

INSTR:

INS. CASE OWNER:

JACUYN

CC 6/AIG1801

5779, A

LKK:

IDAC:

Surveyor:

ADRIAN

DOE:

ASSIGNMENT

0309/18

Date / Time:

29/8/18

Registered in Merimen:

29/8/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

skm 46656

Name of Insured:

LEONG LAN KHEUNG TANILE

Insured Tel No.:

HP: 97799462

Excess Sec II :\$S

D.O.A:

29/8/18

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

67441742856

Policy No.:

20026563

Make / Model:

LEXUS

Place of Accident:

QUEEN ST CP

If NO, Driver Name / Age:

Driver Tel No.:

(V/L YES / NO)

OI GIA REPORT: YES / NO TP GIA REPORT: YES / NO

Insured Liability:

Final ? Yes / No

SKP 829P

INSRS:
WSP:
Tel:
Liability:
RMKS:Premium
carsINSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date / Time

29/8/18

VIN: N

SKP 829P - 15/11/2018/42/ 11/18/18 - 29/8/18
SKM 46656 - Yas reported no contact
TP PROVIDED SCENE PHOTOS.

FINISHED

MIA REQUESTED OI REPORTED NO
COLLUSION.

TP PROVIDED SCENE PHOTOS.

SEND LETTER IN MAIL TO OI TO
NOTIFY TP CLAIM IN NCB BOOKS.

TP LOB IN BY MAIL

STOLE TO OI. REPORTED TO STATE.

SEND 1st OFFER TO TP.

TP ACCEPTED OFFER.

ALL DOCS IN ORDER.

STAGE

DATE / PIC

Non-Reporting 1st (1st):

Non-Reporting 1st (2nd):

Non-Reporting 1st (Final):

Notification 1st (if non-pickup):

Call OI:

After call 1st to OI: 29/07/19 - VIC

Documentation Check List: Handler Typist

Notification 1st (if non-pickup)

After call 1st to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time:

Sent By:

Confirm by:

FINALIZATION

Date/Time:

Confirm with:

Repair Cost: L15

\$S 880.00

(2 days) Reduction:

G1

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

L15 - 2018

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

\$S 880.00

Loss of Rental (LOR):

\$S

-

(days)

Loss of Use (LOU):

\$S

160.00 (580 x 2 days)

Loss of Income (LOI):

\$S

-

(5 x days)

LOR only

LOU only

LOR + LOU

LOR + LO

[Tick only one]

GIA/LTA Search

\$S

7.45

Medical:

\$S

-

1) Claim status: Normal/Reject/Private Settle

Disbursement:

\$S

-

(e.g. Tow/Independent)

2) Report Format:

Legal Cost:

\$S

-

3) Survey Fee:

4520.00

Total:

\$S 1,017.45

Global Sum \$S:

1,010.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$S

1,010.00

Name 1:

PREMIUM CARE SERVICES PTE LTD

Payee 2: (Strike if N.A.)

\$S

-

Name 2:

-

Payee 3: (Strike if N.A.)

\$S

-

Name 3:

-

REF:

APP. REC. BY: Adrian KingW
ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SKF829PYr Regn: 2012, Apr 1Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Camryc.c. 2494Colour: Black

A/C: Insured / Std / NI / NA

Sp. Reading: 155989

T/Radio: Insured / Std / NI / NA

Eng/No _____

C/No: MR03AK5004000-375Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 235/45R18R: 235/45R18

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

TOYO / YOKO or

Roadstone

Front

Rear

R/Bal: 06 mmR/Bal: 06 mmL/Bal: 06 mmL/Bal: 06 mm

D.O.A. _____

D.O.I. 03/09/18Survey held at Premium Carz

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time

Action / Instruction

TP ALGLIG \$850.00CRABO: \$1,366.55 / 61%

Date/Time: File Pass to?



: Preli. Report

ii



: Final Report

Date/Time: File Return to?

iii

Days Of Repair:

Resurvey No. of Trip:

Report Format:

Lump Sum / L.B.L: (\$)

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Insp (\$)



Weekend (\$)

Survey Fee:

Transportation:

S + R.S. \$

Photo:

Other:

TOTAL

ASS. REC. BY: Adrian Lim

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

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

N/S	O/S

Item	3 Val: Yes or No
Item 1	
Item 2	
Item 3	
Item 4	
Item 5	
Item 6	
Item 7	
Item 8	
Item 9	
Item 10	
Item 11	
Item 12	
Item 13	
Item 14	
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Item 95	
Item 96	
Item 97	
Item 98	
Item 99	
Item 100	

Vehicle: IN / OUT

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

TP ALG.

