



CYCLE & CARRIAGE

(V.Vin)

Our Ref : SGZ1193A ✓

Your Ref : FBL1602U ✓

July 31, 2019

AR. REGISTERED

LKK Auto Consultants Pte Ltd.
51 Ubi Avenue 1
#01-25 Paya Ubi
Industrial Park
Singapore 408933

Attention: Motor Claims

Cc: AXA INSURANCE SINGAPORE PTE LTD
8 SHENTON WAY #27-01 AXA TOWER
SINGAPORE 068811

Dear Sir/Madam,

Repair Services Rendered to Vehicle Reg. No. SGZ1193A – Accident on 04/07/2018
ALONG LORONG 6 TOA PAYOH

We are pleased to enclose our invoice number 77453023 dated 23/07/2019 amounting as follows:

Cost of Repair	S\$ 3659.40
Loss of Use 02 days x S\$80/Day	S\$ 160.00
LTA Search Fee	S\$ 2.00

Grand Total	S\$ 3821.40
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In addition, attached are the supporting documents of repair services rendered to the abovementioned vehicle.

Please acknowledge receipt of the same.

Thank you.

Yours sincerely



Cycle & Carriage -Fulco Motor Dealer Pte Ltd
Eunos Service Centre

Encs.



330 Ubi Road 3 Singapore 408650 Tel: 67461000 Fax: 64875857



Co Reg No : 199707303Z

GST Reg No : 19-9707303-Z

Any dispute to the invoice must be made within 3 days.
Cheques should be crossed and made payable to CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD - (SERVICE)
This is a computer generated document, no signature is required.

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-18-103716
Date of Request: 07/07/2018

Your Ref No: Online Purchase

Cycle & Carriage Fulco Motor Dealer Pte Ltd
330 Ubi Road 3
Singapore 408650

Dear Sir/Madam,

Enquiry Date 07/07/2018
Enquiry By Mars Ler Yeong Cherng
TP Vehicle No. FBL1602U
Accident Date 04/07/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
FBL1602U	AXA Insurance Pte Ltd	21/06/2018-20/06/2019	6338 7288

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

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TAX INVOICE

Our Ref No: GR-18-103716
Date of Request: 07/07/2018

Your Ref No: Online Purchase

Cycle & Carriage Fulco Motor Dealer Pte Ltd
330 Ubi Road 3
Singapore 408650

Dear Sir/Madam,

Enquiry Date 07/07/2018
Enquiry By Mars Ler Yeong Cherng
TP Vehicle No. FBL1602U
Accident Date 04/07/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD
EUNOS LINK SERVICE CENTRE
330 Ubi Road 3 Singapore 408650 Tel: 67461000 Fax: 64875857

REPAIRER : CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD - EUNOS LINK SERVICE CENTRE

MOTOR VEHICLE CLAIM DISCHARGE VOUCHER

ATTN: **AXA INSURANCE SINGAPORE PTE LTD**
8 Shenton Way, #27-01 AXA Tower
Singapore 068811

OWNER : TAN GEOK KIAN
VEHICLE MODEL : KIA/CERATO K3 1.6A SX
ACCIDENT DATE : 04/07/2018

VEHICLE NO : SGZ1193A
THIRD PARTY# : FBL1602U
WIP NO : 60785

I/WE CERTIFY THAT THE VEHICLE HAS BEEN FULLY REPAIRED TO MY ENTIRE SATISFACTION AND THE PAYMENT OF CLAIMABLE REPAIRER'S CHARGES ARE UNDER THE POLICY WILL BE DEEMED IN FULL AND THE FINAL SETTLEMENT OF MY CLAIMS.



