REF: (8 /	ALL 1802 U710/RL VOEZ	Special Instruction:
2 1	4S. \$ 9850.00	
mated Cost: Bunnix Tan of Ath Bill to:	Third Parties:	
mated Cost: Bill to: _		Claimant:
DD/(P Re-inspection) / Evaluation		Surveyor: Absolute Appraisa
To Inspect Vehicle No: SDN 8688 9	Insured: 867 4126	Workshop: Lian Heng
at Workshop m/s Lian Heng Printer	Insured: SC() 4(1)	
160 Sin Aling Dim #0	6-ID -	
Policy No:	Claim No: 010115569	25/2-003
Sum Insured:		
Make of Veh:	D.O.A. 13.08.2018	
Client's Record)		
	8 (Wednesday) @ before	H.O.D. Engorsement/Date:
Date/Time: Person Contacted	d: Vehicle IN / C	OUT
Date/Time: Confirm	Tomole IIV/	701
Date/Time: Confirmed with	Final Fig,days	(Red \$/_%; Original_12 day
Date/Fime: 26 12 18 Submit Final Fig LS	\$7400 , R days (Red \$245	/ J5 %; Original days)
Date/Time Action/Instruction		
	32716 (Mc Qalinh - 9755 2	200)
Singapore	638719 (Ms Belinda - 9755 3	00/8/
SDN 8688S - X		
NTF HILL - X		
9tf 406E - X		
3(T 41)6E - X	-	
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From Date:	Veh No: SON 8688S Yr Regn: 2015 July
Estimated Cost:	Type M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Audi A3 SB 1.4 TPSI A 0.0 1395
at Workshop m/s	Colour BLACK A/C Insured / Std / NI / NA
of	Sp.Reading 59918 T/Radio: Insured / Std / NI / NA
Insured	Eng/No:
Policy No.	C/No: WAU ZZZSVOFA 173278
Claims No.	Gen. Cond: Good// Fair / Poor / Burnt
Sum Insured: Excess:	Steering: norder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: norter / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / SRM / STD A/Rim or
	Tyre Size: F: 205/55 RIG
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO OF COMPENSE
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 4 mm R/Bal. 4 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 12/08/18 D.O.I. 21/11/18
Lum Sum: % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	The Ord / Chassis haire / Body Structure and ded to some orth
	20/12/2018
Date/Time File Pass to? : Preli. Report	Days Of Repair:
1) : Final Report Date/Time File Return to?	Resurvey No. of Trip: Survey Fee. Transportation
2) Add Fe	
	Interview (\$) Photos
Report Format :	Tech Invs (\$) Others
Lump Sum / I.B.I: (\$	Weekend (\$
	TOTAL

Catherine Chong (LKK Auto)

From: Hs

Hsiao Tong (LKKAuto) <chewht@lkkauto.com>

Sent: Tuesday, 13 November, 2018 10:45 AM

To: Tan, Bennie-WZ; Igene Lim
Cc: CS A Team; assignments; SUR

Subject: RE: Our Ref: 0101155692SG-003 || Your Ref: MN.IG.L1.1812587.st

Hi Bennie,

Thank you for your email.

By copy to Assign Team,

FYNA. TP RI

Best Regards,

Hsiao Tong, Chew | Case Handler LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Tan, Bennie-WZ <Bennie-WZ.Tan@aig.com>

Sent: Monday, 12 November 2018 6:24 PM To: Igene Lim <igene.lim@mneduco.com.sg>

Cc: Hsiao Tong (LKKAuto) <chewht@lkkauto.com>; CS A Team <cs-a@lkkauto.com>

Subject: RE: Our Ref: 0101155692SG-003 | | Your Ref: MN.IG.L1.1812587.st

Your Ref: MN.IG.L1.1812587.st Our Ref: 0101155692SG-003

WITHOUT PREJUDICE

Hi Igene

We refer to the above matter.

In view of the high cost of repair to your client's vehicle, we wish to conduct a physical re-inspection on said vehicle (ie <u>SDN8688S</u>). Kindly liaise with our appointed surveyor, LKK. Please let us know the date, time and location at least 05 working days in advance.