NOTES

Lump Sum / I.B.E.: (5)



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 : CC6/AIG18015779/wb3

78 SHENTON WAY #08-16
CHARTIS BUILDING
SINGAPORE 079120

Date : 29-08-2018



Code : AIG

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SKM 4665G	Veh. Inspected	SKF 829P
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	29/08/2018

2. Vehicle Particulars & Condition

Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

--	--

5. General Information

Accident Date	24/08/2018	Inspection Date	
Survey held at	PREMIUM CARZ SERVICES PTE LTD 1 KAKI BUKIT AVE 6 # 01-90 AUTOBAY @ KAKI BUKIT SINGAPORE 417883		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--



Co. Reg. No.: 201416720C
1 Kaki Bukit Ave 6 #01-90 Autopay@Kaki Bukit Singapore 417883
Tel: 6636 9100 Fax: 6636 9113

Date: 29/8/2018

TO: AIG Asia Pacific Insurance Pte Ltd
AIG Building
78 Shenton Way #07-16
Singapore 079120

Vivian

Attn: Motor Claims Department
Fax: 6224 7478

LKKAL consultants hence notify the Repair shop for work:

- To resurvey
- To display car
- Parts prices are
- Third party survey
- No illegal modification
- Supplementary items

Acknowledged by Repairer
Our Customer: Koh Heok Kian
Vehicle No: SFF829P 3CF829P
Model: Toyota Camry 2.5 Auto

Manufacture Year: 2012
Date of Accident: 24/8/2018
Total Estimate Repair Days: 5
Total Pages: 1

Re: Repair Estimate For Third Party Claim against SKM4665G

No.	Item Descriptions	Qty	Unit Price	Amount	Remarks From Surveyor
A.	Spare Parts				
1	Rear bumper	1	\$589.60	\$589.60	✓
2	Rear bumper side retainer RH	1	\$70.40	\$70.40	✓
3	Rear bumper side retainer LH	1	\$70.40	\$70.40	✓
4	Rear bumper reinforcement	1	\$391.80	\$391.80	✓
5	Reverse sensor	2	\$250.00	\$500.00	200 (Qty)
	Total			\$1,622.20	
	Less 25%			\$405.55	
	Sub Total 1			\$1,216.65	
A.	Spare Parts (S/Nett)				
1	Front bumper clip	10	\$5.00	\$50.00	30
	Sub-Total 2			\$50.00	
	Total for Parts			\$1,266.65	
B.	Labour				
1	To check wiring.			\$90.00	30
2	Panel beating charges to remove and replace, to cut and weld, to knock and reshape damaged parts & areas.			\$400.00	200
3	Spray painting all affected parts & areas.			\$400.00	200
4	To spray anti-rust undercoating.			\$60.00	✓
	Total Labour			\$950.00	
	Total Repair Cost			\$2,216.65	

Yours faithfully,

Aun Teng
f Premium Carz Services Pte Ltd

Adrian Lij
4/5 03/09/18-
02 days
Total 1107.2
1/8 850 ✓

Surveyor's Details	
Name	
Contact	
Survey Date	
Recommender	Authorize / Not Authorize
Before Paint	Yes / No

430

Report Remarks Entry - CC6/AIG18015779/Awb3

Remarks

Remarks

Add

Remarks 1	By	On
<input type="checkbox"/> SKF 829P ; SKM 4665G	LSP	29/8/2018 5:03:42 PM
<input type="checkbox"/> EST : \$ --- SUR :LWP --- WKSP :PREMIUM CARZ SERVICES PTE LTD	LSP	5/9/2018 4:44:00 PM
<input type="checkbox"/> FILE PASS TO VIVIAN	LSP	30/8/2018 9:15:33 PM
<input type="checkbox"/> PENDING SURVEY	LSP	30/8/2018 9:15:37 PM
<input type="checkbox"/> 3.9.18 OI reported no contact	LPF	3/9/2018 2:34:21 PM
<input type="checkbox"/> SURVEYOR ASSGNMENT PAPER PASS TO HANDLER***NO ESTIMATE	LSP	6/9/2018 7:00:24 PM



Co. Reg. No.: 201416720C
1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883
Tel : 6636 9100 Fax : 6636 9113

SATISFACTION VOUCHER

Our ref.: 0331 /SKF824P/TP/PC/C818
To : AIQ Asia Pacific Insurance Pte Ltd

ACCIDENT INVOLVING SKF824P AND SKM4665G ON 24/8/2018
ALONG QUEEN STREET CARPARK

I/We hereby acknowledge having received from Premium Carz Services Pte Ltd, 1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883, my/our vehicle number SKF824P which has been repaired to my/our satisfaction and acceptance. I/We admit that the payment of *SGD _____ account for such repairs is in full discharge of my/our claim.

