

22/03/2002

ASS. REC. BY:

REF: CS3 / AL118020921 / J0602

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person):

Chin Lee Ying

of

AL1

Date/Time:

20-11-2018 10:26am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLV 6355D

Insured:

SKD 9491E

at Workshop m/s

Ton Motor

Tel:

9791 9594

of

Bik 160 Sin Ming Drive #05-16

Policy No:

2100 287277

Claim No:

269500966286

Sum Insured:

Excess:

Make of Veh:

D.O.A.

16-11-2018

(Client's Record)

CA / REV / REP. / REV 24 HRS w/p

H.O.D. Endorsement:

Date/Time:

20-11-2018 11:07am

Person Contacted:

Aik Shan

Vehicle IN/OUT

Date/Time

Action/Instruction (X) Estimate

SW 6355D - X

SKD 9491E - CS / FCL 8004388 / R1td302

DAF - 03/03/2018

Disassemble: 22/11/2018

After repair: 23/11/2018

PRs
Hwee Jie

REF:

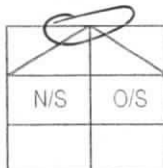
A16n

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s 160 Sin ming Dr #05-16
 of Toh motor
 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.



Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLV 6355D Yr Regn: 10 mar 2009
 Type: MC / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Toyota wish C.C. 1797
 Colour: Grey A/C: Insured / Std / NI / NA
 Sp. Reading: 252943 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JTDER12W103002485
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Good / Jammed / Leaked / Burnt or
 Brake: Good / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 195/65R15
 R: _____

BS / DUN / EXNOVA / GY / FS / LIZA MC OHTSU / PIR / SUMI /
 TOYO / YOKO or

| Front | | Rear | |
|--------------------------------|-----------------|--------|-----------------|
| R/Bal. | <u>6</u> mm | R/Bal. | <u>6</u> mm |
| L/Bal. | <u>6</u> mm | L/Bal. | <u>6</u> mm |
| D.O.A. | <u>16/11/18</u> | D.O.I. | <u>20/11/18</u> |
| Survey held at <u>— @ 1445</u> | | | |

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

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

Date / Time Action / Instruction

4 days

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee.

Transportation

) \$ + RS \$ St

) Photos

) Others

Add Fee: ☐ Site Insp (\$

☐ Interview (\$

☐ Tech. Invs (\$

☐ Weekend (\$

Report Format : DAR

Lump Sum / I.B.I. (\$

TOTAL

180

20

200

- PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SKD9491E AND SLV6355D ON 16/11/2018

From: Chin, Lee-Ying
To: assignments, admin-a@lkkauto.com
Cc: Fong, Andy-SY
Sent: Tuesday, 20 November, 2018 10:26:45 AM
Attachments:  tmp3CF2.tif

Hi LKK,

Kindly assist to survey, vehicle in workshop.

Thanks.

Best Regards

Lee Ying, Chin

AIG

Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1947 | Fax +(65) 6835 7416

Lee-Ying.Chin@aig.com | www.aig.com.sg

IMPORTANT NOTICE:

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

M NEDUMARAN & COAdvocates & Solicitors
Commissioner for Oaths

UEN NO. 53181067D

Nedumaran Muthukrishnan
LLB (hons) [Buckingham]
Barrister at Law (Lincoln's Inn)**Please reply to our Branch Office for this matter**⇒ Branch Office : 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
serene.tan@mneduco.com.sgOur Reference : MN/IG/T1/1812774/st
Your Reference : SKD 9491E

Date : 19 November 2018

BY FAX 6835-7416 ONLY

AIG ASIA PACIFIC INSURANCE PTE LTD
AIG Building
78 Shenton Way, #07-16
Singapore 079120

Dear Sirs,

1. NOTICE OF ACCIDENT TO INSURERS AND PRE-REPAIR SURVEY WITHIN 2 WORKING DAYS PURSUANT TO PARAGRAPH 2 OF THE STATE COURTS PRACTICE DIRECTIONS (AMENDMENT NO. 1 OF 2016)
2. ACCIDENT ON 16/11/2018 INVOLVING VEHICLE NOS. SLV 6355D & SKD 9491E ALONG READ CRESCENT.

We are instructed by LUMENS AUTO PTE LTD (owners of motor vehicle no. SLV 6355D) and/or TOH MOTOR ENTERPRISE (the motor workshop for SLV 6355D) to notify you of a road traffic accident on 16/11/2018 at about 2110 hours along READ CRESCENT involving our client's vehicle registration number [SLV 6355D] and [SKD 9491E] driven by you at the material time. A copy of the Singapore accident statement/traffic police report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged.

Before we proceed to repair the damaged vehicle, please let us know within **2 working days** of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you with the stipulated timeline, we shall proceed to repair the vehicle without further reference to you.

Yours faithfully,


M NEDUMARAN & CO
(Branch Office)Encl
c.c. 1) XU JIGUO

(Vehicle : SKD 9491E)

- 2) Workshop : Toh Motor Enterprise
160 Sin Ming Drive
#05-16 Sin Ming Autocity
Singapore 575722

(Vehicle : SLV 6355D)

Tel : 9748-3351/ 9791-9594 (Mr Ash Toh/Aik Shan)

> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|-------------------------------------|--------------------------|
| Vehicle Owner Particulars | |
| Owner ID Type: | Company |
| Owner ID: | 2921Z |
| Vehicle Details | |
| Vehicle No.: | SLV6355D |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 10 Dec 2018 |
| Vehicle Make: | TOYOTA |
| Vehicle Model: | WISH 1.8 AUTO |
| Primary Colour: | Grey |
| Manufacturing Year: | 2009 |
| Engine No.: | 1ZZ3235231 |
| Chassis No.: | JTDER12W103002485 |
| Maximum Power Output: | 97.0 kW (130 bhp) |
| Open Market Value: | \$18,662.00 |
| Original Registration Date: | 10 Mar 2009 |
| First Registration Date: | 10 Mar 2009 |
| Transfer Count: | 1 |
| Actual ARF Paid: | \$18,662.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 09 Mar 2019 |
| PARF Rebate Amount: | \$9,331.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 09 Mar 2019 |
| COE Category: | B - Car (1601cc & above) |
| COE Period(Years): | 10 |
| QP Paid: | \$689.00 |
| COE Rebate Amount: | \$16.00 |
| Total Rebate Amount: | \$9,347.00 |

The information contained herein is correct as at 10 Dec 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

| ACCIDENT STATEMENT | |
|--|--------------------------------------|
| Date Of Report | 17/11/2018 13:20 |
| Date Of Accident | 16/11/2018 21:10 |
| Exact Location Of Accident | ALONG READ CRES |
| Country/State of Loss | SINGAPORE |
| DETAILS OF OWN VEHICLE | |
| Vehicle Registration Number | SLV6355D |
| Insured/Policyholder | |
| Name Of Registered Owner | MIDVIEW MOTORS PTE LTD |
| Co Reg No | 201632921Z |
| Email Address | OPERATIONS@LUMENS.SG |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-87781765 |
| Vehicle Particulars | |
| Manufacturer | TOYOTA |
| Model | WISH |
| Exact Purpose for which vehicle was being used at time of accident | |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | THIRD PARTY |
| Vehicle Category | PRIVATE HIRE |
| Insurance Company | |
| Name of Insurance Company | TOKIO MARINE INSURANCE SINGAPORE LTD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | YES |
| Policy Number | 18-MJ001361-R00 |
| Cover Note Number | |
| Driver | |
| Name of Driver | LIM KIM CHEW |
| NRIC No | S1620457I |
| Date Of Birth | 10/10/1963 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 10/07/2002 |
| Driving Experience | 16 YEARS AND 4 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-93885783 |
| Fax Number | |
| Contact Number | |
| EEmail Address | NOEMAIL |

| | |
|---|--------------------------------------|
| Address | BLK 745 JURONG WEST STREET 73 #03-47 |
| Postcode | 640745 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OTHER - HIRE |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|------------|
| Type Of Accident | SIDE SWIPE |
| Weather Conditions | CLEAR |
| Road Surface | DRY |

Other Information

| | |
|---|-----|
| Was any foreign vehicle involved in this accident? | NO |
| Number of vehicles involved in the accident | 2 |
| Was any body injured in the Accident? | YES |
| Was any injured conveyed to hospital by ambulance? | NO |
| Was any other material or property damaged? | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | YES |
| Number of Passengers (Including Driver) | 1 |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 81 ANG MO KIO AVE 3 , POSTCODE: 569929 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-4519999 - FAX NO: 65535679 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

AS SKETCH PLAN

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 | SKD9491E |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name LIM KIM CHEW

Approximate Age

Injuries Sustain

Injured person in which vehicle? SLV6355D

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:



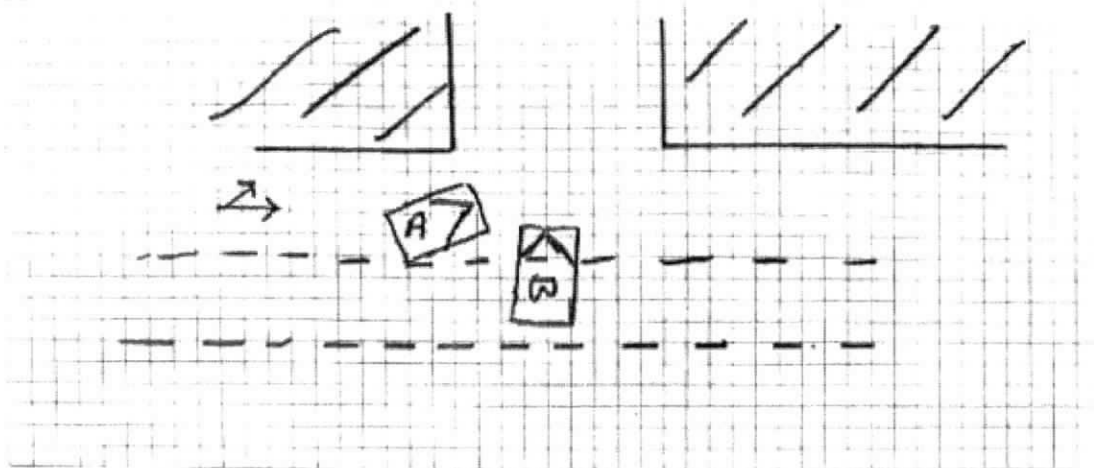
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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



Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Veh A was waiting for traffic to clear & turn into the minor road. Veh B cut in from the second lane & collided into the front of veh A.

DECLARATION

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

Policyholder's Signature
Date & Time:

B



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

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



Vehicle No: SLV 63SSD

| NAC | INC | Item | CON | AC | Qty |
|------|--------|------------------------------|-----|----|-----|
| 1071 | 992205 | Fuse Box | | | |
| 1072 | 994011 | Relay Box | | | |
| 1073 | 995053 | Wiper Washer Tank | | | |
| 1074 | 995052 | Wiper Washer Tank Motor | | | |
| 1075 | 990159 | Alternator Assy | | | |
| 1076 | 990160 | Alternator Belt | | | |
| 1077 | 992688 | Power Steering Pump | | | |
| 1078 | 992669 | Power Steering Belt | | | |
| 1079 | 994431 | Power Steering Cooler Pipe | | | |
| 1080 | 992692 | Power Steering Hose | | | |
| 1081 | 990010 | ABS Pump Control Unit | | | |
| 1082 | 990427 | Brake Master Pump Assy | | | |
| 1083 | 990403 | Brake Booster Pump Assy | | | |
| 1084 | 991005 | Engine Top Cover | | | |
| 1085 | 991011 | Engine Under Cover | CRA | | |
| 1086 | 990946 | Engine Mounting | | | |
| 1087 | 990949 | Engine Mounting Frt | | | |
| 1088 | 990950 | Engine Mounting LH | | | |
| 1089 | 990952 | Engine Mounting RH | | | |
| 1090 | 990951 | Engine Mounting Rear | | | |
| 1091 | 992234 | Gear Box Mounting | | | |
| 1092 | 991520 | Frt LH Chassis Member | | | |
| 1093 | 991520 | Frt RH Chassis Member | | | |
| 1094 | 990728 | Frt Vertical Cross Member | | | |
| 1095 | 991863 | Frt Lower Cross Member | | | |
| 1096 | 995070 | Frt LH Fender | | | |
| 1097 | 995072 | Frt LH Fender Inner Panel | | | |
| 1098 | 995147 | Frt LH Fender Lamp | | | |
| 1099 | 995148 | Frt LH Fender Protector | | | |
| 1100 | 991740 | Frt LH Fender Inner Shield | | | |
| 1101 | 995179 | Frt LH Mudflap | | | |
| 1102 | 995170 | Frt LH Wheel Rim | | | |
| 1103 | 994025 | Frt LH Rim Cover | | | |
| 1104 | 995065 | Frt LH Tyre | | | |
| 1105 | 995071 | Frt RH Fender | | | |
| 1106 | 991739 | Frt RH Fender Inner Panel | | | |
| 1107 | 991744 | Frt RH Fender Lamp | | | |
| 1108 | 991752 | Frt RH Fender Protector | | | |
| 1109 | 991740 | Frt RH Fender Inner Shield | CRA | / | 1 |
| 1110 | 991884 | Frt RH Mudflap | | | |
| 1111 | 992087 | Frt RH Wheel Rim | | | |
| 1112 | 994025 | Frt RH Rim Cover | | | |
| 1113 | 995065 | Frt RH Tyre | | | |
| 1114 | 992093 | Frt Windscreen Glass | | | |
| 1115 | 992117 | Frt Windscreen Rubber | | | |
| 1116 | 992108 | Frt Windscreen Moulding | | | |
| 1117 | 992098 | Frt Windscreen Sealant | | | |
| 1118 | 991019 | ERP Bracket | | | |
| 1119 | 991020 | ERP Unit | | | |
| 1120 | 992140 | Frt Wiper Arm | | | |
| 1121 | 992142 | Frt Wiper Blade | | | |
| 1122 | 995045 | Wiper Panel Garnish | | | |
| 1123 | 991126 | Firewall Panel | | | |
| 1124 | 990753 | Dashboard Assy | | | |
| 1125 | 992282 | Glove Box Cover | | | |
| 1126 | 992281 | Glove Box Compartment | | | |
| 1127 | 994483 | Steering Wheel Airbag | | | |
| 1128 | 994485 | Steering Wheel Airbag Sensor | | | |
| 1129 | 990749 | Dashboard Airbag | | | |
| 1130 | 990750 | Dashboard Airbag Sensor | | | |
| 1131 | 990029 | Airbag Control Unit | | | |
| 1132 | 990864 | Frt Driver Seat | | | |
| 1133 | 991922 | Frt RH Seat Belt Assy | | | |
| 1134 | 991899 | Frt Passenger Seat | | | |
| 1135 | 995182 | Frt LH Seat Belt Assy | | | |
| 1136 | 990247 | Sticker | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

ASSESSOR:

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

PRI

| CLAIM SUBFOLDER TRACKING | | | | | | | |
|--------------------------|---|---------------|---|--|--|-------------|---|
| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Auth'ed | Status |
| Main | 20 Nov 2018 Edit Reg | | 20 Nov 2018 00:00 Edit Adj Rpt | S\$0.00 Edit Estimates | S\$0.00 View Rpt | | Pending for Survey Report Cancel Case |

| | | | | |
|-------------|------------------|----------------------|------------------|-----------------|
| Main | Reference | Claim Details | Documents | Show All |
|-------------|------------------|----------------------|------------------|-----------------|

CLAIM SUBFOLDER DETAILS [Created by adjuster]

| | | | |
|-----------------------------|--|------------------------|--|
| Insured: | XU JIGUO , ID: G42527434 | | |
| Main Claimant: | MIDVIEW MOTORS PTE LTD , Co. Reg. No.: 201632921Z | | |
| Vehicle Reg. No.: | SLV6355D | Date of Loss: | 16/11/2018 21:00 - :59 [116 Months and 6 Days From LTA Reg Date (Man Yr)] |
| Claim Type: | TP / 2695009662SG | Policy/Cover Note No.: | 2100287277 |
| Vehicle Reg. No. (Insured): | SKD9491E | Policy No. (Claimant): | |
| | | Excess: | |
| Repairer: | Toh Motor Enterprise (Autocity) 160 Sin Ming Drive, #05-16 Sin Ming Autocity, 575722 Sin Ming - Tel: | | |
| Handling Insurer: | AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Tan, Bennie-WZ - 6419 1718] Bennie-WZ.Tan@aig.com | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by ONG HWEE JIE] ... [Final Rpt due 29/11/2018] | | |
| Claimant's Solicitor: | M NEDUMARAN & CO - Tel: 65098480 | | |

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

- AIG_SG (21/11/2018): Request to upload TP GIA Report
- AIG_SG (21/11/2018): No OI GIA Report

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

*SLV6355D (2695009662SG)
[SKD9491E]
TP
MIDVIEW MOTORS PTE LTD
Nov 16 2018 9:00PM
[XU JIGUO]
Toh Motor Enterprise

| | | | | | | | | | | | | | |
|------------------|-----------------|-----------------------------------|---------------|--|--------------------|--|--------------|--|--------------|--|---------------------------------|-------------------------------------|-------------------------------------|
| Upload Documents | | | Upload Photos | | Compose New Letter | | Upload Video | | Upload Audio | | View <div>View in Browser</div> | | |
| Photos/Images | | | | | | | | | | | 3 per page | <input checked="" type="checkbox"/> | |
| No | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | | | | | | | | | | Thumbnail | Print |
| 1 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 2 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 3 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 4 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 5 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 6 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 7 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 8 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 9 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 10 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 11 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 12 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 13 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 14 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 15 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 16 | 10/12/18 10:47 | General View | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 17 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 18 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 19 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 20 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 21 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 22 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 23 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 24 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 25 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 26 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 27 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 28 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 29 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 30 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 31 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 32 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 33 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 34 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 35 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 36 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 37 | 10/12/18 10:48 | Photographs of Damaged Parts | | | | | | | | | | Load JPG | <input checked="" type="checkbox"/> |

| Photos/Images | | | 3 per page | <input checked="" type="checkbox"/> |
|---------------|-----------------|-----------------------------------|------------|-------------------------------------|
| No | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | Thumbnail | Print |
| 38 | 10/12/18 10:48 | Photo After Spray | Load JPG | <input checked="" type="checkbox"/> |
| 39 | 10/12/18 10:48 | Photo After Spray | Load JPG | <input checked="" type="checkbox"/> |
| 40 | 10/12/18 10:48 | Photo After Spray | Load JPG | <input checked="" type="checkbox"/> |
| 41 | 10/12/18 10:48 | Photo After Spray | Load JPG | <input checked="" type="checkbox"/> |

Documents Checklist

| DOCUMENTS CHECKLIST | Reset | Save | Print |
|--|-------|------|-------|
| There are no document checklists configured. | | | |

| |
|---|
| Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) |
| <div></div> |
| Show Remarks To: <input type="checkbox"/> Handling Insurer Note: Remarks are private unless you show it to other parties. |

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/AIG18020921/JCBE2

Date: 17/12/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100287277
Claimant Vehicle No : SLV6355D **Insured Vehicle No :** SKD9491E
 Date of Loss: 16/11/2018 Nature of Claim: TP Claim No: 2695009662SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SLV6355D**
 Make & Model: TOYOTA WISH, 1.8 (A) Engine No: 1ZZ3235231
 Reg. Date: 10/03/2009 (Man. Year: 2009) Chassis No: JTDER12W103002485
 Colour: Grey Odometer: 252943 km
 Engine Capacity: 1794 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: 195/65 R15 Rear Tyre Size: 195/65 R15
 Front Left Side: Michelin 6 mm Rear Left Side: Michelin 6 mm
 Front Right Side: Michelin 6 mm Rear Right Side: Michelin 6 mm

The above values represent the remaining tyre treads depth

| COST OF CLAIMS | Repairer's | Adjuster's | Difference | Diff % |
|--------------------------|-------------|-------------|-------------|--------|
| Parts | 0.00 | 0.00 | 0.00 | |
| Miscellaneous Items | 0.00 | 0.00 | 0.00 | |
| Labour | 0.00 | 0.00 | 0.00 | |
| Paintwork Labour | 0.00 | 0.00 | 0.00 | |
| Towing | 0.00 | 0.00 | 0.00 | |
| Nett Amount (S\$) | 0.00 | 0.00 | 0.00 | |

INSPECTION

Date of Assignment: 20/11/2018
 Date Inspected: 20/11/2018 Inspected At: Toh Motor Enterprise (Autocity)
 160 Sin Ming Drive, #05-16 Sin Ming
 Autocity
 Singapore 575722
 Estimated Period of Repair: 4.0 days

Adjuster: ONG HWEE JIE

Manager: CELINE FONG

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

REPAIR DETAILS

Recommended Parts

| No. | Qty | Part No. | Particulars | Condition | Repairer's | Amount |
|--------------------|-----|----------|-------------------------------|-----------|------------|--------|
| 1 | 1 | | *FRT BUMPER | Dented | 0.00 F | *- F |
| 2 | 1 | | *FRT BUMPER CLIPS | Necessary | 0.00 F | *- F |
| 3 | 1 | | *FRT BUMPER SIDE RETAINER RH | Cracked | 0.00 F | *- F |
| 4 | 1 | | *FRT BUMPER REINFORCEMENT | Dented | 0.00 F | *- F |
| 5 | 1 | | *FRT BUMPER SPONGE | Cracked | 0.00 F | *- F |
| 6 | 1 | | *FRT BUMPER GRILLE | Cracked | 0.00 F | *- F |
| 7 | 1 | | *FRT LH BUMPER FOG LAMP COVER | Cracked | 0.00 F | *- F |
| 8 | 1 | | *FRT GRILLE | Cracked | 0.00 F | *- F |
| 9 | 1 | | *FRT LH HEADLAMP ASSY | * Check | 0.00 F | *- F |
| 10 | 1 | | *FRT RH HEADLAMP ASSY | Cracked | 0.00 F | *- F |
| 11 | 1 | | *ENGINE UNDER COVER | Cracked | 0.00 F | *- F |
| 12 | 1 | | *FRT RH FENDER INNER SHIELD | Cracked | 0.00 F | *- F |
| Total Parts (\$\$) | | | | | 0.00 | 0.00 |

F=Franchise part.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

| |
|---|
| Report was unsubmitted during this print-out. |
|---|

< END OF ESTIMATES >