

Surveyor

REF: CS3 / ALH18009893 / ^GHub-1

Special Instruction:

US: \$ 6700.00

From (Person): Loh Chee Hong of ALH Date/Time: 26/7/2018
Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant:

Surveyor: Allin Automotive

Workshop: Auto Mega Mall

OD/FP Re-inspection / Evaluation

To Inspect Vehicle No: SJM 2629L Insured: SLG 4208
at Workshop m/s Auto Mega Mall Tel: 9859 9677 C
of 24 Defu Lane #2

Policy No: _____ Claim No: 8284172059SG-003

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 09/05/2018

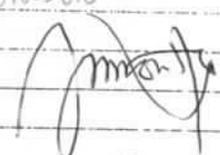
(Client's Record) 16-08-2018 (Thursday) @ 11am - 11:30am

H.O.D. Endorsement/Date: _____

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

Date/Time: _____ Confirmed with _____ Final Fig _____, _____ days (Red \$ _____ / _____ %; Original 7 days)

Date/Time: 7/9/18 Submit Final Fig \$1500, 3 days (Red \$ 500 / 33 %; Original _____ days)

Date/Time	Action/Instruction
	SJM 2629L - CS3 / ALH18009893 / U211322
	SLG 4208 - X
	RECEIVED 07 SEP 2018
	 7/9/2018

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

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

Para(3) : Nett Value

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

Inspected/
Evaluated by:

Fee Charged:
Basic & Add
Transport
Photos
Others
Total

Date:

200
200

- 1) Date/Time 7/9- typist 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 _____

Catherine Chong (LKK Auto)

From: Loh, Chee-Heng <Chee-Heng.Loh@aig.com>
Sent: Thursday, 26 July, 2018 12:02 PM
To: assignments@lkkauto.com
Subject: AIG ref: 8284172059SG-003, re-inspection assignment

Dear Sirs,

Kindly assist to arrange for re-inspection of SJM2629L, and confirm appointment with Lheny from C Yogarajah LLC, cc us in.

Details in the email below. PRS done by LKK/Marcus Chua.

Documents will be sent in an encrypted email shortly.

Thank you.

Best regards,
Loh Chee Heng
AIG
Complex Claims Examiner
Claims | AIG Asia Pacific Insurance Pte. Ltd

78 Shenton Way #08-16 Singapore(079120)
Tel +(65) 6419 1881 | Fax +(65) 6835 7416
Chee-Heng.Loh@aig.com | www.aig.com.sg

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From: Lheny [mailto:lheny@yoga-legal.com]
Sent: Thursday, July 26, 2018 11:20 AM
To: Loh, Chee-Heng
Cc: winnie@yoga-legal.com
Subject: RE: AIG ref: 8284172059SG-003, Your ref: CY.10038.18.SAT.wp(Lh), accident involving SLG420S and SJM2629L on 9 May 2018

WITHOUT PREJUDICE

Dear Loh Chee Heng

We refer to your email on 25 July 2018.

Please be informed that our client's vehicle **SJM 2629L** is available for resurvey on **16 Aug 2018 @ 11 -11.30am @ 24 Defu Lane 12 (S) 539131 (Person-in-charge: Jessie 9859 9677)**

Note: Please let us have the name and contact(HP) of the surveyor who will be coming for the inspection as to inform the surveyor in case of unforeseen situation.

Best regards,

Lheny

M/s C YOGARAJAH LLC
883 North Bridge Road
#19-05 Southbank
Singapore 198785

Tel: 6292 5838

Fax: 6292 5938

Email: lheny@yoga-legal.com

From: Loh, Chee-Heng [mailto:Chee-Heng.Loh@aig.com]

Sent: Wednesday, 25 July, 2018 3:28 PM

To: Lheny

Subject: AIG ref: 8284172059SG-003, Your ref: CY.10038.18.SAT.wp(Lh), accident involving SLG420S and SJM2629L on 9 May 2018

Dear Sirs,

We propose for a re-inspection of your client's vehicle.

Kindly let us have an advance 10 days notice to make arrangement with our surveyor.

Thank you.

Best regards,

Loh Chee Heng

AIG

Complex Claims Examiner

Claims | AIG Asia Pacific Insurance Pte. Ltd

78 Shenton Way #08-16 Singapore(079120)

Tel +(65) 6419 1881 | Fax +(65) 6835 7416

Chee-Heng.Loh@aig.com | www.aig.com.sg

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CONDITIONS:
 (0)Best (2)Good (3)Worn (4)Cracked (5)Cor (6)Scratched (7)Deformed
 (8)Stalled (9)Disabled (10)Broken (11)Necessary (12)Missing (13)Torn
 (14)Unaffected (15)Not Working

ACTION/AC
 (1)Replace (✓) (2)Repair (X) (3)Check (○)
 (4)No Comments (NC)

Aug 2005

MOTOR CAR (Frt)

Front Portion

Vehicle No:

NAC	INC	Item	CON	AC	Qty
1001	991886	Frnt Number Plate			
1002	991887	Frnt Number Plate Base			
1003	991889	Frnt Number Plate Garnish			
1004	991300	Frnt Bumper	CUT	✓	
1005	992341	Frnt Bumper Clips	NEC	✓	
1006	991325	Frnt Bumper Bracket			
1007	991462	Frnt Bumper Side Retainer	CRK	✓	
1008	991433	Frnt Bumper Reinforcement			
1009	991318	Frnt Bumper Beam			
1010	991468	Frnt Bumper Sponge			
1011	991427	Frnt Bumper Protector			
1012	991420	Frnt Bumper Pad			
1013	991363	Frnt Bumper Grille			
1014	991301	Frnt Bumper Moulding			
1015	991407	Frnt Bumper Lower Spoiler			
1016	991438	Frnt Bumper Sensor			
1017	995100	Frnt LH Bumper Fog Lamp Cover			
1018	991355	Frnt RH Bumper Fog Lamp Cover			
1019	995079	Frnt LH Bumper Fog Lamp			
1020	995080	Frnt RH Bumper Fog Lamp			
1021	991793	Frnt Grille			
1022	991328	Frnt Grille Emblem			
1023	991799	Frnt Grille Chrome Moulding			
1024	991222	Frnt Apron Panel			
1025	992013	Frnt Support Panel			
1026	992025	Frnt Support Panel Top Garnish Cover			
1027	992416	Horn			
1028	991277	Frnt Brace Panel			
1029	995153	Frnt LH Headlamp Assy			
1030	991821	Frnt RH Headlamp Assy	CRK	✓	
1031	995088	Frnt LH Side Lamp			
1032	995089	Frnt RH Side Lamp			
1033	990248	Bonnet			
1034	991328	Bonnet Emblem			
1035	990287	Bonnet Lock			
1036	990285	Bonnet Insulator			
1037	990273	Bonnet Hinge			
1038	990261	Bonnet Damper			
1039	990305	Bonnet Rubber			
1040	990252	Bonnet Cable			
1041	990311	Bonnet Stand			
1042	990119	Air Con Condenser			
1043	990122	Air Con Fan Assy			
1044	990134	Air Con Suction Pipe (Low Pressure)			
1045	990118	Air Con Suction Hose			
1046	990133	Air Con Discharge Pipe (High Pressure)			
1047	990114	Air Con Discharge Hose			
1048	990149	Air Con Liquid Pipe			
1049	995066	Air Con Receiver Drier			
1050	990111	Air Con Compressor Assy			
1051	995294	Air Con Belt			
1052	995074	Radiator			
1053	992738	Radiator Cowling			
1054	992742	Radiator Fan Assy			
1055	992745	Radiator Fan Clutch			
1056	992758	Radiator Hose Top			
1057	992757	Radiator Hose Bottom			
1058	992741	Radiator Expansion Tank			
1059	990151	Air Duct			
1060	990070	Air Cleaner Assy			
1061	990056	Air Cleaner Hose			
1062	990089	Air Cleaner Resonator			
1063	991712	Frnt Exhaust Manifold			
1064	991713	Frnt Exhaust Manifold Cover			
1065	991054	Frnt Exhaust Manifold Sensor (Oxygen)			
1066	991714	Frnt Exhaust Pipe			
1067	990219	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
1070	990229	Battery Tray			

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank			
1074	995052	Wiper Washer Tank Motor			
1075	990159	Alternator Assy			
1076	990160	Alternator Belt			
1077	992688	Power Steering Pump			
1078	992669	Power Steering Belt			
1079	994431	Power Steering Cooler Pipe			
1080	992692	Power Steering Hose			
1081	990010	ABS Pump Control Unit			
1082	990427	Brake Master Pump Assy			
1083	990403	Brake Booster Pump Assy			
1084	991005	Engine Top Cover			
1085	991011	Engine Under Cover			
1086	990946	Engine Mounting			
1087	990949	Engine Mounting Frnt			
1088	990950	Engine Mounting LH			
1089	990952	Engine Mounting RH			
1090	990951	Engine Mounting Rear			
1091	992234	Gear Box Mounting			
1092	991520	Frnt LH Chassis Member			
1093	991520	Frnt RH Chassis Member			
1094	990728	Frnt Vertical Cross Member			
1095	991863	Frnt Lower Cross Member			
1096	995070	Frnt LH Fender			
1097	995072	Frnt LH Fender Inner Panel			
1098	995147	Frnt LH Fender Lamp			
1099	995148	Frnt LH Fender Protector			
1100	991740	Frnt LH Fender Inner Shield			
1101	995179	Frnt LH Mudflap			
1102	995170	Frnt LH Wheel Rim			
1103	994025	Frnt LH Rim Cover			
1104	995065	Frnt LH Tyre			
1105	995071	Frnt RH Fender			
1106	991739	Frnt RH Fender Inner Panel			
1107	991744	Frnt RH Fender Lamp			
1108	991752	Frnt RH Fender Protector			
1109	991740	Frnt RH Fender Inner Shield			
1110	991884	Frnt RH Mudflap			
1111	992087	Frnt RH Wheel Rim	CUT	✓	
1112	994025	Frnt RH Rim Cover			
1113	995065	Frnt RH Tyre			
1114	992093	Frnt Windscreen Glass			
1115	992117	Frnt Windscreen Rubber			
1116	992108	Frnt Windscreen Moulding			
1117	992098	Frnt Windscreen Sealant			
1118	991019	ERP Bracket			
1119	991020	ERP Unit			
1120	992140	Frnt Wiper Arm			
1121	992142	Frnt Wiper Blade			
1122	995043	Wiper Panel Garnish			
1123	991126	Firewall Panel			
1124	990753	Dashboard Assy			
1125	992282	Glove Box Cover			
1126	992281	Glove Box Compartment			
1127	994483	Steering Wheel Airbag			
1128	994485	Steering Wheel Airbag Sensor			
1129	990749	Dashboard Airbag			
1130	990750	Dashboard Airbag Sensor			
1131	990029	Airbag Control Unit			
1132	990864	Frnt Driver Seat			
1133	991922	Frnt RH Seat Belt Assy			
1134	991899	Frnt Passenger Seat			
1135	995182	Frnt LH Seat Belt Assy			
1136	990247	Sticker			

No. of Items: _____ ACTION: _____

ORIGINAL COPY

Claim Documents

*SJM2629L (8284172059SG)
[SLG420S]
TP
SAT LEASING PTE.LTD
May 9 2018 9:00AM
[Tan Yeow Tiang]
Sat Motors

Upload Documents Upload Photos Compose New Letter Upload Video Upload Audio			View View in Browser	
Photos/Images			3 per page <input type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	01/06/18 15:30	General View	Load JPG	<input checked="" type="checkbox"/>
2	01/06/18 15:30	General View	Load JPG	<input checked="" type="checkbox"/>
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4	01/06/18 15:30	General View	Load JPG	<input checked="" type="checkbox"/>
5	01/06/18 15:30	General View	Load JPG	<input checked="" type="checkbox"/>
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13	01/06/18 15:30	General View	Load JPG	<input checked="" type="checkbox"/>
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25	01/06/18 15:30	General View	Load JPG	<input checked="" type="checkbox"/>
26	01/06/18 15:30	General View	Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page <input type="checkbox"/>	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	05/06/18 13:15	OI GIA REPORT	Load PDF	<input type="checkbox"/>

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/AIG18009893/UZ4D3E2

Date: 08/06/2018

REFERENCE

Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd.	Policy No:	2100482989
Claimant Vehicle No :	SJM2629L	Insured Vehicle No :	SLG420S
Date of Loss:	09/05/2018	Nature of Claim:	TP
		Claim No:	8284172059SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SJM2629L	Engine No:	1NZU405143
Make & Model:	TOYOTA PRIUS, 1.5 (A)	Chassis No:	JTDKB20U103512592
Reg. Date:	26/12/2008 (Man. Year: 2008)	Odometer:	0 km
Colour:	White		
Engine Capacity:	1497 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	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:

CONDITION OF TYRES

Front Tyre Size:	205/55 R16	Rear Tyre Size:	205/55 R16
Front Left Side:	KAPSEN 6 mm	Rear Left Side:	KAPSEN 6 mm
Front Right Side:	KAPSEN 6 mm	Rear Right Side:	KAPSEN 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
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 (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:	30/05/2018	Inspected At:	Sat Motors (HQ)
Date Inspected:	31/05/2018		24 Defu Lane 12
			Singapore 539131
Estimated Period of Repair:	2.0 days		

Adjuster: MARCUS CHUA

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

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRT BUMPER	Cut	0.00 F	*-F
2	1		*FRT BUMPER CLIPS	Necessary	0.00 F	*-F
3	1		*FRT BUMPER SIDE RETAINER	Cracked	0.00 F	*-F
4	1		*FRT RH HEADLAMP ASSY	Scratched	0.00 F	*-F
5	1		*FRT RH WHEEL RIM	Cut	0.00 F	*-F

F=Franchise part.

Total Parts (S\$)	0.00	0.00
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Report was unsubmitted during this print-out.

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 >



ALLIN AUTOMOTIVE APPRAISERS

Block 805D, Keat Hong Close. #13-88 Singapore 684805

GOH WEE KIAT
c/o Auto Mega Mall Pte Ltd
24, Defu Lane 12
Singapore 539131

Report No : ALLIN-06-200

Date : 04.06.2018

Reference

Requested by : Workshop, owner's behalf
Date of Request : 29/5/2018
Date of Accident : 9/5/2018
Date of Inspection : 29/5/2018
Inspected at : Auto Mega Mall Pte Ltd
24, Defu Lane 12
Singapore 539131

Vehicle Details

Vehicle No.	: SJM2629L	Make & Model	: TOYOTA PRIUS
Year Make	: 2008	Colour	: WHITE
Engine No.	: 1NZU405143	Chassis No.	: JTDKB20U103512592
Engine Capacity	: 1,497cc	Mileage	:
Air-Con	: YES	Radio/CD/Cassette	: YES
Seat Belt	: YES	Rims	: SPORT

General Condition of Vehicle

General Condition	: GOOD	Modification	: NIL
Brakes	: SERVICEABLE	Handbrake	: SERVICEABLE
Steering	: SERVICEABLE		

<u>Tyres</u>	<u>Make</u>	<u>Size</u>	<u>Rim</u>	<u>Tread Balance</u>
Front Right	KAPSEN	205/55 R16	SPORT	70%
Front Left	KAPSEN	205/55 R16	SPORT	70%
Rear Right	KAPSEN	205/55 R16	SPORT	70%
Rear Left	KAPSEN	205/55 R16	SPORT	70%

Assessment

	<u>Repairer's Estimate</u>	<u>Recommendation</u>
Spare Parts	: \$ 5,860.70	\$ 4,688.56
Labour Charges	: \$ 1,540.00	\$ 1232.00
Paint Work	: \$ 1000.00	\$ 800.00
Towing Charges	: \$	
Total	: \$ 8,400.70	\$ 6,720.56

Recommend Lum Sum Repairs	: \$ 6,700.00
Reduction	: \$ 1,700.70

Estimated Period Required for Repair : 7 Days



ADJUSTMENT ON REPAIR COST & REPLACEMENT OF PARTS

Vehicle No: SJM2629L
Chassis No: JTDKB20U103512592
Engine No: 1NZU405143

Report No : ALLIN-06-200
Date : 04.06.2018

Replacement of Damaged Parts

S/No.	Quantity	Description	Condition / Remarks	Repairer's Estimates	My Recommendation
1	1	Front Bumper	Damaged	\$ 813.30	\$ 650.64
2	2	Front Bumper Bracket	Necessary	\$ 344.80	\$ 275.84
3	2	Front Bumper Headlamp	Broken	\$ 1,424.60	\$ 1,139.68
4	1	Front Bonnet	Dented	\$ 580.30	\$ 464.24
5	1	Front Bonnet Hinge	Impacted	\$ 151.20	\$ 120.96
6	1	Front Re-inforcement	Impacted	\$ 690.30	\$ 552.24
7	1	Air Con Condenser	Damaged	\$ 980.30	\$ 784.24
8	2	Headlamp Retainer	Damaged	\$ 256.60	\$ 205.28
9	1	Front Right Fender	Dented/Damaged	\$ 619.30	\$ 495.44
				\$ 5,860.70	\$ 4,688.56

Total (Parts): \$ 5,860.70 Less 20% \$ 4,688.56

Labour Charges

10	To fix & dismantle and remove damaged parts and affected Frontal impacted affected damaged portion.	\$ 800.00	\$ 640.00
11	To apply anti rust coat and affected areas	\$ 60.00	\$ 48.00
12	To check wiring	\$ 80.00	\$ 64.00
13	Welding, cutting & panel beating of affected panels, including chassis alignment.	\$ 500.00	\$ 400.00
14	Spray painting for Front Damaged Affected Areas.	\$ 1,000.00	\$ 800.00
15	To apply waterproofing sealer to affected Panels.	\$ 100.00	\$ 80.00
Total Labour:		\$ 2,540.00	\$ 2,032.00

Total cost of repairs (Total cost of parts + Total Labour Cost) **\$ 8,400.70** **\$ 6,720.56**

125
636.6
X
X
X
X
X
X
1574.9
25%: 1181.18
200
X NN
30
100
400
X NN
730

1911.18
20%: 1500



ALLIN AUTOMOTIVE APPRAISERS

Block 805D, Keat Hong Close. #13-88 Singapore 684805

Vehicle No: SJM2629L

Report No.: ALLIN-06-200

Point of Impact

Recommendation

The vehicle was inspected thoroughly based on the repairer's estimate against the actual damages found on the vehicle. My findings and recommendation are listed as per attached.

My adjusted amount for the cost of repair is \$6,700.00

Conclusion

The repairer has agreed to undertake repairs at a lump sum of \$6,700.00 corresponding to labour charges, spray painting and replacement of parts.

SURVEYED WITHOUT PREJUDICE



Appraiser Name:
Lim Chang Liang, Jonathan

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	11/05/2018 16:06
Date Of Accident	09/05/2018 09:30
Exact Location Of Accident	CLUNY ROAD(BOTANIC GARDEN)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM2629L
-----------------------------	----------

Insured/Policyholder

Name Of Registered Owner	SAT LEASING PTE. LTD.
Co Reg No	201631055N
Email Address	GOH.DARREN@LIVE.COM
Mobile Phone No	
Alternative Phone No	OFFICE-93235481

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5090941580-01
Cover Note Number	

Driver

Name of Driver	GOH WEE KIAT
NRIC No	S8113464B
Date Of Birth	24/04/1981
Occupation	OUTDOOR
Date Of Driving Pass	12/11/2002
Driving Experience	15 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93235481
Fax Number	
Contact Number	
EMail Address	GOH.DARREN@LIVE.COM

Address	BLK 256 PASIR RIS STREET 21 #07-277
Postcode	510256
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	4
Passenger 1	NAME: : NA GENDER: : MALE
Passenger 2	NAME: : NA GENDER: : FEMALE
Passenger 3	NAME: : NA GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	BISHAN NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5529999 - FAX NO: 65561905
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER ATTACHED

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	SLG420S
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	PAN JU HWA
NRIC/Passport Number	S8121447F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	GOH WEE KIAT
Approximate Age	
Injuries Sustain	REFER POLICE REPORT
Injured person in which vehicle?	SJM2629L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

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.

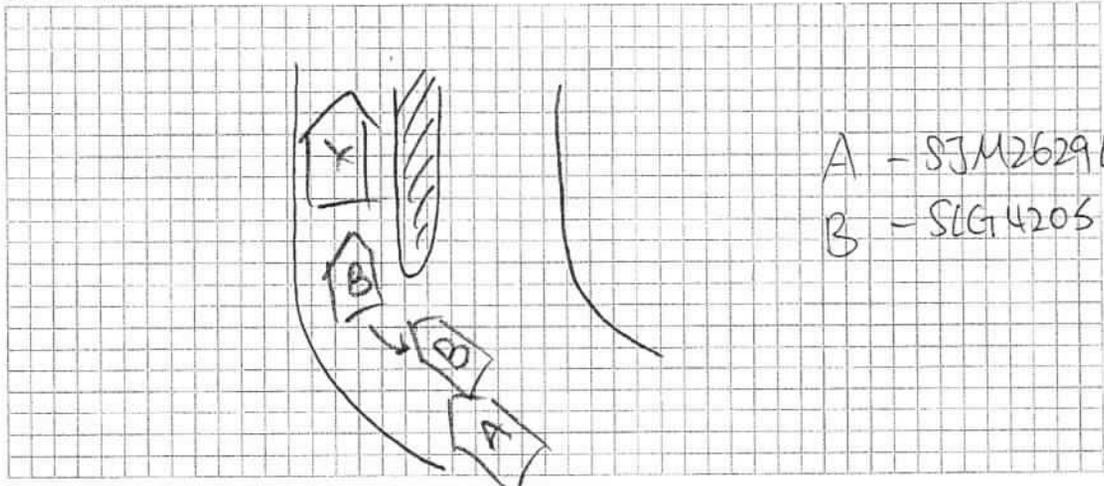


Policyholder's Signature
Date & Time:

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

Refer Police Report

DECLARATION

I/We declare that the above 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.:



**SINGAPORE
POLICE FORCE**



T/20180510/2062

2 of 3

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20180510/2062

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver:			
Name	GOH WEE KIAT	ID No.	S8113464B
Related Vehicle	SJM2629L (Car)	Contact No.	93235481
Hospital/Clinic	HORIZON MEDICAL CENTRE	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	10/05/2018	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver:			
Name	PAN JU HWA	ID No.	S8121447F
Related Vehicle	SLG420S (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 9 May 2018 at about 9.30am, I was at the drop off point of Botanic Gardens, waiting to alight 3 of my passengers. There was a queue and I was the third vehicle.