Dated : 7 day of September 2018

Signature : 

Owners' name: KOH HEOK LIM

NRIC/Co. Reg.: S7206664B

Address : 33 Jalan Rama-Rama

#16-06

Singapore 329112

(*Based on final settlement from insurance)



Co. Reg. No.: 201416720C
1 Kaki Bukit Ave 6 #01-90 Autopay@Kaki Bukit Singapore 417883
Tel: 6536 9100 Fax: 6536 9113

INVOICE NO: PC9581

Date : 04/10/2019

Your Ref.: SKM4665G

Our Ref.: 0331/SKF829P/TP/PC/0818

Bill To :

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

Our Customer : Koh Heok Kian

NRIC No : S7206664B

Address : 33 Jalan Rama-Rama
#16-06
Singapore 329112

Vehicle No : SKF829P

Date of Accident : 24/8/2018

Model : Toyota Camry 2.5

Re: Third Party Claim Against SKM4665G

No.	Item Descriptions	Amount
1	FINALIZED SETTLEMENT (GLOBAL SUM)	S 1,010.00
TOTAL AMOUNT DUE		S 1,010.00

(Singapore Dollars One Thousand and Ten only)

Yours faithfully



Premium Carz Services Pte Ltd

* All cheque should be crossed and make payable to "Premium Carz Services Pte Ltd"



Co. Reg. No.: 201416729C
1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883
Tel : 6636 9100 Fax : 6636 9113

Date : 2/10/2018

Your Ref : SKM4665G

Our Ref : 0331/SKF829P/TP/PC/0818

AIG ASIA PACIFIC INSURANCE PTE LTD
AIG Building
78 Shenton Way #07-16
Singapore 079120
Attn : Motor Claims Dept.

Dear Sir/Madam

ACCIDENT INVOLVING SKF829P & SKM4665G ON 24/8/2018 ALONG QUEEN STREET CARPARK

We refer to the above accident.

The accident was caused solely by the negligence of your insured and as a result, we had incurred the following Costs and Losses: -

Costs of Repair (Lump Sum)	\$ 850.00
Loss of Use (2 days at \$100/day)	\$ 200.00
LTA TP Search Fee	\$ 7.45
Claimed Amount	<u>\$1,057.45</u>

Enclosed are the supporting documents for your perusal:

1. Invoice 0331
2. LTA Tax Invoice/Receipt
3. GIA Report for SKF829P
4. Certificate of Insurance
5. Satisfaction Voucher
6. Letter of Authority and Indemnity

Please let us hear from you within the next 14 days.

Yours faithfully



PREMIUM CARZ SERVICES PTE LTD



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

29 JULY 2019

LEONG LAU KHENG JANICE
15 MOUNT EMILY ROAD
#01-34
SINGAPORE 228495

By Post & By Email

Dear Sir/Madam,

OUR REF : CC4/AIG19004606/Ahb3
YOUR REF : SKM 4665G

ACCIDENT INVOLVING SKM 4665G AND SKF 829P QUEEN STREET CAR PARK ON 24.08.2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AIG Asia Pacific Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from Body Repairer/Workshop acting on behalf of the owner of SKF 829P against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had collided to the Third-Party vehicle SKF 829P. As such, we may not be absolved from liability.

Please be informed that your No Claim Discount (NCD – if any) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defense, please reply to us within 10 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to vicalpeh@lkkauto.com within 10 days from the date of this letter **if not provided at AIG's reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AIG's prior knowledge and consent.