In the meantime, kindly forward us the following documents for our consideration:-

- 1. Coloured Accident Scene Photos
- 2. Video Footage
- 3. Any Other Supporting Documents

Should you have any further enquiry, please do not hesitate to contact the undersigned.

Best Regards

Bennie Tan

AIG

Senior Complex Claims Examiner 78 Shenton Way #08-16 Singapore 079120 Tel +(65) 6419 1718 | Fax +(65) 6835 7416

Bennie-WZ.Tan@aig.com | www.aig.com.sg

From: Tan, Bennie-WZ

Sent: Sunday, September 09, 2018 9:27 PM

To: 'Igene Lim'

Subject: Our Ref: 0101155692SG-003 || Your Ref: MN.IG.L1.1812587.st

Your Ref: MN.IG.L1.1812587.st Our Ref: 0101155692SG-003

WITHOUT PREJUDICE

Dear Sir / Mdm

We refer to the above matter.

We acknowledge receipt of your claim notification (SDN8688S) against our Insured for the above auto accident.

Kindly be advised that I am the officer-in-charge handling the above matter. Please quote our above Ref no in any of our future correspondence(s).

Please forward us the following documents for our consideration:-

- 1. Quantification to Claim
- 2. Final Repair Bill
- 3. Full Survey Report & Photos
- 4. Coloured Accident Scene Photos
- 5. Video Footage
- 6. Police Investigation Results
- 7. Any Other Supporting Documents

We hereby reserve our rights to re-inspect your client's vehicle After Repair

'Should you have any further enquiry, please do not hesitate to contact the undersigned.

Best Regards

Bennie Tan AIG Senior Complex Claims Examiner 78 Shenton Way #08-16 Singapore 079120 Tel +(65) 6419 1718 | Fax +(65) 6835 7416

Bennie-WZ.Tan@aig.com | www.aig.com.sg

This email should not construed as an admission of liability on the part of whomsoever is concerned. IMPORTANT NOTICE:

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by American International Group, Inc. or its subsidiaries or affiliates either jointly or severally, for any loss or damage arising in any way from its use.

Catherine Chong (LKK Auto)

From:

Igene Lim <igene.lim@mneduco.com.sg>

Sent:

Thursday, 15 November, 2018 3:31 PM

To: Cc: Hsiao Tong (LKKAuto); assignments Tan, Bennie-WZ (Bennie-WZ.Tan@aig.com); SUR

Subject:

RE: Our Ref: 0101155692SG-003 || Your Ref: MN.IG.L1.1812587.st

WITHOUT PREJUDICE

Our Ref: MN.IG.L1.1812587

Hi Hsiao Tong,

As requested, we have made an arrangement for our client's vehicle **SDN 8688S** to be available for re-inspection on:

Date

•

21 November 2018 (Wednesday)

Time

:

10.30 a.m.

Venue

:

28 Tuas Crescent, Singapore 638719

Contact

:

Ms Belinda @ 9755-3398

Please let us have your written confirmation on the above arrangement soon.

Kindly also ensure that your surveyor attends to the above without fail.

With thanks & regards,

Igene

M NEDUMARAN & CO

Advocates & Solicitors
Commissioner for Oaths

Branch Office:

No. 11 Sin Ming Road

#B2-09 (Unit 2), Thomson V Two

Singapore 575629

Tel: 6509-8480 / 6509-8481

Fax: 6509-8482

Email: igene.lim@mneduco.com.sg

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Alternative Phone No.

- 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 withit misrepres reputate policy ability.
- 4. The base and acceptance of this Form by traumance 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.

 5. 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 else, be made available upon application by interested parties.

 7. By the longement of this report to the insurers, you hereby consent to the prohiving of this report at the centre and to copies of the report being made available aforesaid.