OWNER/INSURED SIGNATURE

DATE :

TIME :

8/7/19

AUTHORISATION TO ACT

I/We, TAN GEOK KIAN (the third party claimant) of BLK 470 TAMPINES STREET 44 #11-200 SINGAPORE 520470 (address), owner of SGZ1193A (vehicle no.) hereby authorize CYCLE & CARRIAGE FULCO MOTOR DEALER PTE LTD ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. SGZ1193A that was damaged pursuant to the accident which occurred on 04/07/2018 (date) along LORONG 6 TOA PAYOH (location) involving vehicle no/s FBL1602U ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 07 (day) of JULY (month) 2018 (year)



Signed by "the third party claimant"
(with company stamp if applicable)



Signed by "the workshop"
(with company stamp)

LETTER OF AUTHORITY

ACCIDENT INVOLVING SGZ1193A AND FBL1602U ON 4/7/2018
Own Vehicle's Number Other Vehicle's Number Date Of Accident

Along LORONG 6 TOA PAYOH
Accident Location

BY THE LETTER OF AUTHORITY, I/We TAN GEOK KIAN
Name of Policy Holder & NRIC/Passport/Fin #

Of BLK 470 TAMPINES STREET 44 #11-200 SINGAPORE 520470
Address of Policy Holder

Owner of Vehicle Registration Number SGZ1193A hereby authorize **Cycle & Carriage-Fulco Motor Dealer Pte Ltd.** to act for me with respect to my claim for repair cost and/or Loss of Use ("claim")
Own Vehicle Number

for my vehicle SGZ1193A that was damaged.
Own Vehicle Number

I further Authorized **Cycle & Carriage-Fulco Motor Dealer Pte Ltd.** To settle my above mentioned claim in a manner that they deem fit and **Cycle & Carriage-Fulco Motor Dealer Pte Ltd.** Is further Authorize to Signed on my behalf & receive payment further to settlement cheque/s of my claim with payment being made in favour of **Cycle & Carriage-Fulco Motor Dealer Pte Ltd** I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis in so far as the driver/owner/insurers of the vehicle/s is concerned.

Dated this 7 JULY (Month) 2018 (Year)



TAN GEOK KIAN

Signed By Claimant/Policy Holder



Signed by "The Workshop"

LETTER OF DISCHARGE

We, CYCLE & CARRIAGE, FULCO MOTOR DEALER PTE LTD (workshop), hereby agreed and confirmed that we are authorized by the owner of motor vehicle SGZ1193A to accept the sum of \$ _____ (inclusive of Inte alia, damages, interests, loss of use, costs and disbursements) from M/s _____ the authorized surveyors of M/s AXA Insurance Singapore Pte Ltd, the Third Party's insurers, on this matter.

This acceptance is in full and final settlement of any claim made against FBL1602U pursuant to the road accident which occurred along LORONG 6 TOA PAYOH on 04/07/2018

We, CYCLE & CARRIAGE, FULCO MOTOR DEALER PTE LTD (workshop) are further authorized by the said owner that this settlement is reached on a strictly without prejudice basis on the part of M/s AXA Insurance Singapore Pte Ltd. And or their insured or other person or persons arising out of this said accident.

In consideration of the said payment by the said M/s AXA Insurance Singapore Pte Ltd, we, the said authorized workshop, shall fully discharge them from any further claim whatsoever in respect of the said accident.

We also declare that we are authorized by the said owner to receive the said settlement sum and hereby undertake to indemnify M/s AXA Insurance Pte Ltd, against any claim made or which may be made in respect of this matter.



For and on behalf of the owner of
(
(workshop stamp and authorized signature)

For and on behalf of M/s AXA
Insurance Singapore Pte Ltd

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	07/07/2018 10:31
Date Of Accident	04/07/2018 13:05
Exact Location Of Accident	LORONG 6 TOA PAYOH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGZ1193A
Insured/Policyholder	
Name Of Registered Owner	TAN GEOK KIAN
NRIC No	S1453430Z
Email Address	GKCHRISTINA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98342705
Alternative Phone No	HOME-67818873

Vehicle Particulars

Manufacturer	KIA
Model	CERATO K3-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	
Cover Note Number	1700060988

