

Surveyor

REF: C9/AT/18012718 /RVber

Special Instruction:

US: \$ 10300.00

ASSIGNMENT (Office)

From (Person): Shawn Wui of Atk Date/Time: 11-07-08
 Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant:

Surveyor: Carlton ConsultancyWorkshop: N-51 Automotive

OD (TP Re-inspection) / Evaluation

To Inspect Vehicle No: XE 2148J Insured: SBB 1998E
 at Workshop m/s N-51 Automotive Tel: 6843 0051
 of 2 Kaki Bukit Ave 2 #01-17
 Policy No: _____ Claim No: 976602876866-003
 Sum Insured: _____ Excess: _____
 Make of Veh: _____ D.O.A. 31-07-2017
 (Client's Record)

18-07-2018 (Wednesday) @ 10am

H.O.D. Endorsement/Date:

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT

Date/Time: _____ Confirmed with _____ Final Fig _____, _____ days (Red \$ _____ / _____ %; Original 8 days)

Date/Time: 15/8/18 Submit Final Fig LS \$7950, 6 days (Red \$ 2250 / 23 %; Original _____ days)

Date/Time	Action/Instruction
	<u>16 Tuas South St 7 Singapore 637113 (Mr. Lim - 97240178)</u>
	<u>XE 2148J - C83 / MS6 / 7006752 / 56m2</u>
	<u>SBB 1998E - NA / NV / 7014838 / 13</u>
	<u>DA: 18/08/2017</u>
	<u>DA: 31/07/2017</u>

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

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

RECEIVED 1 5 AUG 2018

Para(3) : Nett Value

Market Value : _____
 Salvage Value : _____
 Nett Value : _____

Inspected/
 Evaluated by:

Fee Charged:

Date:

Basic & Add
 Transport
 Photos
 Others
 Total

200

200

1) Date/Time 15/8-tylist File Pass to _____

2) Date/Time _____

File Return to _____

3) Date/Time _____ File Pass to _____

4) Date/Time _____

File Return to _____



5) Date/Time _____ File Pass to _____

6) Date/Time _____

File Return to _____

[Signature]
4/8/2018

RE: Your ref.: SRSTP.7147.18.AY(N51); Our ref.: 9766028768SG-003; Accident involving SBB 1998E and XE 2148J on 31 July 2017

From: Wui, Shawnkaiye
To: Admin-D (LKKAuto), assignments@lkkauto.com
Cc:
Sent: Wednesday, 11 July, 2018 1:47:52 PM
Attachments:  SBB1998E - GIA report.PDF  XE2148J - GIA report.PDF

Dear Catherine,

Enclosed herewith both parties GIA report.

Please send a confirmation to TP repairer and TP solicitor for the arrangement.

Thanks and Regards,

Shawn Wui

AIG

Complex Claims Examiner

Claims | AIG Asia Pacific Insurance Pte. Ltd

78 Shenton Way, #08-16, Singapore 079120

Tel +(65) 6419 1959 | Fax +(65) 6835 7416

Shawnkaiye.Wui@aig.com | www.aig.com.sg

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.

From: Wui, Shawnkaiye

Sent: Wednesday, July 11, 2018 1:44 PM

To: 'Admin-D (LKKAuto)'; 'assignments@lkkauto.com'

Subject: FW: Your ref.: SRSTP.7147.18.AY(N51); Our ref.: 9766028768SG-003; Accident involving SBB 1998E and XE 2148J on 31 July 2017

Dear Catherine,

We refer to aforementioned matter.

Please assist to arrange surveyor to conduct physical re-inspection with TP repairer.

Enclosed herewith TP survey report and our PRS photo.

Both parties GIA report will be forwarded in the next encrypt email.

Thanks and Regards,

Shawn Wui

AIG

Complex Claims Examiner

Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way, #08-16, Singapore 079120

Tel +(65) 6419 1959 | Fax +(65) 6835 7416

Shawnkaijye.Wui@aig.com | www.aig.com.sg

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From: Ong & Shan LLC [<mailto:ongshanllc@gmail.com>]

Sent: Wednesday, July 11, 2018 1:16 PM

To: Wui, Shawnkaijye; Emily (N-51)

Subject: Re: Your ref.: SRSTP.7147.18.AY(N51); Our ref.: 9766028768SG-003; Accident involving SBB 1998E and XE 2148J on 31 July 2017

Dear Shawn Wui,

We refer to the above matter.

Please be informed that our clients' vehicle is available for re-survey :-

On 18th July 2018 (Wednesday)
At 10.00 a.m.

At N-51 Automotive Pte Ltd
2 Kaki Bukit Ave 2
#01-08
Singapore 417921
Tel : 6842-0051
Person To Contact : Emily
Down time: \$50

Kindly let us have the name of the surveyor who will conduct the re-inspection.

Warmest Regards,

CM Chen
M/s Ong & Shan LLC
Block 184 Toa Payoh Central
#02-364 Singapore 310184

Tel: 6224 9847 Fax : 6254 7261
Email: ongshanllc@gmail.com

On Mon, Jul 9, 2018 at 1:45 PM, Wui, Shawnkaijye <Shawnkaijye.Wui@aig.com> wrote:
WITHOUT PREJUDICE

Dear Sirs,

We refer to aforementioned accident and your letter of claims dated 13 June 2018.

Please be informed that we would like to request a physical re-inspection on your client vehicle. At the same time, we proposed a downtime for your client vehicle for re-inspection at \$ 50.00 per session.

Please advise.

Thanks and Regards,

Shawn Wui

AIG

Complex Claims Examiner

Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way, #08-16, Singapore 079120

Tel +(65) 6419 1959 | Fax +(65) 6835 7416

Shawnkaiye.Wui@aig.com | www.aig.com.sg

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Catherine Chong (LKK Auto)

From: Ong & Shan LLC <ongshanllc@gmail.com>
Sent: Thursday, 12 July, 2018 12:07 PM
To: Catherine Chong (LKK Auto)
Subject: Re: Your ref.: SRSTP.7147.18.AY(N51); Our ref.: 9766028768SG-003; Accident involving SBB 1998E and XE 2148J on 31 July 201

Dear Catherine,

We refer to the above matter and the telephone conversation on the even date.

Our client would like to change the location of re-inspection as follows:-

On 18th July 2018 (Wednesday)
At 10.00am

At 16 Tuas south street 7
Singapore 637113

Contact Mr. Lim @ 97240178

Kindly let us have the name of the surveyor who will conduct the re-inspection.

Warmest Regards,

CM Chen
M/s Ong & Shan LLC
Block 184 Toa Payoh Central
#02-364 Singapore 310184

Tel: 6224 9847 Fax : 6254 7261

Email: ongshanllc@gmail.com

On Wed, Jul 11, 2018 at 7:12 PM, Catherine Chong (LKK Auto) <admin-d@lkkauto.com> wrote:

Dear Sir / Madam,

Appointment confirmed RI on 18.07.2018 @ 10am at workshop.

Best Regards,

Catherine Chong | Admin

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	01/08/2017 16:27
Date Of Accident	31/07/2017 19:00
Exact Location Of Accident	PIE TOWARDS PAYA LEBAR ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBB1998E
Insured/Policyholder	
Name Of Registered Owner	LIM SHEN WEE ALFRED
NRIC No	S1720043G
Email Address	ALFREDJH@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-93371279
Alternative Phone No	Others-93371279

Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA AERAS PREMIUM 2.4 A
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	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	2100420518-02000
Cover Note Number	

Driver

Name of Driver	JOYCE LIM JOON HEN
NRIC No	S6832338Z
Date Of Birth	28/08/1968
Occupation	INDOOR
Date Of Driving Pass	30/12/1993
Driving Experience	23 YEARS AND 7 MONTHS
Gender	FEMALE

Mobile Number	(LOCAL) +65-86119937
Fax Number	
Contact Number	
Email Address	JOYCE_LIM_JOON_HEN@MOE.EDU.SG
Address	55 JALAN GELENGGANG
Postcode	578229
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	SIDE SWIPE
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
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I, Joyce Lim Joon Hen, S6832338Z was driving my car SBB 1998E on the extreme left lane along PIE towards Paya Lebar Road on 31 July 2017, 18.58pm. Suddenly a big truck XE 2148J driven by driver Chua Ah Ted, S1128463I came very close to me from the right. As I was at his blind spot, he knocked me from the side of my car. We stopped the car at the side of the road and exchanged particulars and agreed to make insurance report.

