ASSIGNMENT  Veh No. SLW 7944S Yr Regn: 2018 March firmsted Cost  Type (MS) TP RES I DD RES I EVA I NV / MV  Intropect Vehicle No.  Workshop m/s  Colour Scrup, AC: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA Sp. Reading 1582 TirRadio: Insured I Std I NI / NA EngNo:  CNo: WALL ZZ FFATA OG 90 86 9  Cono. Cond. Get II Fair / Poor I Burnt Steering: Inorger I Jammed I Leaked / Burnt or Modi: NI / Std I / Std I / Std I / Std I / NI / NA Steering: Inorger I Jammed I Leaked / Burnt or Modi: NI / Std I / Std I / Std I / Std I / NI / NA Sp. Reading 1583 I / Std I / Std I / NI / NA EngNo:  Colour Scrup, AC: Insured I std I NI / NA EngNo:  Workshop m/s  Sp. Reading 1582 TirRadio: Insured I std I NI / NA EngNo:  Colour Scrup, AC: Insured I std I NI / NA EngNo:  Colour Scrup, AC: Insured I std I NI / NA EngNo:  Colour Scrup, AC: Insured I std I NI / NA EngNo:  Colour Scrup, AC: Insured I std I NI / NA EngNo:  Took AC Acidosia / AC Acidosia / Std I / NI / NA EngNo:  Took AC Acidosia / AC Acidosia / Std I / NI / NA EngNo:  Took AC Acidosia / AC Acidosia / Na / Na EngNo:  Took AC Acidosia / AC Acidosia / Na / Na EngNo:  Took AC Acidosia / AC Acidosia / Na / Na EngNo:  Took AC Acidosia / AC Acidosia / Na / Na EngNo:  Took AC Acidosia / AC Acidosia / Na / Na EngNo:  Took AC Acidosia / AC Acidosia / Na / Na EngNo:  Took AC Acidosia / AC Acidosia / Na / Na EngNo:  Took AC Acidosia / AC Acidosia / Na /	REF: CC2	/AZK18018232 /Arbez	
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Truck / Trailer or Make: Add: A+ &dec. cc /984.  Colour Gruy, AC: Insured / Std / NI/ NA Sp. Reading / 1582 Tradic: Insured / Std / NI/ NI/ NA Sp. Reading / 1582 Tradic: Insured / Std / NI/ NI/ NI/ NI/ NI/ NI/ NI/ NI/ NI/ N	From: Date:	Veh No: SLW 7944S, Yr Regn: 2	018 Merch
Make: Add. A + Sec. Co. 1984.	Estimated Cost:	Type: M.Ca / M.Cycle / Bus / Van / Lorry / Taxi / Prime	Mover /
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AC Accident Rport:  Consistent?: Yes or No Ist. Repairs:  days Res.: Yes or No Ist. Repairs:  A REV / REP. / 24 HRS  Vehicle: IN/OUT  A Color / Instruction  Date / Time  Action / Instruction	of	Sp.Reading 15582 T/Radio: Insure	ed / Std / NI / NA
Gen. Cond. Geour Fair / Poor / Burnt Steering: Inorger / Jammed / Leaked / Burnt or Brake: Inorger / Jammed / Leaked / Burnt or Brake: Inorger / Jammed / Leaked / Burnt or Modi: Nil / SRight / STD A/Rim or Tyre Size: F: 225 / 50 PLT.  R: 235 / 50 PLT.  BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU FIR / SUMI / TOYO / YOKO or  Front Rear  ACA cocident Rport: Consistent? : Yes or No LIA / FR Seen: Consistent? : Yes or No LIA / FR Seen: Consistent? : Yes or No LIA / REP. / 24 HRS  AND A / REP. / 24 HRS  Vehicle: IN / OUT  Action / Instruction  Date / Time Action / Instruction	nsured:		
Steering: Inorger / Jammed / Leaked / Burnt or Brake: Inorger / Jammed / Leaked / Burnt or Brake: Inorger / Jammed / Leaked / Burnt or Brake: Inorger / Jammed / Leaked / Burnt or Modi: Nil / Sign / STD A/Rim or Tyre Size: F: 2.25 / 50/2.77.  R: 2/5 / 50/2.77.	Policy No. 1800019 0 09	C/No: WAUZZF47JA069086:	,
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Modi: Nil / SRih / STD A/Rim or Tyre Size: F: 2.25 50 2.77- R: 2/35 50 2.7	(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or	*E