A vehicle (SLG420S) that was directly in front of me wanted to exit out from the queue. Suddenly, the vehicle reversed and collided into my vehicle. However, at that point there was no visible injury on anyone.

The collision caused my vehicle to sustain dents on the front bumper and bonnet. I wish to state that I have an in-car camera installed however, I am uncertain if the accident was captured.

On 10 May 2018 at about 11am, I went to seek medical attention at Horizon Medical Pte Ltd as I suffered pain on my back and was given 3 days medical leave. I am lodging this report for insurance claim purposes.



SINGAPORE
POLICE FORCE



T/20180510/2062

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

3 of 3
Report No. T/20180510/2062

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report: E / Sgt 2 NUR MARISSA SYAQILA BINTE SAMSAIDI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/05/2018 13:07
Officer In Charge Of Case: TP / AEIT / SSI KASHAWATI BTE SAMIAN SN 061 Contact No.: 65476179	Classification Of Case:
Authentication Stamp NP168 SIG	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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	10/05/2018 12:36
Date Of Accident	09/05/2018 10:30
Exact Location Of Accident	CLUNY ROAD /BOTANIC GARDEN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG420S
Insured/Policyholder	
Name Of Registered Owner	TAN YEOW TIANG
NRIC No	S1179189A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98713163
Alternative Phone No	Others-NOPHONE

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA5 5-DOOR WAGON 2.0L SP.6EAT SUNROOF
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	2100482989-01
Cover Note Number	

Driver

Name of Driver	PAN JU HWA
NRIC No	S8121447F
Date Of Birth	01/07/1981
Occupation	INDOOR
Date Of Driving Pass	30/08/2000
Driving Experience	17 YEARS AND 8 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-98354789
Fax Number	
Contact Number	
EMail Address	PJUHUA@GMAIL.COM
Address	BLK 165 SIMEI ROAD #11-382
Postcode	520165
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
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	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

-

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	SJM2629L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

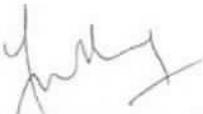
SKETCH PLAN

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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.

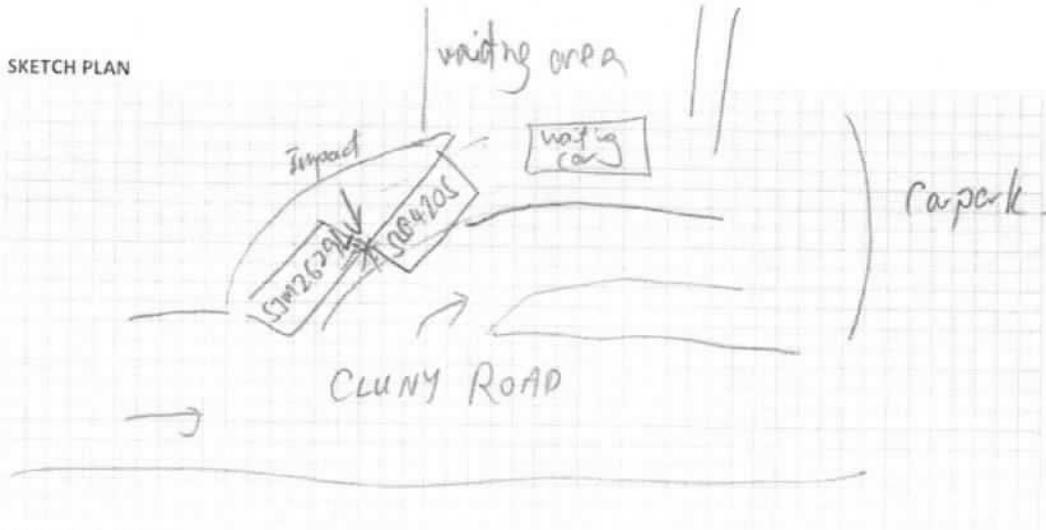

Policyholder's Signature
Date & Time:


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

10 MAY 1234


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE: SJG420S	ACCIDENT DATE & TIME: 9 May 2018 / 10.30am
CONTACT NUMBER: 98354789	E-MAIL ADDRESS: pjuhwa@gmail.com
LOCATION: Cluny Road / Botanic Gardens	
1) Drove towards waiting area towards car park	
2) There was ^{checked} car in waiting area, so reversed	
3) Checked the back before reversing, did not see any car so proceeded to reverse	
4) Knocked into car behind (SJM2629L)	
NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION	
Please state	
<input type="checkbox"/> Claim Own Policy <input type="checkbox"/> Claim Third Party <input type="checkbox"/> Claim OD/TP at other workshop <input checked="" type="checkbox"/> Reporting Only	

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: 10 May 2018
 1234


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



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 : CS3/AIG18009893/Gvbe2-1	
78 SHENTON WAY #08-16 CHARTIS BUILDING SINGAPORE 079120		Date : 07-09-2018	
ATTN : LOH CHEE HENG		Code : AIG	
1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)			
Insured Veh.	SLG 420S	Veh. Inspected	SJM 2629L
Policy No.		Coverage (\$)	0.00
Claim No.	8284172059SG-003	Excess (\$)	0.00
Assign From	LOH CHEE HENG	Assign Date	26/07/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1497
Engine No.	HIDDEN	Year of Reg.	2008
Chassis No.	JTDKB20U103512592	Colour	WHITE
Odometer	180713	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/55 R16	MICHELIN	5 mm
L/H Front Tyre	205/55 R16	MICHELIN	5 mm
R/H Rear Tyre	205/55 R16	MICHELIN	5 mm
L/H Rear Tyre	205/55 R16	MICHELIN	5 mm
4. Description of Damages			
THE VEHICLE HAD COMPLETED ITS REPAIR WORKS. REPAIR CONDITION SEE DETAILS.			
5. General Information			
Accident Date	09/05/2018	Inspection Date	16/08/2018
Survey held at	AUTO MEGA MALL PTE LTD 24 DEFU LANE 12 SINGAPORE 539131.		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working 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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJM 2629L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER	REPLACED	813.30	813.30
2	FRONT BUMPER BRACKET	REPLACED	344.80	125.00
2	FRONT BUMPER HEADLAMP	REPLACED	1,424.60	636.60
1	FRONT BONNET	NOT NECESSARY	580.30	-
1	FRONT BONNET HINGE	NOT NECESSARY	151.20	-
1	FRONT RE-INFORCEMENT	NOT NECESSARY	690.30	-
1	AIR CON CONDENSER	NOT NECESSARY	980.30	-
2	HEADLAMP RETAINER	NOT NECESSARY	256.60	-
1	FRONT RIGHT FENDER	NOT NECESSARY	619.30	-
	LESS 25% DISCOUNT		-	-393.73
			5,860.70	1,181.17
LABOUR				
	TO FIX & DISMANTLE AND REMOVE DAMAGED PARTS AND AFFECTED FRONTAL IMPACTED AFFECTED DAMAGED PORTION.		800.00	200.00
	TO APPLY ANTI RUST COAT AND AFFECTED AREAS.	NOT NECESSARY	60.00	-
	TO CHECK WIRING.		80.00	30.00
	WELDING, CUTTING & PANEL BEATING OF AFFECTED PANELS, INCLUDING CHASSIS ALIGNMENT.		500.00	100.00
	SPRAY PAINTING FOR FRONT DAMAGED AFFECTED AREAS.		1,000.00	400.00
	TO APPLY WATERPROOFING SEALER TO AFFECTED PANELS.	NOT NECESSARY	100.00	-
			2,540.00	730.00
GRAND TOTAL			8,400.70	1,911.17
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,500.00

Report Ref No. CS3/AIG18009893/Gvbe2-1

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.