	ACCIDENT STATEMENT
Date Of Report	13/08/2018 09:32
Date Of Accident	12/08/2018 13:45
Exact Location Of Accident	SLIP ROAD AT ANG MO KIO AVENUE 1 TO EXIT CTE/ SLE
Country/State of Loss	SINGAPORE

Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	3DN8688S	
Insured/Policyholder	the state of the s	
Name Of Registered Owner	KOH MUI HOON BELINDA	
NRIC No	S0128701Z	
Email Address	KOH.BELINDA@YAHOO.COM.SG	
Mobile Phone No	(LOCAL) +65-97553398	

OTHERS-97553398

Vehicle Particulars		200	100
Manufacturer			AUDI
Model			A3

Exact Purpose for which vehicle was being used at	PRIVATE USE
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Vehicle Category			P	RIVAT	E CAR	
tion in the second				1.0	1,75	
Insurance Company	100	 7/4	585		247.45	1.5

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100422668-03

Policy Number	2100422668-03
Cover Note Number	

Driver	1 12 13
Name of Driver	KOH MUI HOON BELINDA
NRIC No	S0128701Z
Date Of Birth	17/02/1949
Occupation	INDOOR
Date Of Driving Pass	12/12/1977
Driving Experience	40 YEARS AND 8 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-97553398
Fax Number	

Contact Number	OTHERS-97553398		
EMail Address	KOH.BELINDA@YAHOO.COM.SG		

Address

BLK 88 TELOK BLANGAH HEIGHTS

#04-283

Postcode

100068

OWNER

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

Vahicle 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?

YES

Was any other material or property damaged?

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

NO

Number of Passengers (Including Driver)

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

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

YES

Are accident photos available for attachment?

NO

Was there any video captured by Car Camera? Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SGF4126E

Vehicle Make/Model/Colour

MAZDA

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

BUI HUNG DAO

NRIC/Passport Number

S8174906Z

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 Oriver.
- Information provided must be as truthful and accurate an possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The lesse and acceptance of this Form by insurance componies is not an admission of policy liability on the part of the insurance componies.
- 5. Any false reporting may be referred to the Police for Investigation.
- 5. The report will be forwarded by the insurers of the GIA Records Management Cantre established by the General Insurence 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 Art (POPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapora ("GIA") may/are permitted to collect, use, elisciose 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 that insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the insurers' insyrenziaw firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary invostigations relating to the claims;
 - (II) Investigating the accident and/or my daims;
 - (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, involves, 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 end/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 dalms 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
 - till for complying with requirements under any regulations, laws or court orders.

B. Flee

Policyholder's Signatura

Cute & Time: 13 AUS 2018

Oriver's Signature (If driver is not the policyholder) Dure & Time: Reporting Centre Personnel's Signature

HANC/FIN No.: Poh Kwee Choo S8840683A

09:321

GANGE SAUGPLINGUM, YZ

Sketch Plan Pg. 2 DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Date; 12 08 2018 DECLARATION I/We declare the foregoing particulars are true in every respect. Oriver's Signature (If driver is not the policyholder) Policyholder's Signature Names NRIC/FIN HIGH KWEO Choo S6840683A Date & Time 13 AUG 2018 Ozte & Time:

GIANA'S NUMBERS SAME LE

Was there any audio recorded?

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 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.
- Any false reporting may be referred to the Police for investigation.
 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

	ACCIDENT STATEMENT
Date Of Report	13/08/2018 13:25
Date Of Accident	12/08/2018 13:50
Exact Location Of Accident	ANG MO KIO AVE 1 SLIP ROAD TO CTE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGF4126E
Insured/Policyholder	
Name Of Registered Owner	BUI HONG DAO
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA CX5
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	2100457345-02
Cover Note Number	
Driver	
Name of Driver	BUI HONG DAO
NRIC No	S8174906Z
Address	13 FERNVALE CLOSE #11-14
General Information of the Accident	
Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Other Information	
Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	5
Circumstances of Accident	
REFER TO STATEMENT & VIDEO FOOTAGE	
Attachment(s)	
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES

NO

Vehicle Registration Number Vehicle Make/Model/Colour Name of Driver Insurance Company Name SDN8688S AUDI A3 KOH MUI HOON BELINDA

ECLARATION No decision the following signature to a support to the support of the	SKETCH PLAN		
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Plant Code	A. C.		
3/1/2018	el tora I rolm		*

Sketch Plan Pg. 2

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
- 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.
- 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:

1368 2018

Driver's Signature

1368/2018

(If driver is not the policyholder)

Redolling Centre Personnel's Signature

HIRIC/FIN No.