Driver

Name of Driver	YAN KWONG WAH
NRIC No	S1284573A
Date Of Birth	31/07/1958
Occupation	OUTDOOR
Date Of Driving Pass	27/04/1978
Driving Experience	40 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96353038
Fax Number	
Contact Number	HOME-67818873
Email Address	JOHNSONYANKW@GMAIL.COM

Address	BLK 470 TAMPINES STREET 44 #11-200 SINGAPORE
Postcode	520470
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	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

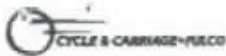
AS MY CAR WAS STOPPED AT JUNCTION LORONG 6 TOA PAYOH AWAITING FOR VEHICLES FROM TOA PAYOH NORTH FLYOVER TO GO FIRST (AS THEY GOT RIGHT WAY). SUDDENLY I FELT AN IMPACT FROM BEHIND, I REALIZED SCOOTER BIKE FBL1602U DRIVEN BY MISS NUR HANISAH BTE NORZRO NRIC NO: S9536742I RESIDING AT BLK 859A TAMPINES AVE 5 #10-605 S'PORE 521859 HAD COLLIDED ONTO MY LH REAR PORTION OF MY CAR. I WENT TO C&C MOTOR CLAIMS DEPT ON 05/07/18 AROUND 3PM TO ASSESS THE DAMAGE. MISS HANISAH DECIDED TO CLAIMS THE DAMAGE COST THROUGH HER INSURANCE COMPANY.

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	FBL1602U
Vehicle Make/Model/Colour	SCOOTER BIKE
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	NUR HANISAH BTE NORZRO
NRIC/Passport Number	S9536742I
Contact Number	91874018
Address	BLK 959A TAMPINES AVE 5 10-605
Postcode	521859
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



MOTOR ACCIDENT REPORT FORM

BASIC INFORMATION	
Date of Report:	7/7/18
Date of Accident:	4/7/18
Exact Location of Accident:	Lorong 6, Tan Payoh
Time: 1020	
Time: 1305	
DETAILS OF OWN VEHICLE	
Vehicle Registration Number:	SG21193A
Name of Registered Owner:	Tan Aek Kian
NRIC/Passport No./FIN:	S14534302
Company Reg. No.(for Company Veh):	-
VEHICLE PARTICULARS	
Manufacturer:	KIA
Model:	K3
Exact Purpose for which vehicle was being used at time of Accident	<input checked="" type="checkbox"/> Normal Usage <input type="checkbox"/> Others
Are You Claiming Under Your Own Insurance?	<input type="checkbox"/> YES <input type="checkbox"/> NO Reporting Only <input checked="" type="checkbox"/> NO 3rd Party
Vehicle Category	<input checked="" type="checkbox"/> Private car <input type="checkbox"/> Commercial Vehicle <input type="checkbox"/> Private Hire
INSURANCE DETAILS	
Name of Insurance:	ALG
Type of Coverage:	<input checked="" type="checkbox"/> Comprehensive <input type="checkbox"/> Third Party
Policy Number:	1700060988 (cover note)
Driver when the Accident Happen	
Name of Driver:	Yan Kwong Wah
NRIC/Passport/Fin No:	S1284573A
Date of Birth:	31/07/1958
Occupation:	Property Agent
Date of Driving Pass:	27/04/1978
Gender:	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
Mobile No.:	96353038
Home No.:	67818873
Address:	BLK 470 Tampines Street 44 #11-200 Singapore
Postal Code:	520470
Email Address:	johnson.yankw@gmail.com
Was the Driver an Employee of the Insured's Company:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No State the relationship of the driver to insured spouse
Vehicle Registration Number of driver's Own Vehicle:	-
Insurance Company:	-
OTHER INFORMATION OF THE ACCIDENT	
Type of Accident:	Third Party Hit Insured (Head to Rear)
Weather Condition:	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Raining <input type="checkbox"/> Others, please specify
Road Surface:	<input checked="" type="checkbox"/> Dry <input type="checkbox"/> Wet <input type="checkbox"/> Others, please specify
Was Anybody Injured:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Was Any other material or Property Damaged:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Number of Passengers(Including Driver):	1
Any Accident Photo in the Scene of Accident:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was there any video captured by your Camera?:	No
Was the Accident reported to police:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was there any audio recording?:	No
Which Police Station:	-
Was notice of Intended Prosecution given:	-
DETAILS OF OTHER VEHICLE (Please fill Annex A if more vehicles involve)	
Vehicle Registration Number:	FRL1602U
Name of Registered Owner:	-
NRIC/Passport No./FIN:	-
Company Reg. No.(for Company Veh):	-
Name of Driver:	Nur Hanisabbila Norzoi
NRIC/Passport/Fin No:	S95367421
Mobile No.:	91874018
Home No.:	-
Address:	BLK 959A Tampines Ave 5 #10-605
Postal Code:	521859
Email Address:	-
Insurance Company:	-
Details of Passenger if any	
Passenger Name:	-
Contact Number:	-
Gender:	-
Details of Injured Person	
Name:	-
Age:	-
Address:	-
Injured Sustained:	-
Injured Person in which vehicle:	-
Were Seatbelts worn:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were Injured Convey to Hospital by Ambulance:	<input type="checkbox"/> Yes <input type="checkbox"/> No