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	XE2148J
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	CHUA AH TED
NRIC/Passport Number	S1128463I
Contact Number	93834846
Address	
Postcode	
Insurance Company Name	

14-20-18
2/2
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 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.
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' law yers/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/rail packages); and/or

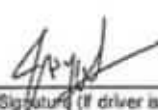
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

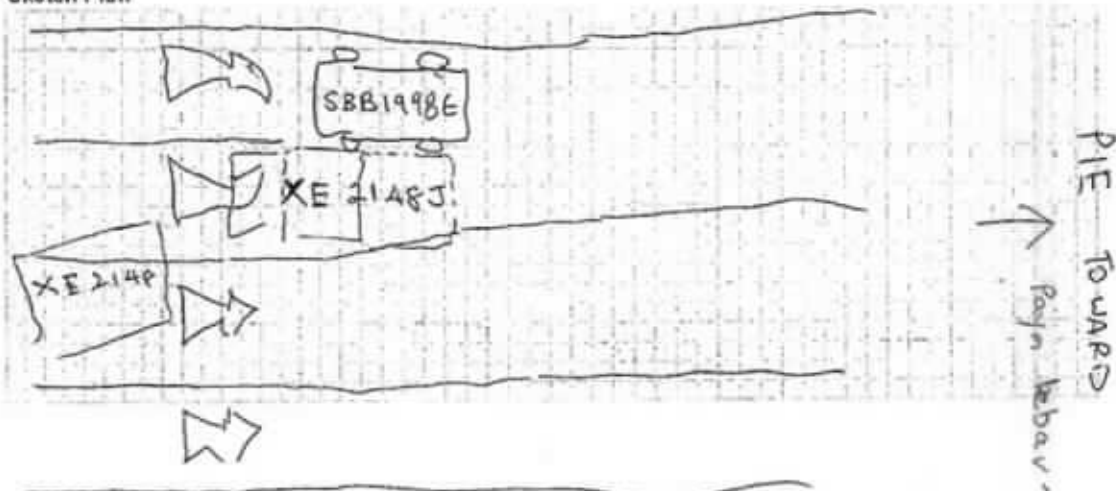
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

I, Joyce Lim Joan Hen, S68325387 was driving my car S831998 E on the extreme left lane along PIE towards Paya Lebar road on 31 July 2017, 18.58pm.

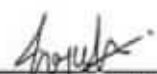
Suddenly a big truck XF2148.3 driven by driver Ah Ted, S11284631 came very close to me from the right. As I was at his blind spot, he knocked me from the side of my car.


We stopped the car at the side of the road, and exchanging particulars and agreed to make insurance report.

Declaration

We declare the foregoing particulars are true in every respect.

 1 Aug 2017
Policyholder's Signature / Date & Time

 1/8/17
Driver's Signature (If driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel

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 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 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	01/08/2017 15:48
Date Of Accident	31/07/2017 19:35
Exact Location Of Accident	PIE TWDS CHANGI B4 PAYA LEBAR EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE2148J
Insured/Policyholder	
Name Of Registered Owner	POH MENG TRADING & CLEANING SERVICES PTE LTD
Co Reg No	199002912C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-64456788

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	ACTROS
Exact Purpose for which vehicle was being used at time of accident	GOING BACK OFFICE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5083248403
Cover Note Number	

Driver

Name of Driver	CHUA AH TED
NRIC No	S1128463I
Date Of Birth	05/05/1955
Occupation	OUTDOOR
Date Of Driving Pass	04/02/1977
Driving Experience	40 YEARS AND 5 MONTHS
Gender	MALE

Mobile Number	(LOCAL) +65-93834846
Fax Number	
Contact Number	
EEmail Address	NOEMAIL
Address	BLK 55 CHAI CHEE DRIVE #11-194
Postcode	460055
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	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
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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SBB1998E
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

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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.
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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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


 01/08/17
Witnessed by Reporting Centre Personnel

Sketch Plan

P12 EDWARDS CHARLIE BISHOP PETER WILSON

SKETCH PLAN A - XE 248/3
VEHICLE B - 508 1998/0

4 →
3 →
2 →
1 →



P12
CHARTER

Describe Circumstances of the Accident

I WAS TRAVELLING ALONG THE TOWARDS CHANU ON THE THIRD LANE, WHILE TRAVELLING STRAIGHT AHEAD, AND MY VEHICLE WAS STILL IN MOTION IN THE LANE BEFORE PASSING LANE EXIT, SUDDENLY I FELT A IMPACT FROM THE LEFT SIDE OF MY VEHICLE, SO I STOPPED AND ALIGHTED FROM MY VEHICLE, AND REALIZED A VEHICLE SEAHORN (SAB 1998E) SWERVED FROM LANE 4 INTO MY LANE AND HIT INTO THE SIDE OF MY VEHICLE WHILE I AM TRAVELLING STRAIGHT IN MY LANE (LANE 3)

TOOK PICTURES OF THE ACCIDENT SCENE, SHOWING VEHICLE (SEAHORN) PART OF THE VEHICLE WAS IN LANE 4 WHILE PART OF THE VEHICLE IN MY LANE.

VEHICLE A - XE 2148 J
VEHICLE B - SAB 1998 E

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Signature]

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

[Signature] 01/08/17

Witnessed by Reporting Centre Personnel

are obliged to read the user's manual in as to acquaint
ourselves with the system prior to operating it



4/38: Odometer Reading

XE2148J [5BB1998E] - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



5/38: Front View Left



6/38: Front View Right



7/38: Rear View Left



8/38: Rear View Right

XE2148J / SBB1998E1 - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



9/38: Front View Left



10/38: PRI PHOTO



11/38: PRI PHOTO



12/38: PRI PHOTO

XE2148J (SBB1998E) - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



13/38: PRI PHOTO



14/38: PRI PHOTO



15/38: PRI PHOTO



16/38: PRI PHOTO

XE2148J [SBB1996E] - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



17/38: PRI PHOTO



18/38: PRI PHOTO

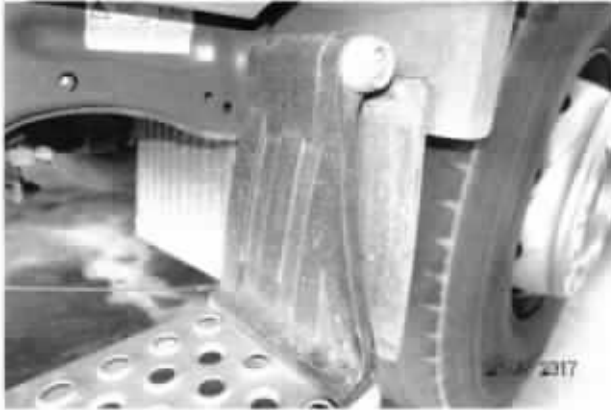


19/38: PRI PHOTO

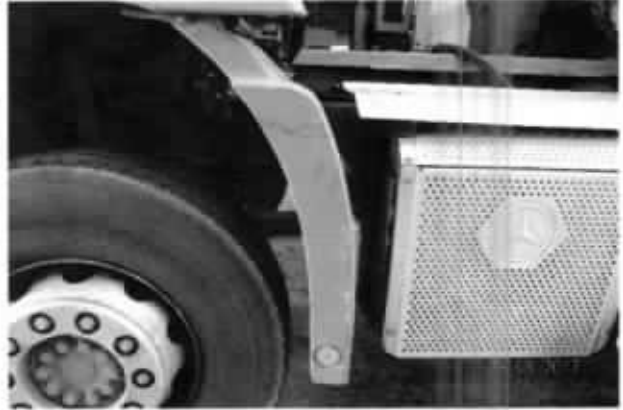


20/38: PRI PHOTO

XE2148J [SBB1998E] - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



21/38: PRI PHOTO



22/38: PRI PHOTO



23/38: PRI PHOTO



24/38: PRI PHOTO

XE2148J [SBR1998E] - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



25/38: PRI PHOTO



26/38: PRI PHOTO

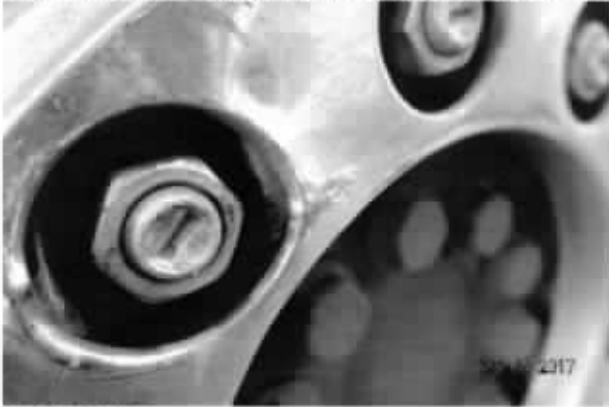


27/38: PRI PHOTO



28/38: PRI PHOTO

XE2148J (SBB1998E1) - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



29/38: PRI PHOTO



30/38: PRI PHOTO



31/38: PRI PHOTO

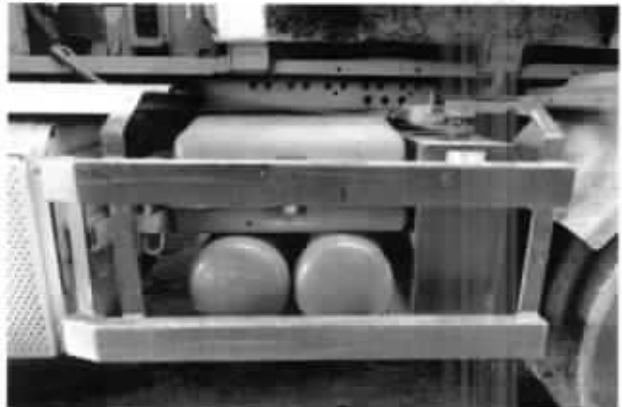


32/38: PRI PHOTO

XE2148J [5BB1998E] - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



33/38: PRI PHOTO



34/38: PRI PHOTO



35/38: PRI PHOTO



36/38: PRI PHOTO

XE2148J [SBB1998E] - Submitted by: AIG Asia Pacific Insurance Pte. Ltd. (SG)



37/38: TYRE BRAND



38/38: TYRE SIZE

CARLINK CONSULTANCY


60 Hillside Drive
Singapore 549009

Tel: 62856178

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ACCIDENT VEHICLE INSPECTION / ASSESSMENT REPORT

Our Ref: CLM14139TP/N

1 REFERENCE			
Date of request	: 24th August 2017		
Requested by	: M/S Poh Meng Trading & Cleaning Services Pte Ltd C/o Kaki Bukit Autohub, 2 Kaki Bukit Avenue 2, #01-18 Singapore 417921		
Type of claim	: Third party		
Workshop	: M/S N-51 Automotive Pte Ltd Kaki Bukit Autohub, 2 Kaki Bukit Avenue 2, #01-18 Singapore 417921		
Date of survey	: 24th August 2017		
Accident date	: 31st July 2017		
2 DETAILS OF VEHICLE			
Registration No.	: XE 2148 J		
Make & Model	: Mercedes Benz Actros 3336K 6X4 3300 A/T ABS		
Engine No.	: 541972C0956428		
Chassis No.	: WDB9321612L910329		
Year of Registration	: 1st September 2016		
Speedometer reading	: 58447.4 Km		
Transmission	: Manual/automatic		
Colour	: Green		
3 STATIC CHECK			
Steering	: see annex(es)	Paintwork	: Good
Footbrake	: see annex(es)	Modification	: Nil
Handbrake	: see annex(es)	General condition	: Good
4 TYRE CONDITION			
	<u>Nearside/Make</u>	<u>Offside/Make</u>	<u>Size</u>
Front axle	: 7mm/Bridgestone	7mm/Bridgestone	: 318/80 R12
Centre axle	: 7mm/Bridgestone	7mm/Bridgestone	: 318/80 R12
Rear axle	: 7mm/Bridgestone	7mm/Bridgestone	: 318/80 R12
5 POINT OF IMPACT			
See Annex(es) and Motor Accident Reports			
6 REMARK			
This inspection was conducted entirely on a "WITHOUT PREJUDICE" basis and we have not authorised any repair.			

Report No.

CLM14139TP/N

Vehicle No. XE2148J

Parts and Labour Assessment**PARTS**

Description of part	Repairer's Qty	Qty	Condition	Repairer's estimate	Our adjustment
FRONT BUMPER SIDE BRACKET LH	1	1	BENT/DENTED	135.00	135.00
FRONT BUMPER SIDE LH	1	1	GRAZED/CUT	3,100.00	3,100.00
FRONT BUMPER SIDE SIGNAL LAMP LH	1	1	GRAZED/CRACKED	85.00	85.00
FRONT LH LOWER STEP	1	1	GRAZED/DISTORTED	400.00	400.00
FRONT LH LOWER STEP BRACKET	2	2	BENT	450.00	450.00
FRONT LH TOP STEP	1	1	GRAZED/DISTORTED	410.00	410.00
FRONT LH TOP STEP GARNISH	1	1	DISTORTED/CUT	850.00	850.00
FRONT LH WHEEL ARCH OUTER GARNISH PROTECTOR	1	1	GRAZED/DISTORTED/CUT	450.00	450.00
FRONT LH WHEEL REAR MUDGUARD	1	1	GRAZED/CUT	680.00	680.00
FRONT LH WHEEL REAR MUDGUARD YELLOW REFLECTOR	1	1	GRAZED	60.00	60.00
FRONT LH WHEEL RIM	1	1	DISTORTED/WARPED	1,280.00	1,280.00
FRONT LH WHEEL RIM NUT	10	10	GRAZED/DENTED	350.00	350.00
FRONT LH WHEEL SPLASH SHIELD	1	1	GRAZED/CUT	510.00	510.00
FRONT LH WHEEL WHEEL NUT GUARD (CHROME)	1	1	DENTED/GRAZED/CUT	510.00	510.00
HEADLAMP GUARD LH	1	1	DISTORTED/SLACK	260.00	260.00
HEADLAMP LH	1	1	DISTORTED/CRACKED	480.00	480.00
LH PERFORATED PROTECTOR SHIELD	1	1	DENTED/BENT	410.00	410.00
Subtotal before discount				S\$ 10,420.00	S\$ 10,420.00
Percentage discount 10% and 10%				S\$ 1,042.00	S\$ 1,042.00
Sub-total				S\$ 9,378.00	S\$ 9,378.00
FRONT LH TYRE	1	1	GRAZED/BULGE	480.00	480.00
Subtotal before discount				S\$ 480.00	S\$ 480.00
Sub-total				S\$ 480.00	S\$ 480.00
Parts-total				S\$ 9,858.00	S\$ 9,858.00

LABOUR

To re-spray painting on the change bodyparts, repair portion, and where consistent to the accident.
To provide labour, workmanship to change the above damaged bodyparts, repair, re-construct and re-align body structure, body alignments and damaged consistent to the accident.
To check wiring and light system
To spray undercarriage anti rust coating.

1,500.00 ~~700~~ 900.00
1,500.00 ~~900~~ 1,200.00
200.00 ~~50~~ 100.00
200.00 ~~40~~ 80.00

Labour Total SS 3,400.00 SS 2,280.00

Parts & Labour Total SS 13,258.00 SS 12,138.00

Results of inspection of the accident vehicle are as shown above,

We have taken into consideration the age and condition of the vehicle in our recommendation.

Hence, the recommended cost of repairs based on Lump Sum repairs is : SS 10,300.00
and the recommended number of working days for the repairs is within 8 day(s).