This letter should **not** be regarded as a waiver by AIG of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AIG shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6841 2096 or email us at vicalpeh@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely,



Vic Alpeh
Case Handler
DID: 6841 2096
FAX: 6741 4108
Email: vicalpeh@lkkauto.com

c.c. AIG Asia Pacific Insurance Pte Ltd
(Motor Claims Dept)

jkleng9@gmail.com
(Email)

Vic (LKKAUTO)

From: Vic (LKKAUTO)
Sent: Monday, 29 July, 2019 11:24 AM
To: Jkleng9@gmail.com
Cc: Admin A; Vic (LKKAUTO)
Subject: YOUR REF: SKM 4665G_ACCIDENT INVOLVING SKM 4665G AND SKF 829P QUEEN STREET CAR PARK ON 24.08.2018



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

29 JULY 2019

LEONG LAU KHENG JANICE
15 MOUNT EMILY ROAD
#01-34
SINGAPORE 228495

By Post & By Email

Dear Sir/Madam,

OUR REF : CC4/AIG19004606/Ahb3
YOUR REF : SKM 4665G

ACCIDENT INVOLVING SKM 4665G AND SKF 829P QUEEN STREET CAR PARK ON 24.08.2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AIG Asia Pacific Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from Body Repairer/Workshop acting on behalf of the owner of SKF 829P against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had collided to the Third-Party vehicle SKF 829P. As such, we may not be absolved from liability.

Please be informed that your No Claim Discount (NCD – if any) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defense, please reply to us within 10 days from the date of this letter.

Your full co-operation in the handling of the claim is required and kindly submit the following to vicalpeh@lkkauto.com within 10 days from the date of this letter **if not provided at AIG's reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)

- Coloured photographs of damage to all vehicles involved (if any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AIG's prior knowledge and consent.

This letter should **not** be regarded as a waiver by AIG of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AIG shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6841 2096 or email us at vicalpeh@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

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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Co. Reg No: 201416720C
1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417883
Tel : 6636 9100 Fax : 6636 9113

LETTER OF AUTHORITY AND INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. SKF829P AND SKM 4665G
AT/ALONG QUEEN STREET CARPARK
ON 24 DAY AUGUST MONTH 2018 YEAR

- a) I/We, the owner of vehicle no. SKF829P hereby instruct and authorize you to commence repair to the said vehicles.
- b) You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
- c) You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf.
- d) Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account.
- e) In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shall render full co-operation.
- f) In the event that my/our claim against the third party and/or his insurers is Not successful or cannot be proceeded with, I/we authorized you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respects, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/we shall also be personally liable to bear all legal cost incurred by you in claiming back for the repair cost by your Solicitors.
- g) If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any losses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
- h) I/we have read and understand the above statement and agreed.


Dated this 28 day August month 2018 year

Signature

Name

NRIC/ROC No.

Address


: KOH HENG KIAM
: S7206664B
: 33 Jalan Rama - Rama
: #16-06
: Singapore 329112

Company Stamp



RELEASE VOUCHER
(AIG Asia Pacific - Express Third Party Claim)

We/I, **PREMIUM CARZ SERVICES PTE LTD** ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd **LKK AUTO CONSULTANTS PTE LTD** (name of surveyor) with respect to the amount claimed for **S\$1,010.00** (Global Sum – all in) for vehicle no. **SKF 829P** that was damaged pursuant to the accident which occurred on **24/08/2018** (date) along **QUEEN STREET CAR PARK** (location) involving vehicle no/s **SKM 4665G**. This is pursuant to the inspection conducted on **03/09/2018** (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner **KOH HEOK KIAN** ("the third party claimant") of vehicle no. **SKF 829P** make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to **SKF 829P** (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this 4 (day) of October (month) **2019** (year)

 LWP

Signed by appointed surveyor



AS

Signed by "the workshop" (with chop)



Co. Reg. No.: 201416720C
1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki Bukit Singapore 417863
Tel : 6636 9100 Fax : 6636 9113

INVOICE: 0331

Date : 02/10/2018

Bill To

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

Our Customer

Name : Koh Hook Kian
IC No. : S7206664B
Address : 33 Jalan Rama-Rama
#16-06
Singapore 329112

Vehicle No : SKF829P
Date of Accident : 24/8/2018
Model : Toyota Camry 2.5

No.		Qty	Unit Price	Amount
1	To supply labour and materials to repair the above-mentioned vehicle to its pre-accident condition (Lump Sum)	1	-	\$850.00
TOTAL				\$850.00

For Premium Carz Services Pte Ltd

* All cheque should be crossed and make payable to "Premium Carz Services Pte Ltd"

