

REF CS/AIG19003315/T1td3²

Special Instruction

Product Person

menimen

Taufik
Abukassim

ASSIGNMENT (Office)

AIG

Date/Time: **20/2/19 @ 3.31pm**

Estimated Cost

Bill to

OD (P) WS / TP RES / OD RES / EYA / INV / MY / CS

To Inspect Vehicle No

GBG 530 B

Insured

SKQ 6461T

at Workshop m/s

Car pro Auto

Tel

9338 2859

of

Blk G, woodlands Rd 399J, Yew Tee Ind.

Policy No

2100396106

Claim No

192350383854

Sum Insured

Excess

Make of Veh.
(Client's Record)

D.O.A.

16/02/2019

CA / REV / REP. / REV 24 HRS ^{up?}

H.O.D. Endorsement

Date/Time

10:15am @ 20/2/19

Person Contacted

Ms. Sini

Vehicle

IN OUT

Date/Time	Action/Instruction (—) Estimate	
	GBG 530 B - NBA / # 19003066 / Y	D.O.A. 16/2/19
	SKQ 6461T - NBA / # 19003066 / Y	D.O.A. 16/2/19

REF:

146

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop n/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

N/S	O/S

Bal. or Market Value:

IDAC Accident 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. GBG530B

Yr Regn:

2016, Dec.

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Toyota Regis

c.c

29.82

Colour:

Black

A/C: Insured / Std / NI / NA

Sp. Reading

58471

T/Ratio: Insured / Std / NI / NA

Eng/No:

KD A2010186499

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F: 245/352R20

R:

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

TOYO / YOKO or

Falken

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

D.O.I.

21/2/19

Survey held at

Zhong Cheng

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

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

Date / Time

Action / Instruction

Zhong Cheng 4/5 of 2700, 4 days uninform.

Submit \$2700 (Red: 13093.16, 82%)

Date/Time, File Pass to?

1) 313 Typist

Date/Time, File Return to?

2)

Report Format:

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

2700/-

☐ : Preli. Report
☒ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐ : Site Insp (\$
☐ : Interview (\$
☐ : Tech. Insp (\$
☐ : Weekend IS

Survey Fee:

Transportation:


) \$ + PS. \$ SI

) Photos

) Others

TOTAL

- Pre repair inspection request - GBG530B VS SKQ6461T (OI) DOA 16/02/2019

From: Abu Kassim, Noor Mariesa
To:
Cc: Fong, Andy-SY, Chin, Lee-Ying, Lim, Sheng Yang, Mithoosingh, Aashweenjeetkaur, Chan, Yoke Shi, Hor, Yinrul, Kaur, Baljit, Azlan, Syazairdina
Sent: 20/2/2019 3:31:08 PM
Attachments:  SKMBT_C364e19021915500.pdf

Hi,

Please refer to the enclosed request from **Cheonghoh Law Corporation**

Claim no : 1923503838SG003
Case Owner : Bernard Ler

If you have any queries/concerns, please let us know.
Kindly assist to assign Mohamad Taufikh as Single Joint Expert as requested.

Regards,

Mariesa Abu Kassim (Mariesa)
AIG
Claim Adjuster II, Singapore FNOL, Claims Operations – Auto

NoorMariesa.AbuKassim@aig.com | www.aig.com

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.

From: mail@cheonghoh.sg
To: NoorMariesa.AbuKassim@aig.com
Cc: Andy-SY.Fong@aig.com, Lee-Ying.Chin@aig.com, ShengYang.Lim@aig.com, Aashweenjeetkaur.Mithoosingh@aig.com, yokeshi.chan@aig.com, Syazairdina.Azlan@aig.com, Yinrul.Hor@aig.com
Subject: Re: - PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SKQ6461T AND GBG530B ON 16/02/2019
Date: Wed, 20 Feb 2019 06:36:07 +0000
Dear Sirs,

We refer to the above matter and your email of even date.

Our client hereby nominate Mohamad Taufikh of LKK Auto Consultants Pte Ltd to conduct the pre-repair survey of the damages to our client's vehicle arising out of the above mentioned accident.

Please contact our client's workshop, Car Pro Auto, Blk 6 Woodlands Road 399J Yew Tee Industrial Estate, Singapore 678008 for the said survey of GBG 530 B.

Contact Person : Ms Sini / Jason
Telephone
: 9338 2859

Kindly proceed to do the needful.

Thanks & regards
Catherine
CHEONGHOH LAW CORPORATION
Blk 53 Chin Swee Road #03-05
Singapore 160053
T: 6337 8700 | F: 6337 3700 | E: mail@cheonghoh.sg

On 20 Feb 2019, at 9:49 AM, Abu Kassim, Noor Mariesa <NoorMariesa.AbuKassim@aig.com> wrote:

<logo.jpeg> <lock.gif>
This is a secure, encrypted message. To read it, open the attachment.

这是安全加密信息。如要阅读此信息，请开启附件。

นี่คือการรักษาความปลอดภัยของข้อมูลที่เข้ารหัส เพื่ออ่านให้เปิดไฟล์ที่แนบมา

이것은 안전하고 암호화된 메시지입니다. 그것을 읽으려면 첨부 파일을 엽니다.

Ini adalah pesan, aman terenkripsi. Untuk membacanya, membuka attachment.

[Click here](#) by 2019-02-27 09:50 +08 to read your message.
After that, open the attachment.

[More Info](#)

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<SecureMessageAtt.html>

YEW TEE CAR ALIGNMENT CENTRE
BLK a1 WOODLANDS ROAD 18KM
387-L YEW TEE IND. EST.
SINGAPORE 677956
TEL: 63683231
FAX: 63684366

Customer

Vehicle ident no.
GBG530B

Repair order no.
R011524

Technician
KT

Date
27.2.19

License plate no.

First reg. date

Model

Toyota : Hiace KDH200R-SSMDY

Odometer reading: km/miles

12345

Complaints or reason for alignment check

			Before	Target Data		Actual		
Rear axle	Camber	left	-0°08'			-0°08'		
		right	-0°10'			-0°10'		
		cross	0°03'	0°00'	0°01'			
	Toe	left	0°14'			0°12'		
		right	-0°17'			-0°16'		
		total	-0°03'		-0°03'			
Geometrical driving axis			0°16'	0°00'	0°14'			
Front axle	Camber	left	-0°30'	-0°18'	+/-0°45'	-0°32'		
		right	0°13'			-0°21'		
		cross	-0°43'	0°00'	+/-0°30'	-0°11'		
	Caster	left	3°57'	2°24'	+/-0°45'	3°57'		
		right	3°53'			3°53'		
		cross	0°03'	0°00'	+/-0°30'	0°03'		
	SAI	left	13°29'	12°36'	+/-0°45'	13°31'		
		right	11°56'			12°30'		
		cross	1°32'	0°00'	+/-0°30'	1°01'		
	Track differential angle	left						
		right						
	Toe	left	0°02'	0°05'	+/-0°02'	0°05'		
		right	0°02'			0°03'		
		total	0°04'	0°09'	+/-0°09'	0°08'		
	Setback				0°00'			
	Max steering lock	left steer	left		-38°00'	+1°30'	-2°30'	
			right		33°00'	+1°30'	-2°30'	
		right steer	left		33°00'	+1°30'	-2°30'	
			right		-38°00'	+1°30'	-2°30'	

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BLK a1 WOODLANDS ROAD 18KM
387-L YEW TEE IND. EST.
SINGAPORE 677956
TEL: 63683231
FAX: 63684366

Customer

Vehicle ident no.
GBG530B

Repair order no.
R011523

Technician
KT

Date
18.2.19

License plate no.

First reg. date

Model

Toyota : Hiace KDH200R-SSMDY

Odometer reading: km/miles

12345

Complaints or reason for alignment check

			Before	Target Data	Actual
Rear axle	Camber	left		0°00'	-0°04'
		right			0°37'
		cross			-0°41'
	Toe	left			-0°29'
		right			-0°27'
		total			-0°56'
Geometrical driving axis			0°00'	-0°01'	
Front axle	Camber	left		-0°18' +/-0°45'	-0°34'
		right			0°24'
		cross			0°00' +/-0°30'
	Caster	left		2°24' +/-0°45'	3°58'
		right			3°50'
		cross			0°00' +/-0°30'
	SAI	left		12°36' +/-0°45'	13°17'
		right			11°43'
		cross			0°00' +/-0°30'
	Track differential angle	left			
		right			
	Toe	left		0°05' +/-0°02'	0°15'
		right			-0°05'
		total			0°09' +/-0°09'
Setback			0°00'		
Max steering lock	left steer	left		-38°00' +1°30' -2°30'	
		right		33°00' +1°30' -2°30'	
	right steer	left		33°00' +1°30' -2°30'	
		right		-38°00' +1°30' -2°30'	

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	19/02/2019 10:07
Date Of Accident	16/02/2019 22:30
Exact Location Of Accident	SUMMERDAZE CONDOMINIUM ENTRANCE (BOON LAY DRIVE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG530B
Insured/Policyholder	
Name Of Registered Owner	ARENA KTV PRIVATE LIMITED
Co Reg No	201414681C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81386262
Alternative Phone No	OFFICE-87553576

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MCV0003314
Cover Note Number	

Driver

Name of Driver	WOON YANG MENG
Passport No/FIN	F7664505K
Date Of Birth	31/12/1978
Occupation	OUTDOOR
Date Of Driving Pass	17/04/2018
Driving Experience	0 YEAR AND 9 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-87553576
Fax Number	
Contact Number	OTHERS-81386262
EMail Address	NOEMAIL

Address	BOON LAY DRIVE
Postcode	649929
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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 (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKQ6461T
Vehicle Make/Model/Colour	KIA CERATO FORTE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEANG YANLI TAMMIE
NRIC/Passport Number	S9919222D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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.



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

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

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Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG530B
Insured/Policyholder	
Name Of Registered Owner	ARENA KTV PRIVATE LIMITED
Co Reg No	201414681C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81386262
Alternative Phone No	OFFICE-87553576

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MCV0003314
Cover Note Number	

Driver

Name of Driver	WOON YANG MENG
Passport No/FIN	F7664505K
Date Of Birth	31/12/1978
Occupation	OUTDOOR
Date Of Driving Pass	17/04/2018
Driving Experience	0 YEAR AND 9 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-87553576
Fax Number	
Contact Number	OTHERS-81386262
Email Address	NOEMAIL

Address	BOON LAY DRIVE
Postcode	649929
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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 (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKQ6461T
Vehicle Make/Model/Colour	KIA CERATO FORTE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEANG YANLI TAMMIE
NRIC/Passport Number	S9919222D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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.
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- (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.



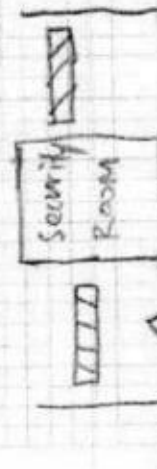
Driver's Signature
(if driver is not the policyholder)
Date & Time:

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

Accident Sketch Plan

SKETCH PLAN

SUMMERDAZE CONDOMINIUM ENTRANCE
 vehicle A G8G 530B
 vehicle B SKQ 646IT



Boon Lay Drive

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AT The earlier Date & time of accident 16/02/2019 about 22:30pm. I was driving along Boon Lay Drive on my way home towards my condominium Summerdaze. As reaching my condo entrance, I saw vehicle B "SKQ 646IT" stopping aside of the road in front of the condo entrance which there cannot be stopping and I horn to give signal that vehicle B SKQ 646IT was blocking all vehicles behind but vehicle B did not bother to move so I overtake and turn left into my condo entrance my vehicle have fully turn left into the entrance in front and waiting for the barrier to open, suddenly vehicle B "SKQ 646IT" drive forward and collided onto my rear left portion.

DECLARATION

I/We declare that the above statements are true in every respect.

Policyholder's
 Date & Time:



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

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

19/02/2019
 Rosli MHA3

Vehicle no. : GBG530B Toyota Hiace

Estimate - Spare Part(s)

S/N	Qty	Descriptions	Amount
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LIST ITEMS:-

1	1 pc	Rear fender bracket RH LH	\$ 38.00 cost X nn.
2	1 pc	Rear fender RH LH	\$ 1,382.00 R x
3	1 pc	Rear bumper	\$ 557.50 de ✓
4	1 pc	Axle	\$ 4,355.80 X nn
5	1 pc	Driveshaft	\$ 485.50 1st ✓
			\$ 6,818.80 1043
Less 25%			\$ 2,045.64 782.25
			<u>\$ 4,773.16</u>

Special Nett

1	1pc	LH RH rim (Japan)	\$ 7,800.00 1000 1750 out ✓
2	1pc	LH RH tyre	\$ 350.00 X nn.
3	1pc	Sealant for wheel arch	\$ 60.00 30 ml ✓
4	1pc	Wheel arch (LH)	\$ 550.00 250 out ✓
			<u>\$ 8,760.00</u> 1280

Estimate - Labour

S/N	Descriptions	Amount
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1	To panel beat and renewal of all necessary damaged body parts	\$ 700.00 500
2	To anti-rust	\$ 100.00 30.
3	To check wiring & lightings	\$ 60.00 30.
4	To remove door components	\$ 120.00 X no
5	To remove & refix rocker panel	\$ 120.00 X no
6	To remove & refix undercarriage	\$ 300.00 100.
7	To perform 4 wheel alignment (before and after)	\$ 100.00 80.
8	To putty and spray-paint of affected areas	\$ 800.00 600
		<hr/>
		\$ 2,300.00 1340.

16174.104

782-25

1280

1340

3402.25

4/302700

5days

unconfirm.

15793.16

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:

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

CLAIM SUBFOLDER TRACKING						
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed
Main	16 Feb 2019 Edit Reg		20 Feb 2019 00:00 Edit Adj Rpt	S\$2,700.00 Edit Estimates	S\$2,700.00 View Rpt	
						Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
[Created by adjuster]									
CLAIM SUBFOLDER DETAILS									
Insured:	CHEANG SIEW LOON, ID: S1689340D								
Main Claimant:	ARENA KTV PRIVATE LIMITED, Co. Reg. No.: 201414681C								
Vehicle Reg. No.:	GBG530B	Date of Loss:	16/02/2019 22:00 - :59 [25 Months and 25 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 1923503838SG	Policy/Cover Note No.:	2100396106 (Comprehensive)						
Vehicle Reg. No. (Insured):	SKQ6461T	Policy No. (Claimant):							
		Excess:							
Repairer:	Car Pro Auto (HQ) Blk 6 Yew Tee Industrial Estate 399-J, Woodlands Road, 678008 Woodlands - Tel: 9750 6777								
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Ler, Bernard-JQ]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 04/03/2019]								
			View All	Compose Case Mail					
ASSOCIATED MAIL RECEIVED									
<ul style="list-style-type: none"> AIG_SG (22/02/2019): Request to upload TP 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

***GBG530B (1923503838SG)**
[SKQ6461T]

TP

ARENA KTV PRIVATE LIMITED

Feb 16 2019 10:00PM

[CHEANG SIEW LOON]

Car Pro Auto

Upload Documents

Upload Photos

Compose New Letter

Upload Video

Upload Audio

View

View in Browser

3 per page

Photos/Images

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	07/05/19 12:55	General View	Load JPG	
2	07/05/19 12:55	General View	Load JPG	
3	07/05/19 12:55	General View	Load JPG	
4	07/05/19 12:55	General View	Load JPG	
5	07/05/19 12:55	General View	Load JPG	
6	07/05/19 12:55	General View	Load JPG	
7	07/05/19 12:55	General View	Load JPG	
8	07/05/19 12:55	General View	Load JPG	
9	07/05/19 12:55	General View	Load JPG	
10	07/05/19 12:55	General View	Load JPG	
11	07/05/19 12:55	General View	Load JPG	
12	07/05/19 12:55	General View	Load JPG	
13	07/05/19 12:55	General View	Load JPG	
14	07/05/19 12:55	General View	Load JPG	
15	31/03/20 10:44	Reinspection Photo	Load JPG	
16	31/03/20 10:44	Reinspection Photo	Load JPG	
17	31/03/20 10:44	Reinspection Photo	Load JPG	
18	31/03/20 10:44	Reinspection Photo	Load JPG	
19	31/03/20 10:48	After Repair Photo	Load JPG	
20	31/03/20 10:48	After Repair Photo	Load JPG	
21	31/03/20 10:48	After Repair Photo	Load JPG	

1 per page

Documentation

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	31/03/20 11:48	Singapore Accident Statement	Load PDF	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	22/02/19 09:31	OI GIA REPORT	Load PDF	

Documents Checklist

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

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Handling Insurer
Note: Remarks are private unless you show it to other parties.

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

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park
Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/AIG19003315/T1TD3S2
Date: 31/03/2020

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100396106
Claimant Vehicle No: GBG530B Insured Vehicle No: SKQ6461T
Date of Loss: 16/02/2019 Nature of Claim: TP Claim No: 1923503838SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: GBG530B
Make & Model: TOYOTA REGIUS ACE, 3.0 SUPER GL DARK PRIME (A) Engine No: 1KD2578966
Reg. Date: 22/12/2016 (Man. Year: 2015) Chassis No: KDH2010186499
Colour: Black Odometer: 58471 km
Engine Capacity: 2982 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: Good Steering (Serviceable): Yes Footbrake (Serviceable): Yes
Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 245/35ZR20 Rear Tyre Size: 245/35ZR20
Front Left Side: Falken 7 mm Rear Left Side: Falken 7 mm
Front Right Side: Falken 7 mm Rear Right Side: Falken 7 mm

The above values represent the remaining tyre treads depth

	Repairer's	Adjuster's	Difference	Diff %
COST OF CLAIMS				
Parts	13,874.10	2,062.25	11,811.85	85.14
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,300.00	1,340.00	960.00	41.74
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	16,174.10	3,402.25	12,771.85	78.96
Approved Total (Overridden) (S\$)		2,700.00		
Nett Amount (S\$)	16,174.10	2,700.00	13,474.10	83.31

INSPECTION

Date of Assignment: 20/02/2019
Date Inspected: 21/02/2019 Inspected At: Car Pro Auto (HQ)
Singapore 678008
Estimated Period of Repair: 5.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: DENISE TAY KWEE CHENG

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

REPAIR DETAILS

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR FENDER BRACKET LH	Not Necessary	38.00 FL	*- FL
2	1		*REAR FENDER LH	Repair	1,382.00 FL	*- FL
3	1		*REAR BUMPER	Deformed	557.50 FL	*557.50 FL
4	1		*AXLE	Not Necessary	4,355.80 FL	*- FL
5	1		*DRIVESHAFT	Bent	485.50 FL	*485.50 FL
6	1		*LH RIM (JAPAN)	Cut	7,800.00 FS	*1,000.00 FS
7	1		*LH TYRE	Not Necessary	350.00 FS	*- FS
8	1		*SEALANT FOR WHEEL ARCH	Necessary	60.00 FS	*30.00 FS
9	1		*WHEEL ARCH (LH)	Cut	550.00 FS	*250.00 FS
Sub Total (S\$)					15,578.80	2,323.00
- List Item Discount on L Items 25.00/25.00% (S\$)					1,704.70	260.75
Total Parts (S\$)					13,874.10	2,062.25

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

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
Labour Items				
1	TO PANEL BEAT AND RENEWAL OF ALL NECESSARY DAMAGED BODY PARTS.	New	700.00	500.00
2	TO ANTI-RUST.	New	100.00	30.00
3	TO CHECK WIRING & LIGHTINGS.	New	60.00	30.00
4	TO REMOVE DOOR COMPONENTS.	New	120.00	0.00
5	TO REMOVE & REFIX ROCKER PANEL.	New	120.00	0.00
6	TO REMOVE & REFIX UNDERACRRIAGE.	New	300.00	100.00
7	TO PERFORM 4 WHEEL ALIGNMENT (BEFORE AND AFTER).	New	100.00	80.00
8	TO PUTTY AND SPRAY-PAINT OF AFFECTED AREAS.	New	800.00	600.00
Gross Labour Cost (\$\$)			2,300.00	1,340.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >