/2018 21:00 - :59 [24 Months and 4 Days From LTA Reg Date (Ma				an Yr)]
Claim Typ	e: TP / 008	36675743SG				y/Cover No.:	r 1700087676 (Comprehensive) Coverage: 11/12/2017 - 10/12/2018				
Vehicle Re No. (Insured)	SLV4545	ĸ				y No. imant):					
(znoured)					Exce						
Repairer:	William L	ee Car Air Con () KAKI BUKIT AL	лонив, #02	-17, 4	17921 Kal	ki Bukit -	Tel: 94557994		0 47401 0	
Handling Insurer:	WZ Tan@a	Pacific Insurance							2	100000000000000000000000000000000000000	
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Har	ndled by I	BRYAN T	ANI] [Final	Rpt due 2	8/06/20	18]
Claimant' Solicitor:	томму (CHOO, MARK GO	LLC - Tel: 65322	2455							
ASSOCI	ATED MAIL RE	ECEIVED							View All	Compose	e Case Ma
AIG_S	G (20/06/2018)	: Request To Up	load TP GIA Re	port							
ALL ASS	OCIATED TA	sks⊟					View /	All Search Tasks	Create N	lew Task	Comple
Due Da	THE VEHICLE AND THE PARTY OF TH	Type Task	Group Sub	ject Han	dler	Assigr	ned By	Completed C	n Cre	ated On	Don

Claim Documents

*SLC8526P (0086675743SG)

[SLV4545K]

TP

KOEK BOO HWA

May 31 2018 9:00PM

[CHWAY CHUN WHYE]

William Lee Car Air Con

Upload Documents Upload Photos Compose New Letter Upload Video Upload Audio			View in Brow	1	
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74		Dismantled Parts	0	Load JPG	-
75		Photo After Spray	0	Load JPG	1
76		Photo After Spray	0	Load JPG	
77		Photo After Spray	0	Load JPG	
78		Photo After Spray	0	Load JPG	1
79		Photo After Spray	0	Load JPG	1
80		Photo After Spray	0	Load JPG	1
81		Photo After Spray	0	Load JPC	3
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Documentation		1 per	page ▼	•	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)		Thumbnail	Print
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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:

CS3/AIG18010079/DZ4D3S2

Date:

22/06/2018

REFERENCE

Date of Loss:

Handling Insurer:

AIG Asia Pacific Insurance Pte. Ltd.

SLC8526P

Claimant Vehicle

31/05/2018

Policy No:

Insured Vehicle No:

Nature of Claim:

SLV4545K

TP

1700087676

Engine No:

Chassis No:

Odometer:

0086675743SG Claim No:

P520356895

39634 km

JM6BM42A8G0337789

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

No:

SLC8526P

Make & Model:

MAZDA 3, 1.5 (A)

27/05/2016 (Man. Year: 2016) Reg. Date: Colour

Engine Capacity: Market Value/New Car Price:

1496 cc N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Good

Steering (Serviceable):

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes

Engine Modification:

Inspected At:

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

205/60R16

Rear Tyre Size:

205/60R16

Front Left Side: Front Right Side: Toyo 5 mm Toyo 5 mm Rear Left Side:

Toyo 5 mm

Rear Right Side:

Toyo 5 mm

The above values represent the remaining tyre treads depth

			D:## 0/
Repairer's	Adjuster's	Difference	Diff %
0.00	0.00	0.00	
0.00	0.00	0.00	
0.00	0.00	0.00	
0.00	0.00	0.00	
0.00	0.00	0.00	
0.00	0.00	0.00	
	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

INSPECTION

Date Inspected:

Date of Assignment:

04/06/2018

04/06/2018

NO.2 KAKI BUKIT AVE 2 #01-32

Repairer: William Lee Car Air Con KAKI BUKIT AUTOHUB, #02-17

Singapore 417921

Estimated Period of Repair:

4.0 days

BRYAN TANI Adjuster:

Manager:

Ho Zhao Tian

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

	Qty Part No.	d Parts Particulars	Condition	Repairer's	Amount
1	1	*REAR BUMPER	Cut	0.00 F	*- F
2	4	*SET REAR BUMPER CLIP	Necessary	0.00 F	*- F
3	1	*REAR RH FENDER	Dented	0.00 F	*- F
4	1	*REAR RH WHEEL RIM	Cut	0.00 F	*- F
5	1	*REAR WINDSCREEN SEALANT	Necessary	0.00 F	*- F
F=Fra	anchise part.		Total Parts (S\$)	0.00	0.00

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 >