SKETCH PLAN

IMPORTANT NOTICE

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

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**Personal Information**") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "**Insurers**"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "**Purposes**")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

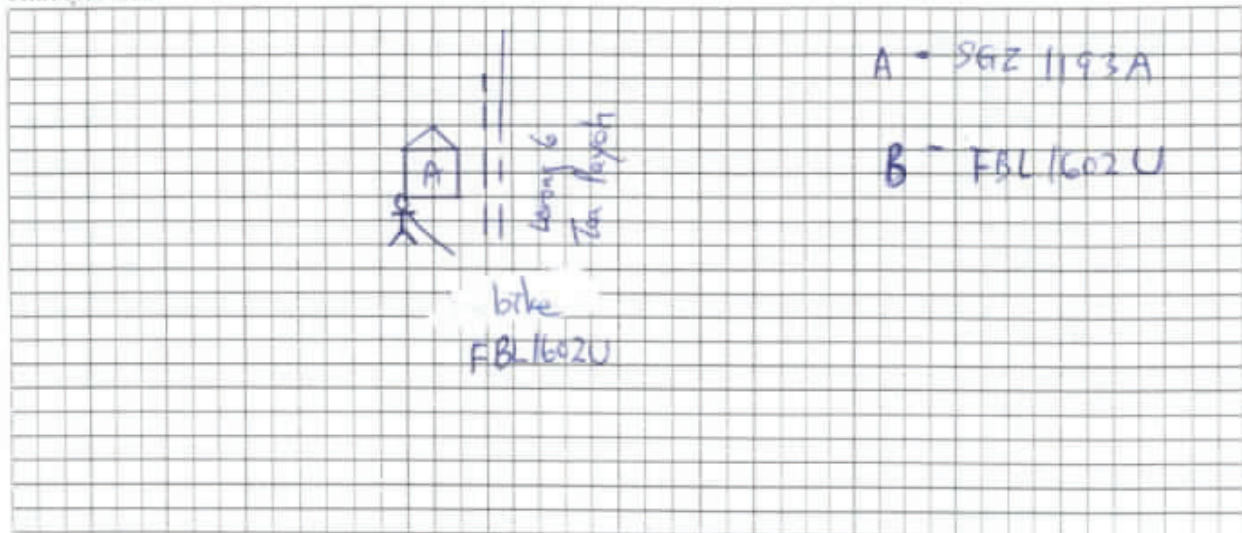
Policyholder's Signature
Date & Time:

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

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



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As my car stopped at junction along Toa Payoh, waiting for vehicles from Toa Payoh North Flyover to go first (as they get right of way). Suddenly I felt an impact from behind. I realized scooter bike FBL 1602U driven by Miss Nur Hanisah Bte Norzro NRIC No: 59536742I, residing at Blk 859A Tampines Ave 5 #10-605 Store 521859 had collided ~~to~~ onto my LH rear ~~platform~~ portion of my car. I went to C&C Motor Claims dept on 5/7/18 around 3pm to assess the damage. Miss Hanisah decided to claim the damage cost through her Insurance Co.

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:

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



6/7/2018

To Whom it May Concerns

Re: Repair claim on accident 5/7/2018

I, Tan Geok Lan NRIC: S185343012

of vehicle SG2 1193A wish to authorize

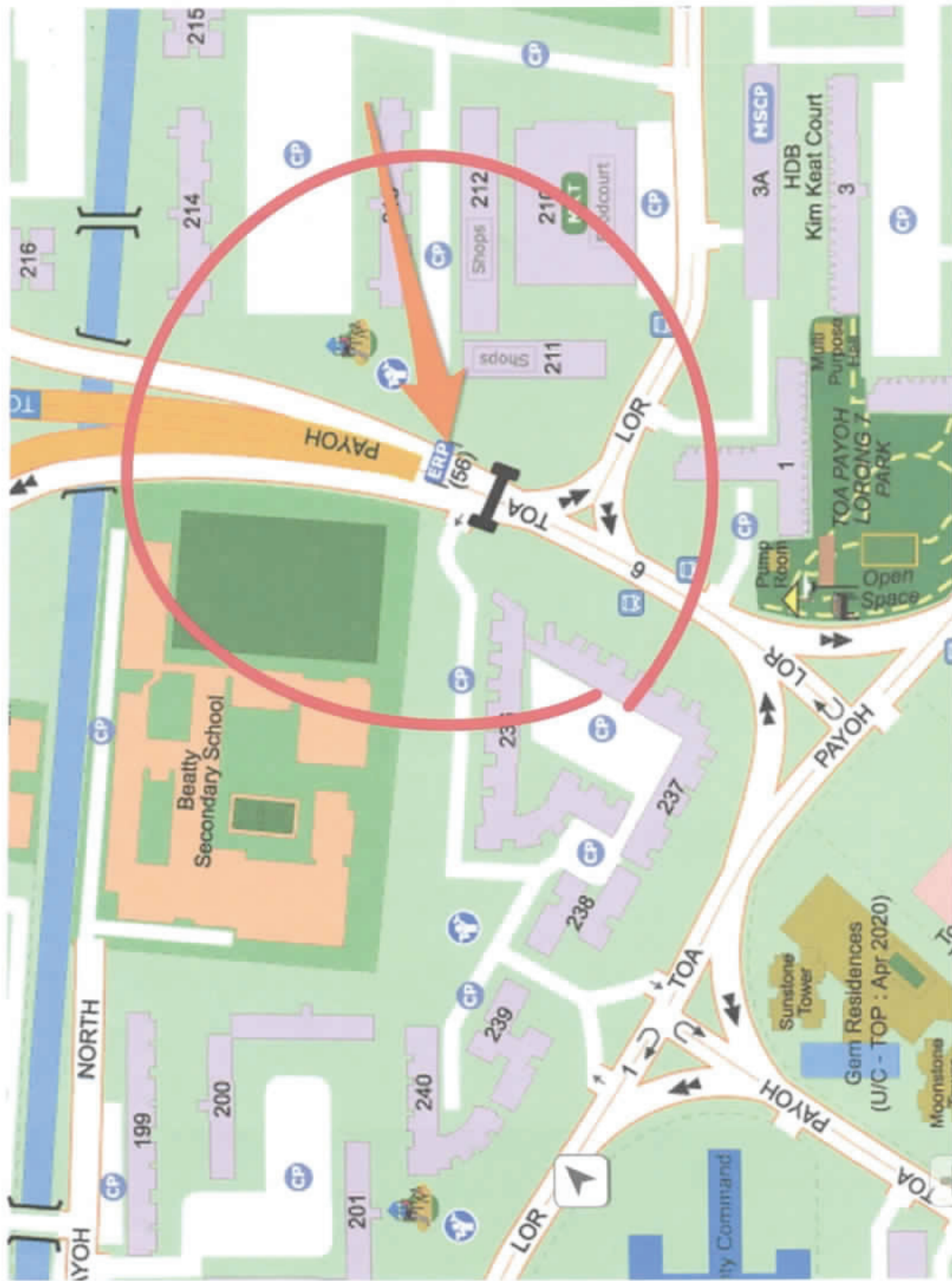
My husband Tan Kwong Wah NRIC: S128573A

to act on my behalf for all signatures & give

him permission to represent me

Travis

Dr.
Yern Huly,



AIG**COVER NOTE****KIA AUTO PROTECTOR PRIVATE VEHICLE**

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder.

Name of Policyholder : TAN GEOK KIAN
Period of Insurance : 04 Oct 2017 to 03 Oct 2018
Engine No. : G4FGHH678892
Chassis No. : KNAFZ411MJ5740971



Vehicle No. : 8GZ1193A
Cover Note No. : 1700060988
Endorsement No. :
Issued Date : 03 Oct 2017

**ABOUT THE COVER**

Make/Model : KIA Cerato K3 1.6 SX
Engine Capacity/Tonnage : 1,591.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
Insuring with COE/PAF : Yes

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.

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) 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 - \$600 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)
 TAN GEOK KIAN - \$600 (Own Damage)

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

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 605339 85884501

2. Cycle & Carriage Customer Service Centre (For Windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800

3. Cycle & Carriage Customer Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461060

For other 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: MayBank

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.
 We hereby certify that this Cover Note is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia). For Corporate Policies, this Cover Note is valid for 90 days from the commencement date of the period of insurance.

0900709903

CYCLE & CARRIAGE - DERRIC(KIA)

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

Jonathan Lim

1536546



NRIC No. S1453430Z

Blood Group

A+

Date of issue

23-12-1993

FOR C&C USE ONLY

APT BLK 470 TAMPINES STREET 44 #11-200
SINGAPORE 520470

NRIC No: S1453430Z

Date: 13-05-2007

No: 5755603

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1453430Z



Name

TAN GEOK KIAN

陳玉娟

Race

CHINESE

Date of Birth

09-12-1960

Sex

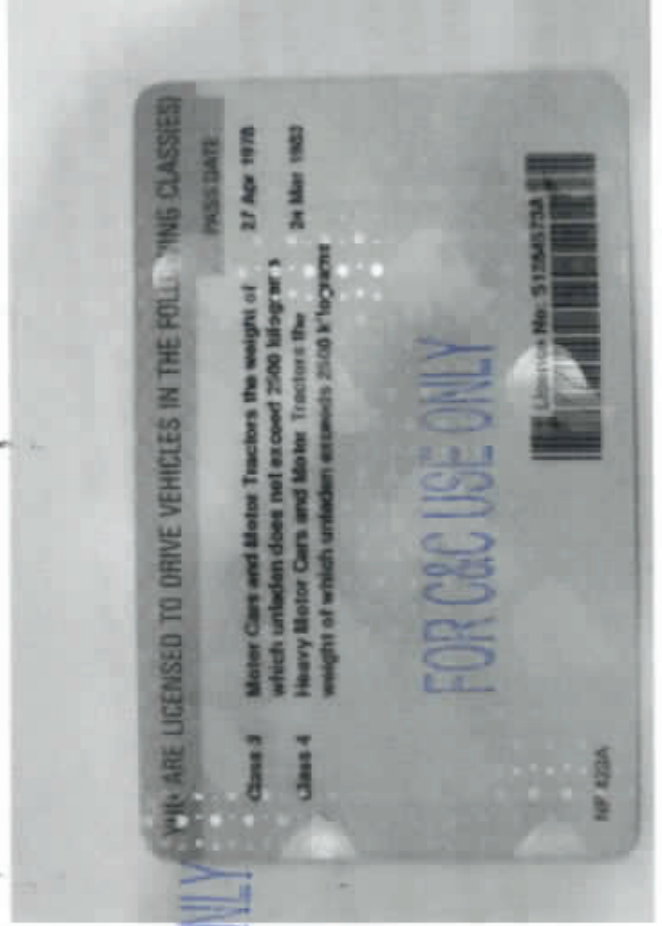
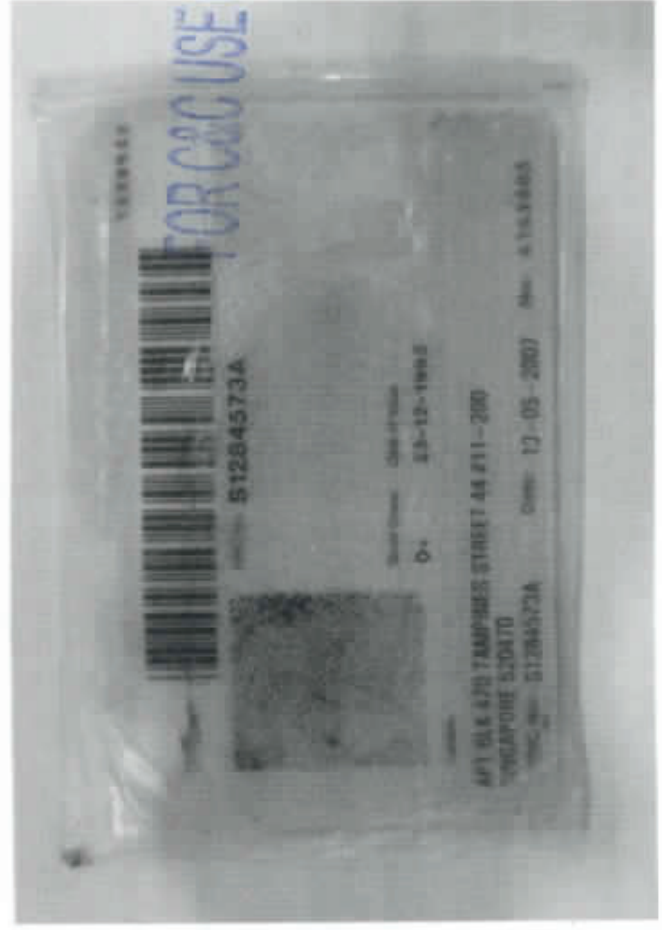
F

Country of Birth

SINGAPORE

FOR C&C USE ONLY





Mars Ler

From: Vic (LKKAUTO) <vicalpeh@lkkauto.com>
Sent: Friday, 7 September, 2018 10:10 AM
To: Mars Ler
Cc: Admin A; Chris Bulaciak; Vic (LKKAUTO)
Subject: RE: Accident On 04/07/2018 Involving Our Insured SGZ1193A And Your Insured FBL1602U LKK REF CC4/ASM18012518/Uhb3

WITHOUT PREJUDICE

Dear Mars Ler,

We refer to the above matter.

Please be informed that basing on the accident statements submitted by both party, the liability is clear subject to the BOLA guideline settlement.

Please note that this e-mail is on without prejudice basis which does not amount to an authorisation of repair to your client's vehicle and admission of any liability to our Insured's part. The final repair cost is subjected to the consistency of the damages according to the nature of the accident. And the days of LOU/ LOR will be based on the number of days of repair as recommended by our surveyor and approved by our principal.

Kindly forward the LOD and all supporting documents to us if available to proceed with the settlement.

Thank you.

Best Regards,

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: vicalpeh@lkkauto.com | fax: 6741-4108

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

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From: Mars Ler [<mailto:mars.ler@ccfulco.com.sg>]
Sent: Friday, 7 September, 2018 8:14 AM
To: Vic (LKKAUTO)
Cc: Admin A; Chris Bulaciak
Subject: RE: Accident On 04/07/2018 Involving Our Insured SGZ1193A And Your Insured FBL1602U LKK REF CC4/ASM18012518/Uhb3

Dear Vic,