Policy Condition   Prolicy Consistent?   Prolicy Consistent   Prolicy	Make of Veh:	Modi: Nil / SRim / STD A/Rim or	
Policy Condition   Prolicy Consistent?   Prolicy Consistent   Prolicy		Tyre Size: F: 225/50217-	
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AC Accident Rport: Consistent?: Yes or No IA / PR Seen: Consistent?: Yes or No IA / REP / 1 24 HRS IA / REP /	Remark: The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU (P	PIR / SUMI /
ACA Cacident Report: Consistent?: Yes or No IA / PR Seen: Consistent?: Yes or No IA / PR Seen: Consistent?: Yes or No IA / PR Seen: Consistent?: Yes or No ID.O.A.  A / REV / REP. / 24 HRS  Ate: Person Contacted: Vehicle: IN / OUT  The U/C / Chassis frame / Body Structure affected due to collision  Date / Time   Action / Instruction  Date / Time   Action / Instruction  DOD At G.  Ino [18] Submit   pre]: Report  The U/C / Chassis frame / Body Structure affected due to collision  Date / Time, File Pass to?  Person Contacted: Days Of Repair:  RECEIVED 1 5 0CT 2018  Add Fee: Site Insp (\$ ) SHESS SI  Interview (\$ ) Photos  Ceport Format: Ob  Ump Sum / I.B.I: (\$ ) Chess SI   Interview (\$ ) Photos  Tech. Invs (\$ ) Chers SI   Interview (\$ ) Photos  Ceport Format: Ob  Ump Sum / I.B.I: (\$ ) Chess SI   Interview (\$ ) Photos  Consistent?: Yes or No  R/Bal.	repair at the time of inspection.	TOYO/YOKO or	
A / PR Seen:   Consistent? : Yes or No   LBal.   Q6   mm   LBal.	Bal. or Market Value.	<u>Front</u> <u>Rear</u>	
st. Repairs: days Res.: Yes or No sum Sum: % 3 Val.: Yes or No  A / REV / REP. / 24 HRS  Action / Instruction  Date / Time File Pass to?  The U/C / Chassis frame / Body Structure affected due to collision  RECEIVED 1 5 007 2018  Survey Fee: 700 atteitme. File Pass to?  Transportation: Survey Fee: 100 atteitme. File Return to?  Add Fee: Stite Insp (\$ ) S+RS_SI  Interview (\$ ) Photos  Provided atteitment of the provided att	DAC Accident Rport: Consistent? : Yes or No	R/Bal. Oh mm R/Bal.	a mm
Survey held at Previous Description of Date / Time   Report   Previous   Prev	GIA / PR Seen: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. Q	mm
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The U/C / Chassis frame / Body Structure affected due to collision  Date / Time   Action / Instruction   DD ALG	CA / DEV / DED / 24 HDS	Des. of Damages : Frt / Rear ) O/S / N/S / U/C / Re	ooftop or
Date / Time   Action / Instruction    OD ALG    Ino 18   James   informed owner   claim   TP   instead   of OD    Ino 18   Submit   pre   report    RECEIVED 1 5 0CT 2018    Ster/Time, File Pass to?   Preli. Report    In ale/Time, File Pass to?   Survey Fee:    Add Fee:   Site Insp (\$ ) _s + Rs_ Si    Interview (\$ ) Photos    Interview (\$ ) Phot		IN / OUT	
Ito [18] James informed owner claim TP instead of OD  Ito [18] Submit prelime report	Date: Person Contacted:	The U/C / Chassis frame / Body Structure affect	ed due to collision.
Ino   18   James informed owner claim TP instead of 00		•	-
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ump Sum / I.B.I: (\$ - )	24	: Interview (\$ ) Photos	
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TOTAL 21/7	Lump Sum / I.B.I: (\$ -	: Weekend (\$	
· ·		TOTAL	210