PATRICK (SURVEYOR)
Automotive Appraiser

8248.50

1690.00

9938.50

20%

7950.80

4/3 - 7,950

6 days



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

Affiliated to Federation Internationale Des Experts En Automobile

AIG ASIA PACIFIC INSURANCE PTE LTD

Ref : CS/AIG18012718/R1vbe2

78 SHENTON WAY #08-16

CHARTIS BUILDING

SINGAPORE 079120

Date : 15-08-2018



ATTN : SHAWN WUI

Code : AIG

1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)

Insured Veh.	SBB 1998E	Veh. Inspected	XE 2148J
Policy No.	2100420518-02000	Coverage (\$)	0.00
Claim No.	9766028768SG-003	Excess (\$)	0.00
Assign From	SHAWN WUI	Assign Date	11/07/2018

2. Vehicle Particulars & Condition

Make & Model	MERCEDES BENZ ACTROS	c.c	11946
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	WDB9321612L910329	Colour	MULTI COLOUR
Odometer	72471	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	315/80 R22.5	BRIDGESTONE	8 mm
L/H Front Tyre	315/80 R22.5	BRIDGESTONE	8 mm
R/H Rear Tyre	315/80 R22.5 (D)	BRIDGESTONE	8/8 mm
L/H Rear Tyre	315/80 R22.5 (D)	BRIDGESTONE	8/8 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	31/07/2017	Inspection Date	18/07/2018
Survey held at	16 TUAS SOUTH ST 7		
Repairer	N-51 AUTOMOTIVE PL		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	6 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. XE 2148J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER SIDE BRACKET LH	SERVICEABLE	135.00	-
1	FRONT BUMPER SIDE LH	REPLACED	3,100.00	3,100.00
1	FRONT BUMPER SIDE SIGNAL LAMP LH	REPLACED	85.00	85.00
1	FRONT LH LOWER STEP	REPLACED	400.00	400.00
2	FRONT LH LOWER STEP BRACKET	SERVICEABLE	450.00	-
1	FRONT LH TOP STEP	REPLACED	410.00	410.00
1	FRONT LH TOP STEP GARNISH	REPLACED	850.00	850.00
1	FRONT LH WHEEL ARCH OUTER GARNISH PROTECTOR	REPLACED	450.00	450.00
1	FRONT LH WHEEL REAR MUDGUARD	REPLACED	680.00	680.00
1	FRONT LH WHEEL REAR MUDGUARD YELLOW REFLECTOR	REPLACED	60.00	60.00
1	FRONT LH WHEEL RIM	REPLACED	1,280.00	1,280.00
10	FRONT LH WHEEL RIM NUT	REPLACED	350.00	350.00
1	FRONT LH WHEEL SPLASH SHIELD	REPLACED	510.00	510.00
1	FRONT LH WHEEL NUT GUARD (CHROME)	REPLACED	510.00	510.00
1	HEADLAMP GUARD LH	SERVICEABLE	260.00	-
1	HEADLAMP LH	REPLACED	480.00	480.00
1	LH PERFORATED PROTECTOR SHIELD	SERVICEABLE	410.00	-
	LESS 10% DISCOUNT		-1,042.00	-916.50
			9,378.00	8,248.50
SPECIAL NETT ITEMS				
1	FRONT LH TYRE (SN)	SERVICEABLE	480.00	-
			480.00	-
LABOUR				
	TO RE-SPRAY PAINTING ON THE CHANGE BODYPARTS, REPAIR PORTION, AND WHERE CONSISTENT TO THE ACCIDENT.		1,500.00	700.00
	TO PROVIDE LABOUR, WORKMANSHIP TO CHANGE THE ABOVE DAMAGED BODYPARTS, REPAIR, RE-CONSTRUCT AND RE-ALIGN BODY STRUCTURE, BODY ALIGNMENTS AND DAMAGED CONSISTENT TO THE ACCIDENT.		1,500.00	900.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO CHECK WIRING AND LIGHT SYSTEM.		200.00	50.00
	TO SPRAY UNDERCARRIAGE ANTI RUST COATING.		200.00	40.00
			3,400.00	1,690.00
GRAND TOTAL			13,258.00	9,938.50
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				7,950.00

Report Ref No. CS/AIG18012718/R1vbe2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,
MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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