CERTIFICATE OF INSURANCE

AUDI AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : KOH MUI HOON BELINDA Period of Insurance : 30 Jul 2018 To 29 Jul 2019 Engine No. : CZC258912

Chassis No.

: WAUZZZ8V0FA173275

Vehicle No.

: SDN8688S

Policy No. Endorsement No.

: 2100422658-03

Issued Date

: 03 Jul 2018

ABOUT THE COVER

Make/Model

AUDI AS SPORTBACK 1.4 TFSI (AMBIENTE)

Engine Capacity/Tonnage 1,395.00 CC Driver Restriction

Sum Insured : Market Value Off Peak Car : No

First Year of Registration 2015

Insuring with COE/PARF : No

Person or Classes of Persons Entitled to Drive*

a) The Princyhilder

2) Any other parson who is strong on the Polaryholder's letter or with higher parsonsists.

This Princy will indemnify the Princyhilder or any authorized driver only if higher mexic the operated age commit

This Princy will indemnify the Princyhilder or any authorized driver only if higher mexic the operate of the principles.

You have to say an approved out of \$1,000 as "Young under preventions Driver Excess" ("YEST) if You as or Your Authorises Driver planned or university a under the age of 28 and/or has seen found years" enough experience.

Age Condition

All Age Condition

Limitation as to use*

the only for access processes and pleasure purposes and for the Participation's business. This Plains shall not review to her an invested driving Latina's consections and processes and

Loss of Live 1900cc - 2000cc Ognored

Limitating temperal majoration by Entire 8 of the Major United (Theo Party Risks and Compensation) Just (Cop. 185) and Section 55 of the Road Trimsport Ad. 1861 (Malaysis), are not to be studyed under these headings.

EXCESS

Windstream 15105

Named Driver and Excess (where applicable)

KOH MU HOOK BELINEA - MISS (Own Clement)

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

1.Aud Customer Service Center, Avr. 55 Uto Rivar 1 Simpayore 409099 83052223

For stree: Approved Reporting Comment(S Authorised Researce, please content our 24-hour eccelent emergency hotine at +15 x356 £200. Alternatively, you may refer to ALG entitles were any cost agree or ALG 50 Makin Alex Simply search and coverlated MIG 507 from Transa or Georgia Ray.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

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0504129201

PREMIUM LEASING - CE.

251 ALEXANDRA ROAD AUCK CUSTOMER SERVICE CENTRE

SINGAPORE 169936

Underwritten by ANS Asia Pucific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

78 Element Way Sol. 15 ASD Electry SETSTED | 1,-05 6+15 ACC | F -63 6+15 5723 | www.alg.com.ag

NG ALA PROFIC BELLEVE PLE LIM



160 Sin Ming Drive #05-16 Sin Ming AutoCity (S) 575722 Mobile: 9688-0415 Fax: 6266-7396 Email: absolute.app.svcs@gmail.com PHOTOCOPY

Invoice

Customer: Koh Mui Hoon Belinda

68 Telok Blangah Heights #04-283

Singapore 100068

Date: 05.09

05.09.2018

Invoice No: NS-2018-343

	Description		Amount
Vehicle No:	SDN8688S		
Make & Model:	Audi A3 SB TFSI (A)		
Our reference:	AAS/2018/343		
Services rendered	d for appraiser / inspection repo	ort	
Survey Fee			
Photographs			
Transport Fees			
Transport rees			
Re-inspection Fees			

Notes:

All cheques payment should be crossed and made payment to "Absolute Appraisal Services Pte Ltd"

Please indicate our "Invoice No." on the reverse side of the cheque.

Please do not hesitate to contact us should you have any enquires.

Absolute Apprace Services Pte Ltd



160 Sin Ming Drive #05-16 Sin Ming AutoCity (S) 575722 Mobile: 9688-0+13 Fax: 6266-7396 Email: absolute.app.svcs@gmail.com

Vehicle Inspection Report

To:

Koh Mui Hoon Belinda

68 Telok Blangah Heights #04-283

Singapore 100068

Date of report:

Date of request:

05.09.2018 13.08.2018

Date of inspection:

13.08.2018

Date of accident:

12.08.2018

Claim type: Third Party Claim

Report No: AAS/2018/343

Particulars of affected vehicle:

SDN8688S

Registration no: Make/Model:

Audi A3 SB TFSI (A)

2015

Odometer:

55674 km

Engine Capacity: Engine no:

1395 cc CZC258912

Year of registration: Colour:

Metallic Black

Chassis no:

WAUZZZ8V0FA173275

Condition of tires:

Front Left:

6mm

Continental Make:

Rear Left: Make:

6mm

Continental

Front Right:

6mm

Make:

Make:

Continental

Continental

Rear Right:

6mm

Type of road wheel:

Alloy

(The above represent the remaining life of the tire thread)

Pre-accident condition (Static tests only)

General Bodywork

: Good

Paintwork

: Good

Handbrake

: In order

Footbrake

: In order : In order

Steering

: Nil

The Assignment

The inspection was conduct at M/s. Lian Heng Painter Company

Apparent engine modification

160 Sin Ming Drive #06-10

Sin Ming AutoCity (S) 575722

(Subsequent inspection was conducted)

Assessment

Repairer's estimate:

\$ 18,199.53

Revised estimate:

\$ 12,306.34

Recommended reserve:

\$ 9,850.00 (Lump sum)

Estimated normal duration of repairs: 12 Working days



160 Sin Ming Drive #05-16 Sin Ming AutoCity (S) 575722 Mobile: 9688-0413 Fax: 6266-7396 Email: absolute.app.svcs@gmail.com

Vehicle No: SDN8688S

Report No: AAS/2018/343

W/O PREJUDICE

Point of impact

At the RHR portion.

General description of damages

The tailgate, tailgate lamp RH, tail lamp RH, tail lamp panel, RH, rear bumper, rear bumper lower, rear panel, RHR fender, etc.

Other parts were also found damaged. (See schedule for details)

Recommendation

The estimate cost of repair submitted by M/s Lian Heng Painter Company as per schedule attached have been revise and scrutinize. We list the breakdown of our findings and recommendation as per attached.

Our adjusted amount for the cost of repair is SGD \$12,306.34

Conclusion

The repairer has agreed to undertake the repair at a lumpsum of SGD \$9,850.00

Under normal circumstances, the repair of the damaged vehicle should be completed within a reasonable period of 12 working days.

We have Not Authorised and/or instruction to the repairer to proceed with the repairs. This inspection was conducted entirely on a 'Without Prejudice' basis.

We are pleased to advise that the inspection was carried out accordingly and hereby submit our appraisal report which includes 58 photographs.

Your Faithfully Absolute Appraisal Services Pte Ltd

Nicky Scale
Automobile Appraiser
MSAAA / MSMCTA



160 Sin Ming Drive #05-16 Sin Ming AutoCity (S) 575722 Mobile: 9688-0413 Fax: 6266-7396

Email: absolute.app.svcs@gmail.com

Veh	icle No: SDN8688S					Rep	ort No: AAS,	/2018/	343
App	praisement Schedule								
S/N	Parts Description	Qty	Condition			Rep	pairer's Est	Rev	rised Est
1	Tailgate	1	Dented/Repair				3,212.70		
2	Tailgate emblem	1	Necessary			5	187.87	\$	187.87
3	Tailgate nameplate 'A3'	1	Necessary			\$	89.77	\$	89.77
4	Tailgate nameplate 'TFSI'	1	Necessary			5	85.61	\$	85.61
5	Tailgate lamp RH	1	Grazed/Cut			5	544.75	5	544.75
6	Tailgate lock	1	Serviceable			\$	211.70		
7	Tailgate weather-strip	1	Serviceable			\$	288.89		
8	Rear bumper	1	Dented/Cut			5	1,445.90	S	1,445.90
9	Rear bumper lower	1	Dented/Cut			\$	369.00	5	369.00
10	Service and the service of the servi	1	Dented			\$. 865.00	5	865.00
11	Rear bumper side mount RH	1	Cracked			\$	58.00	5	58.00
12	Tail lamp RH	1	Cracked			\$	672.25	5	672.25
13	Tail lamp panel RH	1	Dented			\$	253.13	\$	253.13 €
14	Rear panel	1	Dented			\$	769.79	5	769.79 Fgps
15	Rear panel finisher	1	Serviceable			\$	427.30		
16	RHR quarter panel	1	Dented/Distorted			5	2,415.97	5	2,415.97
17	RHR quarter panel glass	1	Necessary			S	672.30	5	672.30
18	RHR splash shield	1	Serviceable			5	322.60		
19	RHR breather vent	1	Cracked			\$	71.40	\$	71.40
20	Battery sponge	1	Dented			\$	155.60	\$	155.60 X
				List tot	al:	\$:	13,119.53	\$	8,656.34
1	Tailgate glass inner seal	1	Not Necessary			\$	50.00		
2	Tailgate glass sealant	1	Not Necessary			5	80.00		
3	RHR quarter glass sealant	1	Necessary			\$	60.00	5	40.00
4	Joint sealant	2	Necessary	\$	60.00	\$	120.00	\$	80,00 60
				Special net	t total:	\$	310.00	\$	120.00
				Parts To	tal:	\$ 1	13,429.53	s	8,776.34



160 Sin Ming Drive #05-16 Sin Ming AutoCity (S) 575722 Mobile: 9688-0413 Fax: 6266-7396 Email: absolute.app.svcs@gmail.com

ehicle No: SDN8688S	Report No: AAS/2	018/343
/N Labour Description	Repairer's Est	Revised Est
1 To transfer tailgate fittings.	\$ 120.00	•
2 To transfer tailgate glass.	\$ 180.00	
3 To remove & transfer reverse sensor.	\$ 80.00	\$ 50.00
4 To remove & refit rear trimmings, rear seat, etc.	\$ 180.00	\$ 150.0080
5 To remove & refit fuel tank.	\$ 150.00	\$ 120.00 60
6 To renew RHR quarter glass.	\$ 180.00	\$ 150.00 60
7 Rust proofing on rear affected panels	\$ 100.00	\$ 60.00
8 To check rear wirings.	\$ 80.00	\$ 50.00 30
9 To remove and renew rear damaged parts. Re-align all affected area.	\$ 2,200.00	\$ 1,750.00 12
10 To putty and respray all rear damaged parts. Touch up all affected area.	\$ 1,500.00	\$ 1,200.00 9
Labour Total	al: \$ 4,770.00	\$ 3,530.00
Grand Tota	d: \$ 18,199.53	\$ 12,306.34
he final adjusted lump sum amount is \$9,850.00		
Inder normal circumstances, the repair should be completed	7103.92	
rithin a reasonable period of 12 working days.	100.00	
8 Photographs were taken at the time of inspection.	2040.00	
	2040.00	
	20%	
	7395.1	7
	1 - 11077	

Disclaimer: This report is intended for the exclusive use of the address solely in relation to the loss occurrence in which the assessed vehicle involved. No liability or responsibility whatsoever shall be held by Absolute Appraisal Service Pte Ltd for any reliance on this report by any third party.



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 D	es Experts	En	Automobile
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AIG ASIA PACIFIC INSURANCE PTE LTD Ref : CS/AIG18020710/R1vbe2

CHA	HENTON WAY #0 RTIS BUILDING SAPORE 079120	8-16	Date: 27-12-2018				
	N : BENNIE TAN		Code: AIG				
1.		icy Particulars :- THIRD P					
	Insured Veh.	SGF 4126E	Veh. Inspected	SDN 8688S			
	Policy No.	2100457345-02	Coverage (\$)	0.00			
	Claim No.	0101155692SG-003	Excess (\$)	0.00			
	Assign From	BENNIE TAN	Assign Date	12/11/2018			
2.		Vehicle Pa	articulars & Condition				
	Make & Model	AUDI A3 SB 1.4 TFSI A	c.c	1395			
	Engine No.	HIDDEN	Year of Reg.	2015			
	Chassis No.	WAUZZZ8V0FA173275	Colour	BLACK			
	Odometer	59918	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	CONTINENTAL	6 mm			
	L/H Front Tyre	205/55 R16	CONTINENTAL	6 mm			
	R/H Rear Tyre	205/55 R16	CONTINENTAL	6 mm			
	L/H Rear Tyre	205/55 R16	CONTINENTAL	6 mm			
1.		Descri	ption of Damages				
	THE VEHICLE HA	D COMPLETED ITS REPAIR I	WORKS.				
	REPAIR CONDITION	ON SEE DETAILS.					
5.	· 医基层型系统 ()		eral Information				
	Accident Date	12/08/2018	Inspection Date	21/11/2018			
	Survey held at	28 TUAS CRESCENT SING	APORE 638719				
	Repairer	LIAN HENG PAINTER CO.					
5a.		Many Mark State	Remarks				
		ON WAS CONDUCTED ON A" CE TO YOUR INSTRUCTIONS					
5b.		Estima	ate Days of Repair				
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	8 Working Day	s			



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SDN 8688S

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	TAILGATE	REPAIRED SEE LABOUR	3,212.70	-
1	TAILGATE EMBLEM	REPLACED	187.87	187.87
1	TAILGATE NAMEPLATE 'A3'	REPLACED	89.77	89.77
1	TAILGATE NAMEPLATE "TFSI"	REPLACED	85.61	85.61
1	TAILGATE LAMP RH	REPLACED	544.75	544.75
1	TAILGATE LOCK	SERVICEABLE	211.70	-
1	TAILGATE WEATHER-STRIP	SERVICEABLE	288.89	-
1	REAR BUMER	REPLACED	1,445.90	1,445.90
1	REAR BUMPER LOWER	REPLACED	369.00	369.00
1	REAR BUMPER REINFORCEMENT	REPLACED	865.00	865.00
1	REAR BUMPER SIDE MOUNT RH	REPLACED	58.00	58.00
1	TAIL LAMP RH	REPLACED	672.25	672.25
1	TAIL LAMP PANEL RH	REPAIRED SEE LABOUR	253.13	
1	REAR PANEL	REPAIRED SEE LABOUR	769.79	-
1	REAR PANEL FINISHER	SERVICEABLE	427.30	
1	RHR QUARTER PANEL	REPLACED	2,415.97	2,415.97
1	RHR QUARTER PANEL GLASS	REPLACED	672.30	672.30
1	RHR SPLASH SHIELD	SERVICEABLE	322.60	
1	RHR BREATHER VENT	REPLACED	71.40	71.40
1	BATTERY SPONGE	NOT NECESSARY	155.60	8
	LESS 5% DISCOUNT		-	-373.89
			13,119.53	7,103.93
	SPECIAL NETT ITEMS			
1	TAILGATE GLASS INNER SEAL (SN)	NOT NECESSARY	50.00	
1	TAILGATE GLASS SEALANT (SN)	NOT NECESSARY	80.00	
1	RHR QUARTER GLASS SEALANT (SN)	REPLACED	60.00	40.00
2	JOINT SEALANT @\$60.00 (SN)	REPLACED	120.00	60.00
			310.00	100.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	LABOUR			
	TO TRANSFER TAILGATE FITTINGS.	NOT NECESSARY	120.00	
	TO TRANSFER TAILGATE GLASS.	NOT NECESSARY	180.00	
	TO REMOVE & TRANSFER REVERSE SENSOR.		80.00	50.00
	TO REMOVE & REFIT REAR TRIMMINGS, REAR SEAT, ETC.		180.00	80.00
	TO REMOVE & REFIT FUEL TANK.		150.00	60.00
	TO R & I RHR QUARTER GLASS.		180.00	60.00
	RUST PROOFING ON REAR AFFECTED PANELS.		100.00	60.00
	TO CHECK REAR WIRINGS.		80.00	30.00
	TO REMOVE AND RENEW REAR DAMAGED PARTS. RE- ALIGN ALL AFFECTED AREA. INCLUSIVE OF THE REPAIR OF TAILGATE, TAIL LAMP PANEL RH AND REAR PANEL.		2,200.00	800.00
	TO PUTTY AND RESPRAY ALL REAR DAMAGED PARTS. TOUCH UP ALL AFFECTED AREA.		1,500.00	900.00
			4,770.00	2,040.00
	GRAND TOTAL		18,199.53	9,243.93

RECOMMENDED COST OF LUMP SUM REPAIRS	7,400.00
(TO ITS PRE-ACCIDENT CONDITION)	

Report Ref No. CS/AIG18020710/R1vbe2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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