## **Print Received Message**

This mail is associated with:

\*SLW7944S (5296679684SG)

OD Sep 25 2018 4:40PM [NG AIK GIAN] Premium Automobiles Pte Ltd

From

AIG Asia Pacific Insurance Pte. Ltd. (AIG\_SG), sent on 10/10/2018 11:18 AM.

То

LKK\_HQ

Subject

SLW7944S / OD / 25/09/2018 / Coverage & Excess update

Dear LKK Auto Consultants Pte Ltd

Please note that policy is in force and excess amount is \$0.00

Thank you

Loo, Tong Shing

### Janice Lee (LKKAuto)

From:

Claims <claims@premiumauto.com.sg>

Sent:

Friday, October 12, 2018 4:15 PM

To:

Janice Lee (LKKAuto); SUR

Cc:

'Claims'

Subject:

RE: SLW 7944 S MARKED ESTIMATE

Attachments:

SLW7944S GIA REPORTS.PDF

Dear Janice,

Our clients had convert from OD to TP claim already.

Please refer to the above reports.

Thanks.

Best Regards,

James Tan

Claims Advisor

### Premium Automobiles Pte Ltd (Reg No 199902271W)

55 Ubi Road I Road Singapore 408699

p. +65 6388 2323 d. +65 6768 9828 f. +65 6841 1183

e. claims@premiumauto.com.sg w. www.audi.com.sg



http://www.audi.com.sg/sea/brand/sg/audi promotions/promotions/car promotions/new-audi-q2-2017.html

This email, including any attachment, is confidential and may also be privileged.

If you have received it in error, please notify us immediately by reply email and then delete this message from your system.

Please do not copy it or use it for any purpose, or disclose its contents or any attachment to any other person. Thank you

From: Janice Lee (LKKAuto) [mailto:JaniceLee@lkkauto.com]

Sent: Tuesday, 9 October 2018 3:05 PM

To: Claims; SUR

Subject: RE: SLW 7944 S MARKED ESTIMATE

Dear James,

As per request.

Thank you.

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy 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. 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	26/09/2018 09:36
Date Of Accident	25/09/2018 16:40
Exact Location Of Accident	TOWARDS NEWTON CIRCLE
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLW7944S
Insured/Policyholder	
Name Of Registered Owner	NG AIK GIAN
NRIC No	S7703408J
Email Address	PRINZE_22@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97668625
Alternative Phone No	OTHERS-97668625
Vehicle Particulars	
Manufacturer	AUDI
Model	A4 SEDAN 2.0 TFSI 8W
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	1800019009
Cover Note Number	
Driver	
Name of Driver	NG AIK GIAN
NDIO N	C7702400 I

 Name of Driver
 NG AIK GIA

 NRIC No
 \$7703408J

 Date Of Birth
 02/02/1977

 Occupation
 INDOOR

 Date Of Driving Pass
 06/04/1999

Driving Experience 19 YEARS AND 5 MONTHS

Gender MAL

Mobile Number (LOCAL) +65-97668625

Fax Number

Contact Number OTHERS-97668625

### 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.
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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.

ACC	DE	NT ST	ATEN	IENT

Date Of Report 26/09/2018 09:36

Date Of Accident 25/09/2018 16:40

Exact Location Of Accident TOWARDS NEWTON CIRCLE

Country/State of Loss SINGAPORE

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SLW7944S

Insured/Policyholder

Name Of Registered Owner NG AIK GIAN NRIC No S7703408J

Email Address PRINZE\_22@HOTMAIL.COM
Mobile Phone No (LOCAL) +65-97668625

Alternative Phone No OTHERS-97668625

**Vehicle Particulars** 

Manufacturer AUDI

Model A4 SEDAN 2.0 TFSI 8W

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?

**YES** 

If No, Please state action to be taken

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 1800019009

Cover Note Number

Driver

 Name of Driver
 NG AIK GIAN

 NRIC No
 \$7703408J

 Date Of Birth
 02/02/1977

 Occupation
 INDOOR

 Date Of Driving Pass
 06/04/1999

Driving Experience 19 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97668625

Fax Number

Contact Number OTHERS-97668625

EMail Address PRINZE 22@HOTMAIL.COM

Address

**BLK 272A SENGKANG CENTRAL** 

#03-315

Postcode

541272

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OWNER

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?

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NO 2

Passenger 1

NAME:

: CHIN MAY YEE

GENDER:

: FEMALE

**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

ON 25/09/2018, AT AROUND 1641 HR, I WAS DRIVING ALONG BUKIT TIMAH ROAND AND GOING TOWARDS SCOTTS ROAD VIA NEWTON CIRCUS. I STOPPED TO CHECK FOR CAR CLEARANCE BEFORE GOING INTO THE NEWTON CIRCUS ROUNDABOUT. AS I WAS ABOUT TO DRIVE INTO THE ROUNDABOUT, MY CAR WAS KNOCKED ON THE BACK BY A NISSAN PULSAR (VEHICLE NO: SLM5914U), DRIVEN BY MS KIM MI KYOUNG. THE IMPACT WAS FELT BY BOTH MY WIFE AND MYSELF, AND I IMMEDIATELY CAME OFF MY VEHICLE TO CHECK THE DAMAGE. MS KIM APOLOGISED TO ME AND ASKED IF THE PASSENGER WAS ALRIGHT. SINCE THERE WAS NO INJURY SUSTAINED BY THE DRIVERS AND PASSENGER, WE EXCHANGED PARTICULARS AND LEFT THE SCENE.

### Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SLM5914U

Vehicle Make/Model/Colour

NISSAN PULSAR

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

KIM MI KYOUNG

NRIC/Passport Number

Contact Number

Address

Page 2 of 13

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

MSIG INSURANCE (SINGAPORE) PTE. LTD.

### **Accident Photo**



### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
  - 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:
  - 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:

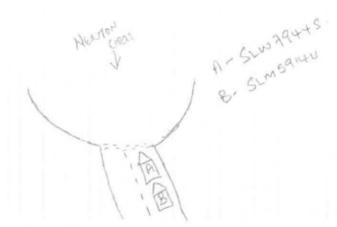
Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: James TAN NRIC/FIN No.: 9820060. SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 25th September 2018, at around 1641 hr, In was
driving along Bykit Timah Road and going towards
driving along Bukit Timah Road and going towards Scotts Road via Newton Circus, I stopped to check
for car clearance before going into the Newton Circus
round about. As I was about to drive into the
roundabout, my car was knocked on the back
by a Nissan Pulsar (Vehicle No.: SLM 59144)
driven by Ms Kim Mi Kyoung. The impact was
felt by both my wife and myself, and I
felt by both my wife and myself, and I immediately came off my vehicle to check the
old mage.
Ms Kim apologised to me and asked if the possenger
was alright. Since there was to injury sustained
by the drivers and passenger, we exchanged particulars and left the scene.
particulars and left the scene.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name: JAMES TAN

NAMES TAM NRIC/FIN No.: C8820,260

### **Addendum Sheet**



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quary #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Departing Hours: Monday to Friday, 09-00 – 17:80
UEN: \$66550200 / 657 Reg. No.: M400917735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

#### ADDENDLIM

) P				
, ,,	ARTICULARS OF PE	RSON MAKING THE AMEND	OMENTS:	
0	riginal Report No	MPA118124696	Vehicle Registration No:	SLW 7944 S
N	ame(as shown in NRIC)	NG AIK GIAN	NRIC/FIN/PassportNo :	S7703408J
		hicle Owner) (*) Please dele		
А	ddress	BLK 272A, SENGKANG	CENTRAL, #03-315	Singapore(54127
С	ontact (Tel)		Mobile No.:97668625	
E	mail Address	PRINZE_22@HOTMA	IL.COM	
D	ate of Accident	25/09/2018	Time of Accident :1640	HRS
P	lace of Accident	TOWARDS NEWTON		
lr	nsurance Company	AIG ASIA PACIFIC INS	URANCE PTE LTD	
_				
2				
-				
-				
-				
-				
	No			D. A decomposition

Date: 4/10/2018



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffies Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: \$665500306 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

Original R	eport No : MPA118124696	Vehicle Registration No: SLW 7944 S
	NG AIK GIAN	NRIC/FIN/Passport No : S7703408J
	Driver / Vehicle Owner) (*) Please del	
Address	BLK 272A, SENGKANO	CENTRAL, #03-315 Singapore(541272
Contact (	Tel) :	Mobile No.:97668625
Email Add	dress : PRINZE_22@HOTMA	IL.COM
Date of A	ccident : 25/09/2018	Time of Accident : 1640HRS
Place of A	TOWARDS NEWTON	
	Company: AIG ASIA PACIFIC INS	URANCE PTE LTD
I have ma make the	NALINFORMATION / AMENDMENTS  ide a report on the above mentioned a following amendments:  RT FROM THIRD PARTY TO OWN	ccident and would like to include additional information or
I have ma make the	de a report on the above mentioned a following amendments:	ccident and would like to include additional information or
I have ma make the	de a report on the above mentioned a following amendments:	ccident and would like to include additional information or
I have ma make the	de a report on the above mentioned a following amendments:	ccident and would like to include additional information or
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I have ma make the	de a report on the above mentioned a following amendments:	ccident and would like to include additional information or
I have ma make the	de a report on the above mentioned a following amendments:	ccident and would like to include additional information or
I have ma make the	de a report on the above mentioned a following amendments:	ccident and would like to include additional information or

Policyholder / Driver's Signature
Date: 04/10/18

Reporting Centre Personnel's Signature

Name: JAMES TAN NRIC/FINNo.: \$8820126D

Date: 4/10/2018

### **Addendum Sheet**



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18:00 Singapore 048580

Ini (65) 6224 0010 Fax (65) 6224 0030

Operating Hours: Monday to Friday, 09:00 – 17:00

UEN: \$64550000 / GST Reg. No.: M40001771S

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

	ADDE	NDUM
PARTICULARS OF P	ERSON MAKING THE AMENDM	IENTS:
Original Report No	MPA118124696-01	Vehicle Registration No: SLW7944S
Name(as shownin NRIC		NRIC/FIN/Passport No : S7703408J
	ehicle Owner) (*) Please delete	
Address	BLK 272A SENGKANG CI	ENTRAL, #03-315Singapore( 541272
Contact (Tel)	;	Mobile No.: 97668625
Email Address	PRINZE_22@HOTMAIL.C	ЮМ
Date of Accident	25/09/2018	Time of Accident : 16:40
Place of Accident	TOWARDS NEWTON C	IRCLE
Insurance Company	AIG ASIA PACIFIC INSUR	VANCE PTE. LTD.
May	;=	(As a second sec
Policyholder / Drive	r's Signature	Reporting Centre Personnel's Signature

Date:

NRIC/FINNo .: Date: 11/10/2018



## AUDI AUTO PROTECTOR PRIVATE VEHICLE

Policy No.

Address

: 1800019009

Period of Insurance

: 01 Mar 2018 to 28 Feb 2019

Issued Date

: 02 Mar 2018

### ABOUT THE POLICYHOLDER

Name of Policyholder

: NG AIK GIAN (HUANG YIYAN) : 272A SENGKANG CENTRAL

03-315 ATRINA

SINGAPORE 541272

Occupation/Nature of Business: Manager/Director/Management

### **ABOUT THE VEHICLE**

Registration No. : SLW7944S

: WAUZZZF4XJA069086

First Year of Registration : 2018

Engine No.

Engine Capacity/Tonnage: 1,984.00 CC CVK049776

Chassis No. Seating Capacity: 5

Body Type

: Sedan

Make/Model

: AUDI A4 Sedan 2.0 TFSI S tronic

: MayBank Hire Purchase Company/Employer's Loan

### ABOUT THE COVER

Sum Insured

: Market Value

Off Peak Car

: No

Driver Restriction

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive :

a) The Policyholder

a) The Foliagnoser b) Any other person who is driving on the Policyholder's order or with his/her permission. This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition

: All Age Condition

Limitation as to use

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Other Key Policy Benefits:

Act of God, Strike, Riots and Civil Commotions, PA to Authorised Driver / Unnamed Passengers- \$10000, Dealer + AIG Authorised Workshops, PA insured- \$100000, Fixture and Accessories (Cosmetic)- \$5000, Solar Film- \$1150, New For Old (36 months), Loss of Use 1800cc - 2000cc Optional, In-Car Camera Excess Waiver, Glass Roof/ Moon Roof/ Sun Roof/ Panaromic Glass Roof, NCD Protector

EXCESS	PREMIUM
Section 1 Fire - \$0 Own Damage - \$1600 Theft - \$0 Flood Cover - \$0	Premium : \$ 1,597.18 GST (7%) : \$ 111.80
Section 2 Property Damage - \$0 Windscreen : \$100	Total : \$ 1,708.98 Your Premium includes the following discount(s):
Named Driver NG AIK GIAN (HUANG YIYAN) - \$1600 (Own Damage)	Safe Driver Discount - 5.00%, No Claim Discount - 50%

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2

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7703408J



NG AIK GIAN (HUANG YIYAN)

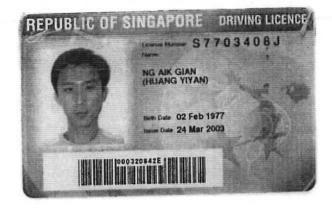
黄 奕 言

CHINESE

Date of birth Sex 02-02-1977 M

Country of birth SINGAPORE

877034083



4017161

He S7703408J

16-03-2007

APT BLK 272A SENGKANG CENTRAL #03-315 SINGAPORE 541272

NRIC No: \$7703408J

Date: 13/07/2008

No: 6034116

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

NP 428A

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

Email: Nora.khai@premiumauto.com.sg / claims@premiumauto.com.sg

### Telefax

Estimate : Accident Repairs
Workshop : Ubi Road 1

 Workshop
 : Ubi Road 1

 Contact No
 : 6366 2323

 Fax No
 : 6841 1183

Reference : PA/TP/1124/2018/GW

Date : 26-Sep-18

Vehicle NOT IN workshop. Kindly arrange for survey.

Your Insured Veh No: SLM 5914 U

## MSIG Insurance (Singapore) Pte Ltd

No 4 Shenton Way #23-01 SGX Centre 2 Singapore 068896

Telephone

Attn: Motor Claims Dept

Tel: 6827 2762 - Fax: 6225 7402

Owner's Name : Mr. Ng Aik Gian

Address : Blk 272A Seng kang Central

#03-315

ALG .

Singapore 541272 : HP +65 97668625

Type of Claim : Third party Claims OWN DAMAGE CLAIMS

Policy No. : 1700029039-01

Vehicle No : SLW 7944 S

Model Code : Audi A4 Sedan 2.0 TFSI
Model / Year : Mar-18

Model / Year : Mar-18
Engine No : CVK 049776

Chassis No : WAUZZZF4XJA069086

Mileage : Date In :

Liability :

Excess Cost : Estimated By : Johnny Boo / Allan Wu

Accident Date : 25-Sep-18

Place of Accident : Towards Newton Circle

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

## Telefax

## Estimated Labour Charges for Accident Vehicle SLW 7944 S .

S/n	Nature of Jobs		Estimated Charges
1	To remove and transfer rear parking aid and rear lid kick sensor assy. Check function.	S/N	\$ 360.00
2	To dismantle and renew rear bumper. Reorganise rear crash managements components. Reinstall all parts removed.		\$ 909.00 500
3	To respray rear bumper		\$ 800.00 550
4	To carry out diagnostic check.	S/N	\$ 192.00
	TOTAL LABOUR CHARGES	:	\$ 2,252.00

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

### Telefax

## Material List for Accident Vehicle Regn No. SLW 7944 S

					k Prices
S/N	Parts Description			S/Nett	Remark
1	REAR BUMPER Require		\$	1,907.00	
2	REAR BUMPER FIXING PARTS		\$	63.00 🛧	
3	REAR BUMPER SECURING PLATE	4	\$	56.00 8	
4	REAR BUMPER SEALING PLATE	4	\$	9.00 *	
5	REAR BUMPER SECURING STRIP		\$	191.00 🖰	
6	REAR BUMPER SPOILER		\$	216.00 ?	
7	REAR LIGHT REFELCTOR-LH/RH 7	2	\$	70.00	
8	REAR BUMPER CARRIER		\$	786.00	
9	REAR BUMPER SEAL NEC	2	\$	24.00⊀	
10	REAR BUMPER GUIDE SECTION-LH/RH 2	2	\$	75.00 +	
11	REAR BUMPER UPPER GUDIE SECTION-LH/RH	2	\$	38.00 🚜	
12	RETAINER FOR AERIAL-LH		\$	22.00 +	
13	REAR SENSOR	2	\$	421.00 🗡	
14	REAR SENSOR SEAL RING	4	\$	14.00 🐰	
15	SUNDIES AND ?		\$	300.00	
	TOTAL SPARE PARTS	:	\$	4,192.00	
	TOTAL LABOUR CHARGES	:	\$	2,252.00	
	GRAND TOTAL	:	\$	6,444.00	
	entite (e)na	٠.	<u>.</u>	-,,,,,,,	

All charges are not inclusive of GST.

Legend : Remarks (OK) = Approved, Remarks (X) = Not approved Spare parts are Special Nett.

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

### Telefax

Name

Surveyed Date

**Authorised Date** 

Excess Cost

Liability Remarks

· Authorsed Repris, 03 Dups.

Please Note

: This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges and spare parts in the progress of repair, we shall inform you accordingly. For inspection of vehicle, please refer to Ms Norah Khai at Tel:6768 9828 for appointment.

Yours faithfully, Premium Automobiles Pte Ltd LKK Auto Consultants hence notify

the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- · Parts prices are subject to confirmation
- . Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Johnny Boo Body Repair Manager

Allan Wu Claims Consultant

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

	OLDER TRA									
Case 1	Votified	Est Submitted	Adj Assigned	Adj Rpt	Adj	Submitted				
Main	01 Oct 2018		09 Oct 2018 13:19 Edit Adj Rpt	S\$1,602.00 Edit Estimate	1	,602.00 ew Rpt		Pending for Survey Report Cancel Case		
M	lain	R	eference	Claim	Details		Documents		Show All	
CLAIM SUB	FOLDER DE	TAILS	Sec. Herita sales Close of			[Created	by insurer]			
Insured:	NG AIK G	IAN, ID: S7703	108J, Tel: +65976	68625, Email: I	PRINZE_2	2@HOTMAII	L.COM			
Vehicle Reg. No.:	SLW794	14S		Date	of Loss:		8 16:00 - :59 and <b>24</b> Days From LT	A Reg Date (N	1an Yr)]	
Claim Type:	Type: <b>OD</b> / 5296679684SG Policy/Cover Note No.: 1800019009 (Comprehensive)									
				Exce	ss:	S\$0.00				
Repairer:	Premium	<b>Automobiles Pte</b>	Ltd (UBI) 55 Ubi	Road 1, 408699	Jbi - Tel:	67689828/9	827/9911			
Handling Insurer:	AIG Asia	Pacific Insuranc	e Pte. Ltd. (SG) -	Tel: 65-6419-300	0 [Hai	ndled by <b>Loc</b>	o, Tong Shing] Tongs	Shing.Loo@aig	ı.com	
Adjuster:	LKK Auto	<b>Consultants Pte</b>	Ltd (HQ) - Tel: 62	56-3561 [Han	dled by A	DRIAN LIN	<b>G</b> ] [Final Rpt d	ue 18/10/2	018]	
Driver/Custo dian:	NG AIK GI	AN (41 / Male),	NRIC: S7703408J,	Tel: +6597668	525					
ASSOCIATI	ED MAIL RE	CEIVED					View A	Compos	e Case Mail	
<ul><li>AIG_SG (</li></ul>	10/10/2018)	: SLW7944S / O	D / 25/09/2018 /	Coverage & Ex	cess up	date				
ALL ASSO	CIATED TAS	sks⊡			,	View All	Search Tasks Creat	e New Task	Complete	
Due Date	Priority	Type Task	Group Subject	t Handler	Assign	ned By	Completed On	Created On	Done	
		35.02			_		75			

### **Claim Documents**

\*SLW7944S (5296679684SG) OD
Sep 25 2018 4:40PM
[NG AIK GIAN]
Premium Automobiles Pte Ltd

Up	load Documents Up	oload Photos Compose New Letter Upload Video Upload Audio	View V	iew in Brows	er 🗸
Vid	eo		1 per pag	ge 🔻	<b>V</b>
No	Finalized On	Premium Automobiles Pte Ltd (UBI)	T	'humbnail	Print
1	26/09/18 09:52	Video - Accident [Linked Accident Report Documents]	0	Load MP4	
2	26/09/18 09:52	Video - Accident [Linked Accident Report Documents]	0	Load MP4	
Pho	otos/Images		3 per pag	ge 🔻	<b>✓</b>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Т	humbnail	Print
1	09/10/18 15:10	General View	0	Load JPG	<b>✓</b>
2	09/10/18 15:10	General View	0	Load JPG	<b>✓</b>
3	09/10/18 15:10	General View	0	Load JPG	<b>✓</b>
4	09/10/18 15:10	General View	0	Load JPG	✓
5	09/10/18 15:10	General View	0	Load JPG	~
6	09/10/18 15:10	General View	0	Load JPG	<b>✓</b>
7	09/10/18 15:10	General View	0	Load JPG	~
8	09/10/18 15:10	General View	0	Load JPG	✓
Doc	umentation		1 per pag	ge 🔻	<b>4</b>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Т	humbnail	Print
1	09/10/18 15:05	SLW 7944S NRIC & DL	0	Load PDF	
2	09/10/18 15:05	Certificate of Insurance	-	Load PDF	
3	09/10/18 15:05	SLW 7944S EST	0	Load PDF	
4	09/10/18 15:05	Singapore Accident Statement		Load PDF	
5	15/10/18 10:59	SLW7944S ADDENDUM GIA	0	Load PDF	

## **Linked Accident Report Documents**

			View V	iew in Brows	er 🗸
Vid	90		1 per pag	e 🗸	<b>✓</b>
No	Finalized On	Premium Automobiles Pte Ltd (UBI)	Т	humbnail	Print
1	26/09/18 09:52	Video - Accident	0	Load MP4	
2	26/09/18 09:52	Video - Accident	O	Load MP4	
Ass	essment Reports		1 per pag	e 🔻	<b>✓</b>
No	Finalized On	Premium Automobiles Pte Ltd (UBI)	Т	humbnail	Print
1	26/09/18 09:59	Accident Statement	0	Load HTM	
2	04/10/18 11:36	Addendum Sheet	0	Load JPG	<b>✓</b>
3	04/10/18 11:36	Accident Statement Addm. #1	0	oad HTM	
4	12/10/18 15:50	Addendum Sheet	0	Load JPG	~
5	12/10/18 15:50	Accident Statement Addm. #2	0	oad HTM	
Pho	tos/Images		3 per pag	e 🔻	V
No	Finalized On	Premium Automobiles Pte Ltd (UBI)	Т	humbnail	Print
1	26/09/18 09:55	Accident Photo	0	Load JPG	<b>V</b>

Merimen e-Claims

Vid	eo		1 per page		
No	Finalized On	Premium Automobiles Pte Ltd (UBI)		Thumbnail	Print
2	26/09/18 09:55	Accident Photo	0	Load JPG	<b>✓</b>
3	26/09/18 09:55	Accident Photo	Ð	Load JPG	<b>V</b>
4	26/09/18 09:55	Accident Photo	0	Load JPG	<b>V</b>
5	26/09/18 09:55	Accident Photo	O	Load JPG	<b>✓</b>
6	26/09/18 09:55	Accident Photo	0	Load JPG	<b>√</b>
7	26/09/18 09:55	Accident Photo	0	Load JPG	<b>✓</b>
Doc	umentation		1 per p	page 🔻	<b>V</b>
No	Finalized On	Premium Automobiles Pte Ltd (UBI)		Thumbnail	Print
1	26/09/18 09:48	Sketch Plan	0	Load JPG	<b>✓</b>
2	26/09/18 09:48	Sketch Plan #2	0	Load JPG	~

## **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, Pava Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

### VEHICLE DAMAGE INSPECTION REPORT

AIG Asia Pacific Insurance Pte. Ltd. AIG Building, 78 Shenton Way #07-16

Our File No:

CC3/AIG18018232/ARBE2

Singapore 079120

Date:

02/11/2018

REFERENCE

Date of Loss:

Insured/Claimant:

NG AIK GIAN 25/09/2018

Policy No:

Nature of Claim:

1800019009

OD

Claim No:

5296679684SG

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

**SLW7944S** 

Make & Model:

AUDI A4, 2.0 (A)

Engine No:

CVK049776

Reg. Date:

01/03/2018 (Man. Year: 2017)

Chassis No:

WAUZZZF4XJA069086

Colour:

Odometer:

15582 km

**Engine Capacity:** Market Value/New Car Price: S\$150,000.00

1984 cc

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Footbrake (Serviceable): Yes

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Yes Engine Modification:

Pre-accident Condition: No

Front Tyre Size: Front Left Side:

225/50 R17

Rear Tyre Size:

225/50 R17

Front Right Side:

Pirelli 6 mm

Rear Left Side: Rear Right Side: Pirelli 6 mm Pirelli 6 mm

Pirelli 6 mm The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,192.00	0.00	4,192.00	100.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,252.00	1,602.00	650.00	28.86
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	6,444.00	1,602.00	4,842.00	75.14
+ GST 7.00/7.00% (S\$)	451.08	112.14	338.94	75.14
Nett Amount (S\$)	6,895.08	1,714.14	5,180.94	75.14

INSPECTION

Date of Assignment:

09/10/2018

Date Inspected:

08/10/2018 Inspected At:

Premium Automobiles Pte Ltd (UBI)

55 Ubi Road 1

Singapore 408699

Estimated Period of Repair:

3.0 days

**ADRIAN LING** Adjuster:

Manager:

Janice Lee Si Hua

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.

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen\_... 2/11/2018

(REPAIR COST NOT CONCLUDE) (EXCLUDE CHECK ITEMS \$\$516.00 NETT)

## **REPAIR DETAILS**

## Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Repair	1,907.00 FS	*-FS
2	1		*REAR BUMPER FIXING PARTS	Not Necessary	63.00 FS	*- FS
3	4		*REAR BUMPER SECURING PLATE	Not Necessary	56.00 FS	*- FS
4	4		*REAR BUMPER SEALING PLATE	Not Necessary	9.00 FS	*- FS
5	1		*REAR BUMPER SECURING STRIP	Not Necessary	191.00 FS	*- FS
6	1		*REAR BUMPER SPOILER	* Check	216.00 FS	*- FS
7	2		*REAR LIGHT REFLECTOR - LH/RH	Not Necessary	70.00 FS	*- FS
8	1		*REAR BUMPER CARRIER	Not Necessary	786.00 FS	*- FS
9	2		*REAR BUMPER SEAL	Not Necessary	24.00 FS	*- FS
10	2		*REAR BUMPER GUIDE SECTION - LH/RH	Not Necessary	75.00 FS	*- FS
11	2		*REAR BUMPER UPPER GUIDE SECTION - LH/RH	Not Necessary	38.00 FS	*- FS
12	1		*RETAINER FOR AERIAL - LH	Not Necessary	22.00 FS	*- FS
13	2		*REAR SENSOR	Not Necessary	421.00 FS	*- FS
14	4		*REAR SENSOR SEAL RING	Not Necessary	14.00 FS	*- FS
15	1		*SUNDRIES	* Check	300.00 FS	*- FS
F=Fra	anchise	part. S=Spc	Nett.			
				Total Parts (S\$)	4,192.00	0.00

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
Labo	our Items			
1	TO REMOVE AND TRANSFER REAR PARKING AID AND REAR LID KICK SENSOR ASSY. CHECK FUNCTION	New	360.00	360.00
2	TO DISMANTLE AND RENEW REAR BUMPER. REORGANISE REAR CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED	New	900.00	500.00
3	TO RESPRAY REAR BUMPER	New	800.00	550.00
4	TO CARRY OUT DIAGNOSTIC CHECK	New	192.00	192.00
	Gross Labour	r Cost (S\$)	2,252.00	1,602.00
	Report was unsubmitted during	this print-out		

< END OF ESTIMATES >