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006526-2

Print Date/Time : 29 Aug 2018 / 11:14:38

Receipt Date/Time : 29 Aug 2018 / 11:14:38

Tax Invoice/Receipt

Receipt No. : ITNET-00000-180829-000673

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SKM4665G				
As at 24 Aug 2018/09:30:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SKM4665G Enquiry Fee 20180829111402858913	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
Paid By				
	20180829111415687	Direct Debit: eNETS Debit (Internet Banking)		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

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

Fastlane

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	27 Aug 2018 Edit Reg		03 Sep 2018 00:00 Edit Adj Rpt	S\$850.00 Edit Estimates	S\$850.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS [Created by adjuster]

Insured:	Leong Lau Kheng, Janice Mrs. Thian-Leong Lau Kheng, ID: S2556842G		
Main Claimant:	KOH HEOK KIAN, ID: S7206664B		
Vehicle Reg. No.:	SKF829P	Date of Loss:	24/08/2018 09:00 - :59 [76 Months and 23 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 6744137438SG	Policy/Cover Note No.:	2100365657 (Comprehensive)
Vehicle Reg. No. (Insured):	SKM4665G	Policy No. (Claimant):	P10057324R00
		Excess:	
Repairer:	Premium Carz Services Pte Ltd (HQ) 1 Kaki Bukit Ave 6 #01-90 Autobay@Kaki, 417883 Kaki Bukit - Tel: 66369100		
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Ler, Bernard-JQ] BernardJiQian.Ler@aig.com		
Claimant's Insurer:	Auto & General Insurance (Singapore) Pte. Limited. (HQ) - Tel: 6540 2180		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by ADRIAN LING] ... [Final Rpt due 07/09/2018]		

ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS [View All](#) [Search Tasks](#) [Create New Task](#) [Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SKF829P (6744137438SG)
[SKM4665G]

TP

KOH HEOK KIAN

Aug 24 2018 9:00AM

[Leong Lau Kheng, Janice Mrs. Thian-Leong Lau Kheng]
Premium Carz Services Pte Ltd

Upload Documents Upload Photos Compose New Letter Upload Video Upload Audio			View View in Browser	
Letters/Correspondences			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	(Draft)	Third Party Express Settlement – Payment Breakdown		Edit
Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	30/08/18 09:18	Accident Statement <small>From: SC - Reg. No: SKM4665G, Claimant: LEONG LAU KHENG JANICE</small>		Load HTM
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	02/10/18 16:49	General View		Load JPG <input checked="" type="checkbox"/>
2	02/10/18 16:49	General View		Load JPG <input checked="" type="checkbox"/>
3	02/10/18 16:49	General View		Load JPG <input checked="" type="checkbox"/>
4	02/10/18 16:49	General View		Load JPG <input checked="" type="checkbox"/>
5	02/10/18 16:49	General View		Load JPG <input checked="" type="checkbox"/>
6	02/10/18 16:49	General View		Load JPG <input checked="" type="checkbox"/>
7	02/10/18 16:49	General View		Load JPG <input checked="" type="checkbox"/>
8	02/10/18 16:49	General View		Load JPG <input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	29/08/18 17:15	TP GIA REPORT		Load PDF
2	03/06/19 14:40	EVIDENCE FROM TP		Load PDF
3	29/07/19 11:06	TP ESTIMATE - FINALIZED		Load PDF
4	29/07/19 11:26	EMAIL TO OI		Load PDF
5	29/07/19 11:26	LETTER TO OI		Load PDF
6	16/10/19 09:56	WORKSHOP INVOICE		Load PDF
7	16/10/19 09:56	AUTHORISATION TO ACT FORM		Load PDF
8	16/10/19 09:56	Release Voucher		Load PDF
9	16/10/19 09:56	LTA SEARCH		Load PDF
10	16/10/19 09:56	LOD		Load PDF

Documents Checklist

Reset Save Print	
<p>DOCUMENTS CHECKLIST</p> <p>There are no document checklists configured.</p>	
<p>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>	
<p>Show Remarks To: <input type="checkbox"/> Handling Insurer</p> <p><small>Note: Remarks are private unless you show it to other parties.</small></p>	

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM _____

**THIRD PARTY EXPRESS SETTLEMENT
(PAYMENT BREAKDOWN)**

Vehicle No:	SKM4665G (Insd veh)	Model:	TOYOTA CAMRY 2.5 (A)
	SKF829P (TP veh)		
Date of Accident:	24/08/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	2,216.65
Final Repair Cost	:	\$	1,010.00
Loss of Use	:	\$	2.00 days at \$80.00 per day
Rental (if any)	:	\$	days
LTA / GIA Search Fee	:	\$	
Others:	:	\$	
	:	\$	
Final Settlement Sum (Global Sum)	:	\$	1,010.00

Is Third Party Workshop GIA Registered? ☐ YES ☒ NO (Kindly indicate below)

A) For Non GIA Registered Workshop: Agreed Liability _____ 100 _____ (%)

B) For GIA Registered Workshop: BOLA Applicable: Yes/ No BOLA Scenario No: _____

BOLA Liability: _____ (%) Assessed Liability (*): _____ (%)

* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.

Remarks _____

Payment Instruction: Payee's Breakdown			
1)	Premium Carz Services Pte Ltd	:	\$ 1,010.00
2)		:	\$
3)		:	\$

JOANNE LEE KHANG MIN

16 Oct
2019

LKK Auto Consultants Pte Ltd

Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report;
Medical Report/ Bill (if any))

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: CC6/AIG18015779/AHB3Q2

Date: 16/10/2019

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100365657
Claimant
Vehicle No : SKF829P **Insured Vehicle No :** SKM4665G
Date of Loss: 24/08/2018 **Nature of Claim:** TP **Claim No:** 6744137438SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SKF829P**
 Make & Model: TOYOTA CAMRY, 2.5 (A) Engine No: HIDDEN
 Reg. Date: 01/04/2012 (Man. Year: 2012) Chassis No: MR053AK5004000375
 Colour: Black Odometer: 155989 km
 Engine Capacity: 2494 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: 235/45 R18 Rear Tyre Size: 235/45 R18
 Front Left Side: Roadstone 6 mm Rear Left Side: Roadstone 6 mm
 Front Right Side: Roadstone 6 mm Rear Right Side: Roadstone 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,266.65	672.20	594.45	46.93
Miscellaneous Items	0.00	0.00	0.00	
Labour	950.00	430.00	520.00	54.74
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	2,216.65	1,102.20	1,114.45	50.28
Approved Total (Overridden) (S\$)		850.00		
Nett Amount (S\$)	2,216.65	850.00	1,366.65	61.65
+ Loss of Use (2.0 x S\$80.00/day) (S\$)		160.00		
+ Doc/Search Fee (S\$)		7.45		
Nett Liability (S\$)		1,017.45		
Global Sum Settlement (S\$)		1,010.00		

INSPECTION

Date of Assignment: 03/09/2018
 Date Inspected: 03/09/2018 Inspected At: Premium Carz Services Pte Ltd (HQ)
 1 Kaki Bukit Ave 6 #01-90
 Autobay@Kaki
 Singapore 417883
 Estimated Period of Repair: 2.0 days

Adjuster: ADRIAN LING

Manager: VIC ALPEH

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

REPAIR DETAILS

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Deformed	589.60 FL	*589.60 FL
2	1		*REAR BUMPER SIDE RETAINER RH	Not Necessary	70.40 FL	*- FL
3	1		*REAR BUMPER SIDE RETAINER LH	Not Necessary	70.40 FL	*- FL
4	1		*REAR BUMPER REINFORCEMENT	Not Necessary	391.80 FL	*- FL
5	2		*REVERSE SENSOR	Damaged	375.00 FS	*200.00 FS
6	10		*REAR BUMPER CLIP	Necessary	50.00 FS	*30.00 FS

F=Franchise part, S=SpcNett, L=ListItemDisc.

Sub Total (\$\$)	1,547.20	819.60
- List Item Discount on L Items 25.00/25.00% (\$\$)	280.55	147.40
Total Parts (\$\$)	1,266.65	672.20

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	TO CHECK WIRING	New	90.00	30.00
2	PANEL BEATING CHARGES TO REMOVE AND REPLACE ,TO CUT AND WELD ,TO KNOCK AND RESHAPE DAMAGED PARTS & AREAS	New	400.00	200.00
3	SPRAY PAINTING ALL AFFECTED PARTS & AREAS	New	400.00	200.00
4	TO SPRAY ANTI-RUST UNDERCOATING	New	60.00	0.00
Gross Labour Cost (\$\$)			950.00	430.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >