

0000000

ASS REC DET

SA/Venja

Steve

REF CS/SPF19003760/Etd30r

ed Instruction

ASSIGNMENT (Office)

From (Person)

Frankie Thay

at

SPF

Date/Time

28/2/19 @ 11:14 am

Estimated Cost

Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MYTCS

To Inspect Vehicle No

SJ21230R

Insured

QX226M

at Workshop on/

Cycle & Carriage Fulco

Tel:

96552177

of

330 ubi Rd 3

Policy No

Claim No

AEMD/105/009/2019/009.

Sum Insured

Excess:

Make of Veh

D.O.A.

25/2/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

1up?

H.O.D. Endorsement

Date/Time

11:31 am 28/2/19

Person Contacted

Chris

Vehicle

IN/OUT

Date/Time

Action/Instruction

(✓) Estimate

SJ21230R - C07/AIG11022266/Apuk2

DOA: 27/10/2011

QX226M - CS/SPF18015199/T19122

DOA: -

Store

REF:

SPF

ASSIGNMENT

From
Estimated Cost
QD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No
at Workshop m/s
at
Insured
Policy No
Claims No
Sum Insured:
(Client's Record)
Make of Veh:

Date:

Excess:

(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

Date / Time | Action / Instruction

Veh No **SJ2 1230R** Yt Regn. **14/05/15**
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or

Make: **KIA Forte**C.C. **1-6**Colour **Black**

A/C Insured / Std / NI / NA

Sp. Reading **44591**

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: **KNA F2411MF S39 6172**

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F:

215/45R17

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or **NE-XEN**

Front

R/Bal. **7** mm

Rear

R/Bal. **7** mmL/Bal. **7** mmL/Bal. **7** mmD.O.A. **25/2/19**D.O.I. **28/2/19**Survey held at **C K C 461**Des. of Damages: Frt Rear / O/S / N/S / U/C / Rooftop or

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

Final \$6045, 7 days. (Red: 72741 55%) Submitt.
B3B- Steve inform mars cannot finalise for SPF cases.

Range GK-7K

RECEIVED 13 MAR 2019

Date/Time, File Pass to?

☐

Preli. Report

☒

Final Report

Date/Time, File Return to?

Report Format:

ump Sum / (B): (\$)

TP
6045Days Of Repair: **7**Resurvey No. of Trip: **1**

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech Invs (\$)

☐

Week-end (\$)

Survey Fee:

Transportation

) S + R. SI

) Photos

) Other:

) ..

TOTAL

280

280

Nivitha (LKK Auto)

From: Frankie THAY (SPF) <Frankie_THAY@spf.gov.sg>
Sent: Thursday, 28 February 2019 11:14 AM
To: Veron Chen (LKKAuto); assignments
Cc: Olivia Lau (LKKAuto); Hafizul Farhan RAHMAT (SPF)
Subject: RE : Pre-Repair Inspection for vehicle SJZ1230R

Your reference : SJZ1230R

Our reference: QX226M

Veron,

Please conduct a Pre-repair Inspection for vehicle SJZ1230R at :

Cycle & Carriage Fulco Motor Dealer Pte Ltd.

Located at 330 UBI Road 3 Singapore 408650 , Level 2 Kia Service Reception.

Please contact Chris at 96552177 for appointment.

Thanks.

Frankie Thay (Mr)
Safe Driving Manager
Automotive Engineering & Management Division
Police Logistics Department
Singapore Police Force
DID: (65) 6478 4841 | FAX: (65) 6478 4848



HOME TEAM
TRANSFORMATION 2025
One Home, One Team
Building Our Future Together

WARNING: "Privileged/Confidential information may be contained in this message. If you are not the intended addressee, you must not copy, distribute or take any action in reliance thereon. Communication of any information in this email to any unauthorized person is an offence under the Official Secrets Act (Cap 213). Please notify the sender immediately if you receive this in error."

Steve Chen (LKK Auto)

From: Mars Ler <mars.ler@ccfulco.com.sg>
Sent: Monday, March 11, 2019 9:50 AM
To: Steve Chen (LKK Auto)
Cc: Chris Bulaclac
Subject: RE: Pre-Repair Inspection for vehicle SJZ1230R

Hi Steve ,

Good morning , COR should be **S\$6045.00** (inclusive supplementary already)

Thank You,

Best regards

Mars Ler
B & P Service Advisor
Cycle & Carriage Fulco Motor Dealer Pte Ltd
330 Ubi Road 3 Singapore 408650
D/D 65949163 H/P 91792566

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	1926G
Vehicle Details	
Vehicle No.:	SJZ1230R
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Feb 2019
Vehicle Make:	KIA
Vehicle Model:	FORTE K3 1.6A
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	G4FGFH766551
Chassis No.:	KNAFZ411MF5396172
Maximum Power Output:	95.3 kW (127 bhp)
Open Market Value:	\$17,315.00
Original Registration Date:	14 May 2015
First Registration Date:	14 May 2015
Transfer Count:	0
Actual ARF Paid:	\$12,315.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 May 2025
PARF Rebate Amount:	\$9,236.00
Intended COE Rebate Details	
COE Expiry Date:	13 May 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$68,589.00
COE Rebate Amount:	\$42,536.00
Total Rebate Amount:	\$51,772.00

The information contained herein is correct as at 28 Feb 2019

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	25/02/2019 21:03
Date Of Accident	25/02/2019 12:15
Exact Location Of Accident	ALONG ROAD 1 UPPER SERANGOON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ1230R
Insured/Policyholder	
Name Of Registered Owner	MAK SIU MIN
NRIC No	S6941926G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96672069
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	KIA
Model	K3 1.6 A SX
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100412282-03
Cover Note Number	

Driver

Name of Driver	MAK IE TING, AMANDA
NRIC No	S9335657H
Date Of Birth	01/10/1993
Occupation	INDOOR
Date Of Driving Pass	15/03/2013
Driving Experience	5 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98289056
Fax Number	
Contact Number	
Email Address	IE.TING@GMAIL.COM

Address	29 KOVAN ROAD #03-30
Postcode	545022
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	RELATIVE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	DARK
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX BLOCK A , POSTCODE: 088762 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2369999 - FAX NO: 62268438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT # T/20190225/2136

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	QX226M
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	GOVERNMENT
Name of Driver	ABDUL RASHID BIN ABDULLAH
NRIC/Passport Number	S7002177C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

MOTOR ACCIDENT REPORT FORM

BASIC INFORMATION			
Date of Report:			Time :
Date of Accident:	25/02/2019		Time : 12:15
Exact Location of Accident:	ALONG ROAD 1 UPPER SEDAN 60M ROAD		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number:	SJ21230R		Name of Registered Owner : MAK SIU MIN
NRIC/Passport No./FIN:	S6941926		Company Reg. No(for Company Veh):
VEHICLE PARTICULARS			
Manufacturer :	KIA	Model:	K3
Exact Purpose for which vehicle was being use at time of Accident	<input checked="" type="checkbox"/> Normal Usage <input type="checkbox"/> Others		
Are You Claiming Under Your Own Insurance ?	<input type="checkbox"/> YES <input type="checkbox"/> NO Reporting Only <input checked="" type="checkbox"/> NO 3rd Party		
Vehicle Category	<input checked="" type="checkbox"/> Private car <input type="checkbox"/> Commercial Vehicle		
INSURANCE DETAILS			
Name of Insurance:	AIG		
Type of Coverage:	<input checked="" type="checkbox"/> Comprehensive <input type="checkbox"/> Third Party		
Policy Number:	2100412282-03		
Driver when the Accident Happen			
Name of Driver:	MAK IE HING, AMANDA		NRIC/Passport/Fin No : S9335257H
Date of Birth:	01/10/1993		Occupation : ARCHITECT
Date of Driving Pass:	15/03/2013		Gender : <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
Mobile No.:	98289056		Home No.:
Address:	24 KOVAN ROAD # 05-30 SINGAPORE		Postal Code 545022
Email Address :	IE.HING@GMAIL.COM		
Was the Driver an Employee of the Insured's Company :	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No State the relationship of the driver to insured RELATIVE		
Vehicle Registration Number of driver's Own Vehicle:			
Insurance Company :			
OTHER INFORMATION OF THE ACCIDENT			
Type of Accident :	HEAD TO HEAD		
Weather Condition:	<input type="checkbox"/> Clear <input type="checkbox"/> Raining <input checked="" type="checkbox"/> Others, please specify DARK		
Road Surface	<input checked="" type="checkbox"/> Dry <input type="checkbox"/> Wet <input type="checkbox"/> Others, please specify		
Was Anybody Injured:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Was Any other material or Property Damaged:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Number of Passengers(Including Driver) : 1
Any Accident Photo in the Scene of Accident:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Was there any video captured by your Camera? : YES
Was the Accident reported to police:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Was there any audio recording? : NO
Which Police Station:			
Was notice of Intended Prosecution given :			
DETAILS OF OTHER VEHICLE (Please fill Annex A if more vehicles involve)			
Vehicle Registration Number:	Q2206M		Name of Registered Owner :
NRIC/Passport No./FIN:			Company Reg. No(for Company Veh):
Name of Driver :	ABDUL RASHID BIN ABDULLAH		NRIC/Passport/Fin No : S7002177C
Mobile No.:			Home No.:
Address:			Postal Code
Email Address :			
Insurance Company :			
Details of Passenger if any			
Passenger Name:			
Contact Number:			
Gender			
Details of Injured Person			
Name :	Age :		
Address			
Injured Sustained :	Injured Person in which vehicle:		
Were Seatbelts worn:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Were Injured Convey to Hospital by Ambulance:	<input type="checkbox"/> Yes <input type="checkbox"/> No		

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: 28/2/19
4:45pm

Driver's Signature

(If driver is not the policyholder)

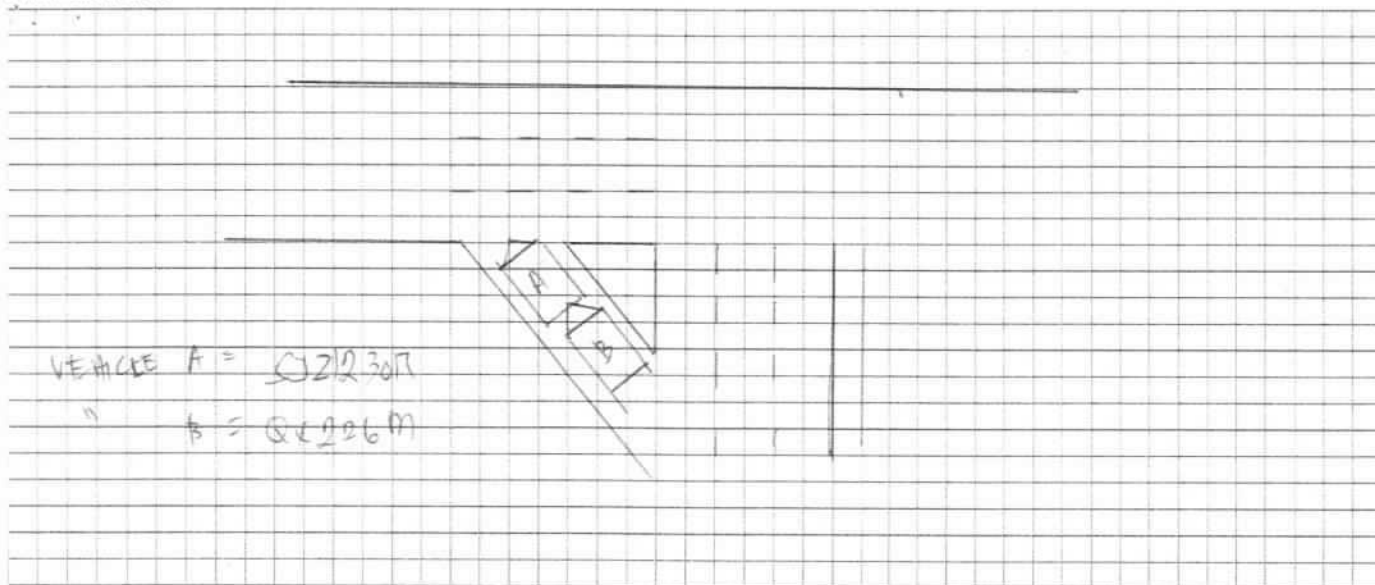
Date & Time: 28 Feb 2019, 1645hr

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


1/27/2019 10:25/2136
15.000 #

DECLARATION

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


Policyholder's Signature
Date & Time: 25/2/19 4:48 pm


Driver's Signature
(If driver is not the policyholder)
Date & Time: 25/2/19 4:48 pm


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



SINGAPORE POLICE FORCE



T/20190225/2136

1 of 3

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

Report No. T/20190225/2136

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/02/2019 15:43	Vide Report No.:	Station Diary No.: 100
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Informant's Particulars

Name of Informant: MAK IE TING, AMANDA			Address: 29 KOVAN ROAD #03-30 SINGAPORE 545022		
ID Type / ID No.: NRIC NO / S9335657H			Contact No.: Home/Office: Mobile: 98289056		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 25	Date of Birth: 01/10/1993	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Network/Infrastructure architect and engineer			Driving Licence Information: Class: 3A Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 25/02/2019 00:15	Type of Location: Straight Road
Location: Along Road 1 UPPER SERANGOON ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
QX226M	Car				Slightly Damaged	1
SJZ1230R	Car				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

CONTINUATION OF REPORT

Driver			
Name	Abdul Rashid bin Abdullah	ID No.	S7002177C
Related Vehicle	QX226M (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	MAK IE TING, AMANDA	ID No.	S9335657H
Related Vehicle	SJZ1230R (Car)	Contact No.	98289056
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 25/02/2019 at about 0015hrs, just after I turned out from Serangoon Ave 2 towards Upper Serangoon road, I felt a bump on my vehicle and when I got down, I discovered that a police vehicle QX226M had hit the rear of my vehicle. My vehicle suffered damages to the rear. My bumper had dropped slightly. the Police vehicle has slight damages to the front of the vehicle.



**SINGAPORE
POLICE FORCE**



T/20190225/2136

3 of 3

Report No. T/20190225/2136



Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: A / SI FOO SHAN YI SUNNY 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 25/02/2019 15:43
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	Classification Of Case:
Authentication Stamp NP168	



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Mak Siu Min
Period of Insurance : 14 May 2018 To 13 May 2019
Engine No. : G4FGFH766551
Chassis No. : KNAFZ411MF5396172

Vehicle No. : SJZ1230R
Policy No. : 2100412282-03
Endorsement No. :
Issued Date : 29 Mar 2018

ABOUT THE COVER

Make/Model : KIA FORTE K3 1.6 A SX
Engine Capacity/Tonnage : 1,591.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2015
Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive* :

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

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

Age Condition : All Age Condition

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Mak Siu Min - \$600 (Own Damage)

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

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501
2. Cycle & Carriage Customer Service Centre (For Windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800
3. Cycle & Carriage Customer Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play

IMPORTANT NOTES

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

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500709908

CYCLE & CARRIAGE -KEILIM(KIA)
239 ALEXANDRA ROAD
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Mobile

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

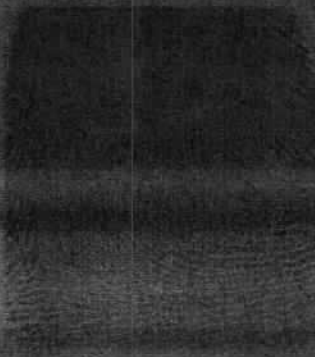
AIGSGMOBILEAPP

1000961279/AC4



0453414

NRIC No. S69419260



Grouped Expiry Date of Expiry
29-07-2011

NRIC No. S69419260 Date 24/07/2011

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S69419260



MAK SIU KIN



323

REPUBLIC OF SINGAPORE DRIVING LICENCE

S9335657H

NAME: MAK IE TING, ALKANDA

DATE OF BIRTH: 01 Oct 1993

EXPIRY DATE: 31 Dec 2019

PHOTO

BARCODE

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9335657H

NAME: MAK IE TING, ALKANDA

RACE: CHINESE

DATE OF BIRTH: 01-10-1993

COUNTRY OF BIRTH: SINGAPORE

SEX: F

PHOTO

BARCODE

4288392

12M 1A038

NO. 1A

BARCODE

DATE OF BIRTH: 01 Oct 1993

EXPIRY DATE: 31 Dec 2019

PHOTO

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSSES

Class 3A Motor cars without clutch pedal (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg

EFFECTIVE DATE: 01 Jan 2019

PHOTO

BARCODE

License No. S9335657H

OP 4288



CYCLE & CARRIAGE

CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD

EUNOS LINK SERVICE CENTRE

330 Ubi Road 3 Singapore 408650 Tel: 67461000 Fax: 64875857



8322 8813

ESTIMATE

Invoice Name & Address	Owner Name & Vehicle Info
Ms MAK SIU MIN 29 Kovan Road #03-30 Singapore 545022	Cust No/Name /Ms Mak Siu Min Reg No/Reg Date SJZ1230R / 14/05/2015 Date In/Mileage 26/02/2019/ 0 Chassis No KNAFZ411MF5396172 Engine No G4FGFH766551 Make/Model KIA/15MY F K3 1.6 A SX 695 BLACK Colour/Trim ABP / WK
Contact No Mobile: 96672069	

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
CSM00001	Cash	26/02/2019/ 15:16	Bod	303 / Renemer	19541			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
S	MIPNT88088	DIAGNOSTIC/SCANNING						250.00
S	MIPNT88088	TO CHECK LIGHTING/WIRING SYSTEM ON REAR ACCIDENT AFFECTED AREAS						800 / 100.00
S	MIPNT88088	TO REMOVE & RE-INSTALL ALL CARPETS/TRIMMING TO GIVE WAY ACCESS REPAIR ON REAR ACCIDENT AFFECTED AREAS						300 / 1200.00
S	MIPNT88088	TO REMOVE & RE-INSTALL REAR BOOT MECHANISM & COMPONENTS						X 1200.00
S	MIPNT88088	TO REPLACE REAR BUMPER, REAR BOOT, REAR END PANEL, ETC -TO REPAIR ON REAR FLOORING STRAIGHTEN, REFORM, ALIGN ON REAR ACCIDENT AFFECTED AREAS						1800 / 3600.00
S	MIPNT88088	SEALANT KIT ON NEW PANELS						100 / 300.00
S	MIPNT98088	SPRAY PAINTING ON REAR ACCIDENT AFFECTED AREAS						1260 / 2100.00
M	SUNDRY	C & C LOGO						50.00
M	SUNDRY	K3 EMBLEM						50.00
M	KS 69200 A7 070	PANEL ASSY - TRUNK L			1.00	1491.00	0.00	1491.00
M	KS 69100 A7 000	PANEL ASSY - BACK			1.00	372.00	0.00	372.00
M	KS 85770 A7 000W K	TRIM - TRANSVERSE RE			1.00	58.00	0.00	58.00
M	KS 86611 A7 010	COVER-RR BUMPER			1.00	791.00	0.00	791.00
M	KS 86695 A7 010	COVER-REAR BUMPER UP			1.00	245.00	0.00	245.00
M	KS 0G032 50 037A	FASTERNER- BUMPER			10.00	2.00	0.00	20.00
M	KS 86613 A7 000	LH, BRACKET ASSY-RR B			1.00	33.00	0.00	33.00
M	KS 86614 A7 000	RH, BRACKET ASSY-RR B			1.00	33.00	0.00	33.00
M	KS 86636 A7 000	BRACKET - REAR BEAM			2.00	5.00	0.00	10.00
M	KS 86635 A7 000	BRACKET - REAR BEAM			1.00	5.00	0.00	5.00

Confirm & accepted by

Authorized signatory and company stamp

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ESTIMATE

Invoice Name & Address	Owner Name & Vehicle Info
Ms MAK SIU MIN 29 Kovan Road #03-30 Singapore 545022 Contact No Mobile: 96672069	Cust No/Name /Ms Mak Siu Min Reg No/Reg Date SJZ1230R / 14/05/2015 Date In/Mileage 26/02/2019/ 0 Chassis No KNAFZ411MF5396172 Engine No G4FGFH766551 Make/Model KIA/15MY F K3 1.6 A SX 695 BLACK Colour/Trim ABP / WK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00001	Cash	26/02/2019/ 15:16	Bod	303 / Renemer	19541

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M KS 95720 A7 5019 P ULTRASONIC SENSOR AS ?	4.00	172.00	0.00	688.00
M KS 95420 A7 100 ANTENNA ASSY-SMARTKE ?	1.00	69.00	0.00	69.00
M KS 87321 A7 000 WEATHERSTRIP - TRUNK / CRU	1.00	100.00	0.00	100.00
P KS 81230 A7 020 LATCH ASSY - TRUNK L / BT	1.00	112.00	0.00	112.00
M WFFORTE FORTE EMBLEM / NEC	1.00	40.00	0.00	40.00
M KS 86310 A7 050 LOGO ASSY - KIA SUB / NEC	1.00	37.00	0.00	37.00

Z NOTES

ACCIDENT ON 25/02/2019 ALONG ROAD 1 UPPER SERANGOON ROAD

OWNER CLAIMING THIRD PARTY

REQUIRED REPLACEMENT CAR

TP# QX226M

Estimate

Supp

Repair Reinforced rear

13719

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:

Confirm & accepted by

Parts	4,104.00
Labour	0.00
Standard Menu	0.00
Specialist Job	8,750.00
Others (Lub, etc)	0.00
Sundry	100.00
Total (w/o GST)	12,954.00

Authorized signatory and company stamp

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**ESTIMATE**

Invoice Name & Address	Owner Name & Vehicle Info														
SPF Accident Claim Section Automotive Engineering & Managem Division - Police Logistics Dept 1 Mount Pleasant Road Block 8 Old Police Academy Contact No 64784840	<table> <tr> <td>Cust No/Name</td><td>/Ms Mak Siu Min</td></tr> <tr> <td>Reg No/Reg Date</td><td>SJZ1230R / 14/05/2015</td></tr> <tr> <td>Date In/Mileage</td><td>26/02/2019/ 44610</td></tr> <tr> <td>Chassis No</td><td>KNAFZ411MF5396172</td></tr> <tr> <td>Engine No</td><td>64FGFH766551</td></tr> <tr> <td>Make/Model</td><td>KIA/15MY F K3 1.6 A SX 695 BLACK</td></tr> <tr> <td>Colour/Trim</td><td>ABP / WK</td></tr> </table>	Cust No/Name	/Ms Mak Siu Min	Reg No/Reg Date	SJZ1230R / 14/05/2015	Date In/Mileage	26/02/2019/ 44610	Chassis No	KNAFZ411MF5396172	Engine No	64FGFH766551	Make/Model	KIA/15MY F K3 1.6 A SX 695 BLACK	Colour/Trim	ABP / WK
Cust No/Name	/Ms Mak Siu Min														
Reg No/Reg Date	SJZ1230R / 14/05/2015														
Date In/Mileage	26/02/2019/ 44610														
Chassis No	KNAFZ411MF5396172														
Engine No	64FGFH766551														
Make/Model	KIA/15MY F K3 1.6 A SX 695 BLACK														
Colour/Trim	ABP / WK														

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
F0000093	Credit	08/03/2019/ 14:46	Bod	218 / MarsLer	19541			
Description of Goods/ Services					Qty	Unit Price	Disc%	Amount
S	MIPNT88088	DIAGNOSTIC/SCANNING						250.00
S	MIPNT88088	TO CHECK LIGHTING/WIRING SYSTEM ON REAR ACCIDENT AFFECTED AREAS						80.00
S	MIPNT88088	TO REMOVE & RE-INSTALL ALL CARPETS/TRIMMING TO GIVE WAY ACCESS REPAIR ON REAR ACCIDENT AFFECTED AREAS						300.00
S	MIPNT88088	TO REPLACE REAR BUMPER,ETC -CUT & RE-WELD REAR END PANEL STRAIGHTEN,REFORM,ALIGN ON REAR ACCIDENT AFFECTED AREAS						1800.00
S	MIPNT88088	SEALANT KIT ON NEW PANELS						100.00
S	MIPNT98088	SPRAY PAINTING ON REAR ACCIDENT AFFECTED AREAS						1260.00
M	SUNDRY	C & C LOGO						50.00
M	SUNDRY	K3 EMBLEM						50.00
P	KS 69100 A7 000	PANEL ASSY - BACK	DD		1.00	372.00	0.00	372.00
M	KS 85770 A7 000W K	TRIM - TRANSVERSE RE	CRU		1.00	58.00	0.00	58.00
P	KS 86611 A7 010	COVER-RR BUMPER	DD		1.00	791.00	0.00	791.00
P	KS 86695 A7 010	COVER-REAR BUMPER UP	CUT		1.00	245.00	0.00	245.00
P	KS 0G032 50 037A	FASTERNER- BUMPER	NEC		10.00	2.00	0.00	20.00
P	KS 86636 A7 000	BRACKET - REAR BEAM	NEC		2.00	5.00	0.00	10.00
P	KS 86635 A7 000	BRACKET - REAR BEAM	NEC		1.00	5.00	0.00	5.00
M	KS 87321 A7 000	WEATHERSTRIP - TRUNK	CRU		1.00	100.00	0.00	100.00
P	KS 81230 A7 020	LATCH ASSY - TRUNK L	BT		1.00	112.00	0.00	112.00
P	WFFORTE	FORTE EMBLEM	NEC		1.00	40.00	0.00	40.00
P	KS 86310 A7 050	LOGO ASSY - KIA SUB	NEC		1.00	37.00	0.00	37.00
P	KS 86631 A7 000	BEAM-RR BUMPER	(Supp) RR (M)		1.00	365.00	0.00	365.00

Confirm & accepted by

Re-Finalization

Authorized signatory and company stamp

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**ESTIMATE**

Invoice Name & Address	Owner Name & Vehicle Info
SPF Accident Claim Section	Cust No/Name /Ms Mak Siu Min
Automotive Engineering & Managem	Reg No/Reg Date SJZ1230R / 14/05/2015
Division - Police Logistics Dept	Date In/Mileage 26/02/2019/ 44610
1 Mount Pleasant Road	Chassis No KNAFZ411MF5396172
Block 8 Old Police Academy	Engine No G4FGFH766551
Contact No 64784840	Make/Model KIA/15MY F K3 1.6 A SX 695 BLACK
	Colour/Trim ABP / WK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
F0000093	Credit	08/03/2019/ 14:46	Bod	218 / MarsLer	19541
Description of Goods / Services		Qty	Unit Price	Disc%	Amount

Z NOTES
 ACCIDENT ON 25/02/2019 ALONG ROAD 1 UPPER SERANGOON ROAD
 OWNER CLAIMING THIRD PARTY
 LOSS OF RENTAL R.A#22170
 TP# QX226M

Estimate

Confirm & accepted by

Re-Finalization.

Authorized signatory and company stamp

Parts	2,155.00
Labour	0.00
Standard Menu	0.00
Specialist Job	3,790.00
Others(Lub,etc)	0.00
Sundry	100.00
Total(w/o GST)	6,045.00

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EUNOS LINK SERVICE CENTRE

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**ESTIMATE**

Invoice Name & Address	Owner Name & Vehicle Info
SPF Accident Claim Section	Cust No/Name /Ms Mak Siu Min
Automotive Engineering & Managem	Reg No/Reg Date SJZ1230R / 14/05/2015
Division - Police Logistics Dept	Date In/Mileage 26/02/2019/ 44610
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Block 8 Old Police Academy	Engine No G4FGFH766551
Contact No 64784840	Make/Model KIA/15MY F K3 1.6 A SX 695 BLACK
	Colour/Trim ABP / WK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
F0000093	Credit	08/03/2019/ 08:50	Bod	323 / ChrisBulaclac	19541

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
P KS 86631 A7 000 BEAM-RR BUMPER	1.00	365.00	0.00	BRQ 365.00
Z NOTES				
SUPPLEMENTARY ITEM				

Estimate

Confirm & accepted by

Supplementary

Authorized signatory and company stamp

Parts	365.00
Labour	0.00
Standard Menu	0.00
Specialist Job	0.00
Others (Lub, etc)	0.00
Sundry	0.00
Total (w/o GST)	365.00

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LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
AUTOMOTIVE ENGINEERING & MGT DIVISION		Ref : CS/SPF19003760/Etd3e2		
ACCIDENT CLAIM SECTION (SPORE POLICE FORCE)1 MOUNT PLEASANT ROAD BLK 8 OLD POLICE ACADEMYSINGAPORE 298333 ATTN : FRANKIE THAY		Date : 15-03-2019		
		Code : SPF		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	QX 226M	Veh. Inspected	SJZ 1230R	
Policy No.		Coverage (\$)	0.00	
Claim No.	AEMD/105/009/2019/009	Excess (\$)	0.00	
Assign From	FRANKIE THAY	Assign Date	28/02/2019	
2. Vehicle Particulars & Condition				
Make & Model	KIA FORTE	c.c	1591	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	KNAFZ411MF5396172	Colour	BLACK	
Odometer	44591	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	215/45 R17	NEXEN	7 mm	
L/H Front Tyre	215/45 R17	NEXEN	7 mm	
R/H Rear Tyre	215/45 R17	NEXEN	7 mm	
L/H Rear Tyre	215/45 R17	NEXEN	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	25/02/2019	Inspection Date	28/02/2019	
Survey held at	CYCLE & CARRIAGE.FULCO MOTOR DEALER PL NO.330 UBI ROAD 3 SINGAPORE 408650			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		7 Working Days		



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TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJZ 1230R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	PANEL ASSY - TRUNK L (SN)	TO REPAIR SEE LABOUR	1,491.00	-
1	PANEL ASSY - BACK (SN)	DENTED	372.00	372.00
1	TRIM - TRANSVERSE RE (SN)	CRUMPLED	58.00	58.00
1	COVER - RR BUMPER (SN)	DENTED	791.00	791.00
1	COVER - REAR BUMPER UP (SN)	CUT	245.00	245.00
10	FASTERNER - BUMPER (SN)	NECESSARY	20.00	20.00
1	LH, BRACKET ASSY - RR B (SN)	NOT NECESSARY	33.00	-
1	RH, BRACKET ASSY - RR B (SN)	NOT NECESSARY	33.00	-
2	BRACKET - REAR BEAM (SN)	NECESSARY	10.00	10.00
1	BRACKET - REAR BEAM (SN)	NECESSARY	5.00	5.00
4	ULTRASONIC SENSOR AC (SN)	NOT NECESSARY	688.00	-
1	ANTENNA ASSY - SMARTKE (SN)	NOT NECESSARY	69.00	-
1	WEATHERSTRIP - TRUNK (SN)	CRUMPLED	100.00	100.00
1	LATCH ASSY - TRUNK L (SN)	BENT	112.00	112.00
1	FORTE EMBLEM (SN)	NECESSARY	40.00	40.00
1	LOGO ASSY - KIA SUB (SN)	NECESSARY	37.00	37.00
1	BEAM - RR BUMPER (SN) (ADDITIONAL)	BROKEN	365.00	365.00
			4,469.00	2,155.00
<u>LABOUR</u>				
DIAGNOSTIC / SCANNING.			250.00	250.00
TO CHECK LIGHTING / WIRING SYSTEM ON REAR ACCIDENT AFFECTED AREAS.			100.00	80.00
TO REMOVE & RE-INSTALL ALL CARPETS/TRIMMING TO GIVE WAY ACCESS REPAIR ON REAR ACCIDENT AFFECTED AREAS.			1,200.00	300.00
TO REMOVE & RE-INSTALL REAR BOOT MECHANISM & COMPONENTS.		NOT NECESSARY	1,200.00	-
TO REPLACE REAR BUMPER, REAR BOOT, REAR END PANEL, ETC.			3,600.00	1,800.00
-TO REPAIR ON REAR FLOORING.				
STRAIGHTEN, REFORM, ALIGN ON REAR ACCIDENT AFFECTED. INCLUSIVE OF THE REPAIR OF PANEL ASSY - TRUNK.				
SEALANT KIT ON NEW PANELS.			300.00	100.00
SPRAY PAINTING ON REAR ACCIDENT AFFECTED AREAS.			2,100.00	1,260.00

Report Ref No. CS/SPF19003760/Etd3e2



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TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	C & C LOGO.		50.00	50.00
	K3 EMBLEM.		50.00	50.00
			8,850.00	3,890.00
GRAND TOTAL			13,319.00	6,045.00
RECOMMENDED COST OF REPAIRS				6,045.00

Report Ref No. CS/SPF19003760/Etd3e2

NOTES : THE ESTIMATED UPPER RANGE OF REPAIR COST FOR THE DAMAGED VEHICLE IS IN THE REGION OF \$6,000-\$7,000

CHEN TSUE YEE

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.