

Surveyor

REF: CS/A/G19011943/K19d362

Special Instruction:

ASSIGNMENT (Office)

Lump Sum \$9600

From (Person): Lee Ming Yao George of A/G Date/Time: 5/7/17 1107HRS
Estimated Cost: Bill to:

Third Parties:

Claimant:

Surveyor: Precision Appraisal Service

Workshop: Eng Hup Seng Motor

OD/TP (Re-inspection) / Evaluation

To Inspect Vehicle No: SLP1266S

Insured: SD22291D

at Workshop m/s

Tel: 97468368 Tan Chun Heong (Owner)

of 36 Changi South st 1 S (486766)

Policy No:

Claim No: 1217381690SG-003

Sum Insured:

Excess:

Make of Veh:

D.O.A.

(Client's Record)

8/7/19 11:15am

25/4/19

H.O.D. Endorsement/Date:

Date/Time:

Person Contacted:

Vehicle IN / OUT

Date/Time: 11/7/19

Confirmed with Mr Lye

Final Fig. 454600

4 days

(Red \$ 5000, 520%; Original 6 days)

Date/Time:

Submit Final Fig

days

(Red \$ 1, 1%; Original 6 days)

Date/Time

Action/Instruction

SLP1266S X

RECEIVED 11 JUL 2019

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value :

Inspected/
Evaluated by:

Fee Charged:

Date:

Basic & Add
Transport
Photos
Others
Total

200

200

1) Date/Time 11/7/19

File Pass to

2) Date/Time

File Return to

3) Date/Time

File Pass to

4) Date/Time

File Return to

5) Date/Time

File Pass to

6) Date/Time

File Return to

Our Ref : 1217381690SG-003 | Request for Re-inspection on TPV SLP1266S DOA 25/04/2019

From: Lee, Ming-Yao

To: assignments, Admin-D (LKKAUTO)

Cc:

Sent: 7/5/2019 11:07:06 AM

Attachments:  1217381690SG - PRS Photos.pdf  1217381690SG - TP GIA Report.pdf  1217381690SG - OI GIA Report.pdf  TP Survey Report - 1217381690SG.PDF

Hi Team,

Referring email with Florence, please acknowledge and confirm on the assignment of re-inspection.

Attached are supporting documents for your reference.

Thank you.

Regards,

Lee Ming Yao, George

AIG

Complex Claims Examiner

Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1769

Ming-Yao.Lee@AIG.com | www.aig.sg

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Catherine Chong (LKK Auto)

From: Florence KOH <florencekohef@yahoo.com.sg>
Sent: Friday, 5 July, 2019 11:19 AM
To: Assignments; Admin-D LKK Auto
Cc: Ming-Yao Lee
Subject: confirmation of reinspection - Our Ref : 1217381690SG-003 | Your Ref :CKK/ck/ACC/10494/19 | Request for Re-inspection

Dear Summer

We refer to our telephone conversation on 5th July 2019 @ 11.14am.

We confirm the reinspection date for our client's vehicle SLP 1266S.

Date: 8th July 2019 (Monday)

Time: 11.15am

Place: at our owner's work place

36 Changi South Street 1, S486766

Person to contact : Tan Chun Heong (owner)

Contact number: 97468368

Thank you
Florence
K K CHENG & CO
Tel: 6227 1272
Fax: 6227 5563

On Friday, 5 July 2019, 10:58:10 am GMT+8, Lee, Ming-Yao <MingYao.Lee@aig.com> wrote:

Hi Florence,

I have copied the surveyor in the loop and they will confirm with you shortly.

Thank You.

Regards,

Lee Ming Yao, George

AIG

Complex Claims Examiner
Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1769

Ming-Yao.Lee@AIG.com | www.aig.sg

From: Florence KOH [mailto:florencekohef@yahoo.com.sg]

Sent: Friday, July 05, 2019 10:45 AM

To: Lee, Ming-Yao

Subject: [EXTERNAL] arrange for reinspection - Our Ref : 1217381690SG-003 | Your Ref :CKK/ck/ACC/10494/19 | Request for Re-inspection

This message is from an external sender; be cautious with links and attachments.

Dear Ming Yao

We refer to your email dated 3rd July 2019.

Kindly arrange for your surveyor to conduct the reinspection on the following date and time:-

Date: 8th July 2019 (Monday)

Time: 11.15am

Place: Eng Hup Seng Motor

Block 1, No 2 Pandan Loop, Pandan Light Industries Park, S128219

Kindly confirm the reinspection date and time urgently.

Thank you

Florene

K K CHENG & CO

Tel: 6227 1272

On Wednesday, 3 July 2019, 03:18:13 pm GMT+8, Lee, Ming-Yao <MingYao.Lee@aig.com> wrote:

Without Prejudice

Save as to Costs

Hi Florence,

We refer to above mentioned accident claim. We would like to request for a re-inspection on your client's vehicle.

Please let us know 7 days in advance for our arrangement.

Meanwhile, please hold hands.

Thank You.

Regards,

Lee Ming Yao, George

AIG

Complex Claims Examiner

Claims | AIG Asia Pacific Insurance Pte. Ltd

AIG Building, 78 Shenton Way #08-16 Singapore(079120)

Tel +(65) 6419 1769

MingYao.Lee@AIG.com | www.aig.sg



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Hi Florence,

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Thank You.

Regards,
Lee Ming Yao, George
AIG
Complex Claims Examiner
Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1769

Ming-Yao.Lee@AIG.com | www.aig.sg

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Tel: 6227 1272

Fax: 6227 5563

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Without Prejudice

Save as to Costs

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Meanwhile, please hold hands.

Thank You.

Regards,

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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 | 25/04/2019 14:42 |
| Date Of Accident | 25/04/2019 07:15 |
| Exact Location Of Accident | AFTER EUNOS JUNCTION TOWARDS MARINE PARADE |
| Country/State of Loss | SINGAPORE |

| DETAILS OF OWN VEHICLE | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SDZ2291D |
| Insured/Policyholder | |
| Name Of Registered Owner | CHAN WIE SEN |
| NRIC No | S7205766Z |
| Email Address | WIESENC@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-96160168 |
| Alternative Phone No | Others-96160168 |

| Vehicle Particulars | |
|--|--------------------------------------|
| Manufacturer | MAZDA |
| Model | MAZDA 6 |
| 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? | YES |
| If No, Please state action to be taken | |
| Vehicle Category | PRIVATE CAR |
| Insurance Company | |
| Name of Insurance Company | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 2100502303-02 |
| Cover Note Number | |

| Driver | |
|----------------------|-----------------------|
| Name of Driver | CHAN WIE SEN |
| NRIC No | S7205766Z |
| Date Of Birth | 21/02/1972 |
| Occupation | INDOOR |
| Date Of Driving Pass | 04/09/1991 |
| Driving Experience | 27 YEARS AND 7 MONTHS |

| | |
|---|----------------------|
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-96160168 |
| Fax Number | |
| Contact Number | OTHERS-96160168 |
| Email Address | WIESENC@GMAIL.COM |
| Address | NO. 62 JALAN PERGAM |
| Postcode | 488338 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|--------------------------|
| Type Of Accident | COLLISION - HEAD TO REAR |
| Weather Conditions | CLEAR |
| Road Surface | DRY |

Other Information

| | |
|---|---|
| Was any foreign vehicle involved in this accident? | NO |
| Number of vehicles (including own vehicle) involved in the accident | 3 |
| Was any body injured in the Accident? | NO |
| Was any injured conveyed to hospital by ambulance? | NO |
| Was any other material or property damaged? | NO |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO |
| Number of Passengers (Including Driver) | 2 |
| Passenger 1 | Name: : AURANE MAISONWAVE Gender: : Female |

Details of Police Action

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

Circumstances of Accident

REFER TO SKETCH PLAN AND STATEMENT

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 | SLX5129L |
| Vehicle Make/Model/Colour | KIA CARENS |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | PETER NG AH CHUAN |

| | |
|-------------------------------------|-----------|
| NRIC/Passport Number | S1471154F |
| Contact Number | 92366578 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | 1 |

| | |
|-------------------------------------|--|
| DETAILS OF OTHER VEHICLE PROPERTY 2 | |
|-------------------------------------|--|

| | |
|-------------------------------------|----------------------|
| Vehicle Registration Number | SLP1266S |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | TAN CHUN HEONG |
| NRIC/Passport Number | S7010982D |
| Contact Number | 97468368 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | 2 |
| Passenger 1 | Name: : Gender: : |

Sketch Plan

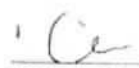
SKETCH PLAN


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:

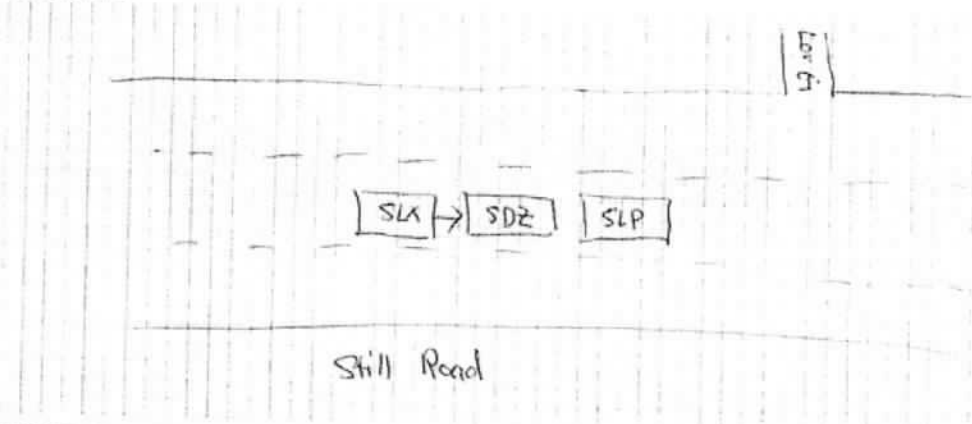
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Stop along Still Road (after Senes Junction) toward Marine Parade,
at 2nd lane from left for traffic light.

SLX5129L hit my car from the back when I just stop my car.
The impact pushing my car forward and hit another car
SLP1266S.

DECLARATION

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

Policyholder's Signature
Date & Time: 25/4/19
11:11 am

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

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

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 | 25/04/2019 16:47 |
| Date Of Accident | 25/04/2019 07:20 |
| Exact Location Of Accident | STILL ROAD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------------------------------------|
| Vehicle Registration Number | SLP1266S |
| Insured/Policyholder | |
| Name Of Registered Owner | TAN CHUN HEONG@KHAIRIL TAN CHUN HEONG |
| NRIC No | S7010982D |
| Email Address | CHUNHEONG@LIVE.COM |
| Mobile Phone No | (LOCAL) +65-97468368 |
| Alternative Phone No | OTHERS-97468368 |

Vehicle Particulars

| | |
|--|-------------------------------------|
| Manufacturer | BMW |
| Model | 520I 2.0L AT D/AB 2WD 4DR GAS/D NAV |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE USE |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | THIRD PARTY |
| Vehicle Category | PRIVATE CAR |

Insurance Company

| | |
|---------------------------|--------------------------------------|
| Name of Insurance Company | MSIG INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | A80434111 QMX |
| Cover Note Number | |

Driver

| | |
|----------------------|---------------------------------------|
| Name of Driver | TAN CHUN HEONG@KHAIRIL TAN CHUN HEONG |
| NRIC No | S7010982D |
| Date Of Birth | 04/04/1970 |
| Occupation | INDOOR |
| Date Of Driving Pass | 15/03/1994 |
| Driving Experience | 25 YEARS AND 1 MONTH |
| Gender | MALE |
| Mobile Number | +65-97468368 |
| Fax Number | |
| Contact Number | OTHERS-97468368 |
| Email Address | CHUNHEONG@LIVE.COM |

| | |
|---|-----------------------|
| Address | 87 FLORA DRIVE #04-59 |
| Postcode | 506889 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|-----------------|
| Type Of Accident | CHAIN COLLISION |
| 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 | 3 |
| 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) | 2 |
| Passenger 1 | NAME: : SRI AMELIA GENDER: : FEMALE |

Details of Police Action

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

Circumstances of Accident

REFER TO BELOW STATEMENT/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 |

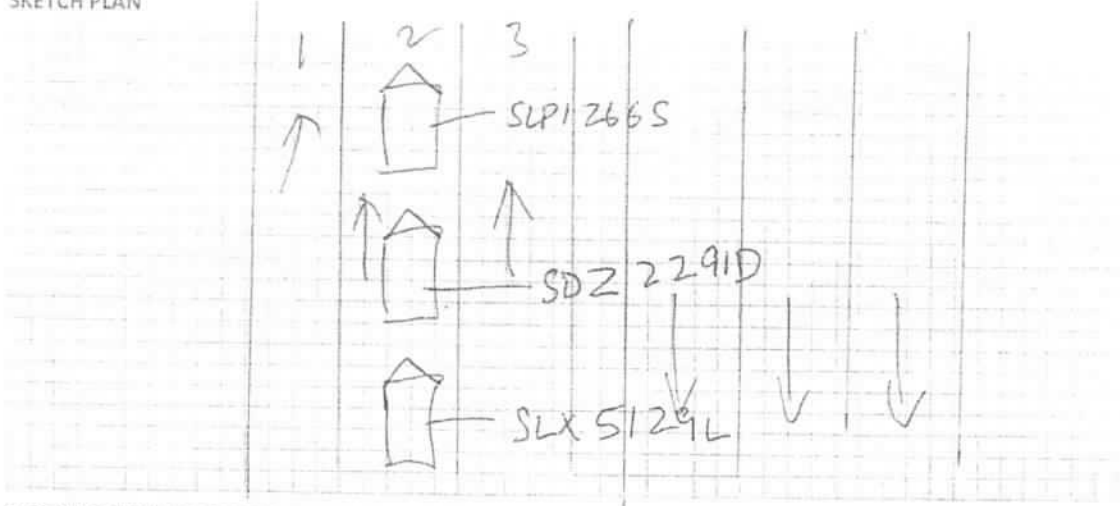
DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-------------------------------------|------------------------------|
| Vehicle Registration Number | SDZ2291D |
| Vehicle Make/Model/Colour | MAZDA6 WAGON 2.5L SP.6EAT SR |
| 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 OTHER VEHICLE PROPERTY 2

| | |
|-------------------------------------|-----------------------------------|
| Vehicle Registration Number | SLX5129L |
| Vehicle Make/Model/Colour | KIA CARENS 1.7 DCT DIESEL 5DR FWD |
| 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) | |

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

my car was moving slow and suddenly heard a loud bang on my back.

DECLARATION

(We declare the foregoing particulars are true in every respect)


 Police Officer's Signature
 Date & Time

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

IDAC KAKI BUKIT (VAC)
 23 Kaki Bukit Ave 4
 Singapore 415933
 Tel: 67416697 Fax: 67492305
 Email: vackb@singnet.com.sg

Reporting Centre Personnel's Signature
 Name
 NPIC/ID No

25 APR 2019

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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vac@singnet.com.sg
Name:
NRIC/FIN:

25 APR 2019



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048550
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours: Monday to Friday, 09:00 - 17:00
 UEN, S56320010G / GST Reg. No. M-5001771

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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: _____ Vehicle Registration No: 3LP1266S
 Name (as shown in NRIC): Tan Chun Heong a Khari NRIC/FIN/Passport No: 870109820
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore()
 Contact (Tel): _____ Mobile No.: 97468368
 Email Address: _____
 Date of Accident: 25.04.2019 Time of Accident: 02.20
 Place of Accident: 8th Road
 Insurance Company: M8y

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

update owner hp no: 97468368

update passenger gender to female.

Policyholder / Driver's Signature
 Date: _____

IDAC KAKI BUKIT (VAC)
 Reporting Centre: 28 Kaki Bukit Ave 4
 Name: Singapore 415933
 NRIC/Fin No: Tel: 67416697 Fax: 67492305
 Date: Email: vackb@singnet.com.sg

永 合 成 摩 哆
ENG HUP SENG MOTOR

Block 1, No. 2, Pandan Loop, Pandan Light Industries Park, Singapore 128219
Tel: 777 2755 Fax: 778 5243

PHOTOCOPY

Your ref:

Our ref:

Date:

17 May 2019

TAN CHUN HEONG@KHAIRIL TAN CHUN HEONG
C/O Block 1, No.2 Pandan Loop,
Pandan Light Industries Park, Singapore 128219

FINAL REPAIR BILL FOR VEHICLE NO. SLP 1266 S

Lump Sum Repair \$9,600.00



PRECISION APPRAISAL SERVICES

Insurance Loss Assessors/ Adjusters Cargo Surveyors & Licensed Appraisers

227 Simei St 4 #06-42 Singapore 520227 Fax: 6444 4886 Company Registration No. 53139926E

To:

TAN CHUN HEONG@KHAIRIL TAN CHUN HEONG

C/O Block 1, No.2 Pandan Loop, Pandan Light Industries Park, Singapore 128219

Invoice No.: 190501

DATE : 17 May 2019

| DESCRIPTION | | AMOUNT |
|--|-----------------------------------|------------------------|
| Vehicle Registration No. : SLP 1266 S Type of Claims : Third Party Claims Our Reference No. : PAS/EHS/190501/TP Your Reference No. : - Inspection Report Fees : (including transportation charges & photographs) Reinspection Report Fees : - Transportation Charges : - Additional Photographs : - Others (Specify) : - | | \$810.00 |
| DOLLARS | EIGHT HUNDRED AND TEN ONLY | TOTAL: \$810.00 |



PRECISION APPRAISAL SERVICES

PRECISION APPRAISAL SERVICES

Insurance Loss Assessors/ Adjusters Cargo Surveyors & Licensed Appraisers

27 Simei St 4 #06-42 Singapore 520227 Fax: 64444886 Company Registration No. 53139926E



AUTOMOBILE INSPECTION REPORT

To:

TAN CHUN HEONG@KHAIRIL TAN

CHUN HEONG

**C/O Block 1, No.2 Pandan Loop, Pandan
Light Industries Park, Singapore 128219**

REFERENCE

Assigned By : As Above
Accident Date : 25 April 2019
Assignment Date : 29 April 2019
Inspection Date : 29 April 2019
Our Reference No. : PAS/EHS/190501/TP

PARTICULARS OF VEHICLE

Registration No. : SLP 1266 S
Make/Model : BMW 520I 2.0L AT D/AB 2WD 4DR GAS/D NAV
Yr of Manuf/Regn : 2012
Carrying Capacity : 4Seater
Chassis No. : WBAXG12040DV99231
Engine No. : A0490059N20B20B
Colour : Metallic Black
Class : Passenger (Private)

INSURANCE DETAILS

Insured : -
Policy No. / Claim No. : -
Sum Insured : -
Excess Clause : -
Windscreen Coverage : -
Type of Claims : Third Party Claims
Third Party Insurer : -
Third Party Policy No. : -

Inspection Report Date : 17 May 2019

Workshop Name :

ENG HUP SENG MOTOR

Inspection Address :

**Block 1, No.2 Pandan Loop, Pandan Light
Industries Park, Singapore 128219**

Mileage : 181759 Km/h
Radio/Casette : Fitted
CD Disc Player : Fitted
Air Conditioner : Fitted
Clock : Fitted
Seat Belt : Fitted
Wing Mirror Other : Fitted
Accessories : Fitted

PRE-ACCIDENT CONDITION (Static Check Only)

Body Work : Good
Paint Work : Good
Handbrake : Serviceable
Footbrake : Serviceable
Steering : Serviceable
Any Apparent : None
Eng Modifications

VEHICLE VALUE

Market Value : APPROXIMATELY \$67,000.00
Wreck Value (Parf) : APPROXIMATELY \$47,500.00

TYRE SIZE & CONDITION

Front N/s Size : 245/35ZR20 80 %
Make : DUNLOP
Rear N/s size : 275/30ZR20 80 %
Make : DUNLOP
Spare Size : 275/30ZR20 80 %
Make : DUNLOP

Front O/s Size : 245/35ZR20 80 %
Make : DUNLOP
Rear O/s Size : 275/30ZR20 80 %
Make : DUNLOP
Spare Size :
Make :
Jack & Tools : Intact/Missing

Type of Wheel Rims: Alloy

PRECISION APPRAISAL SERVICES

Insurance Loss Assessors / Adjusters Cargo Surveyors & Licensed Appraisers



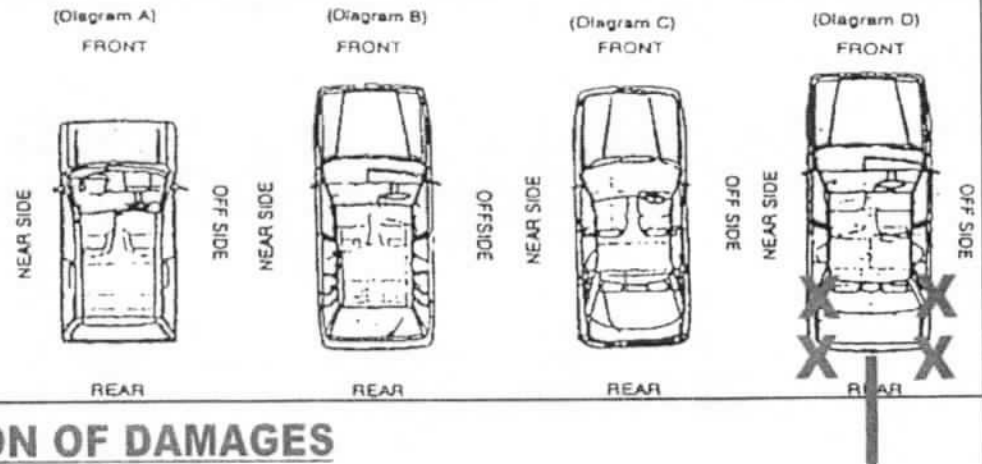
VEHICLE REGISTRATION NO. : SLP 1266 S

APPENDIX A

POINT OF IMPACT

Direction of impact/damage marked (→) (X)

The vehicle sustained impact On its Rear Portion. (see Diagram D)



GENERAL DESCRIPTION OF DAMAGES

Parts damaged were :

The bootlid and hinges, rear bumper and reinforcement, both rear fenders and chassis, rear panel were dented.

ADJUSTMENTS & RECOMMENDATIONS

A static inspection was carried out on 29/04/2019 & our report is here with enclosed for your perusal.

The Repairs Estimate submitted by M/s Eng Hup Seng Motor as per attached Appraisement Schedule have been revised and scrutinised thoroughly by us & in our opinion, we consider it to be fair and reasonable. The repairer has agreed to effect repairs to the owners satisfaction & to roadworthy condition on an agreed Lump Sum Repair Basis of \$ 9,600.00 after deducting the Policy Excess Clause of \$ NA.

As instructed, we have not authorised any of the repairs on your behalf.

| | Repairer's | | Our | |
|---------------------|------------|--------|----------|--------|
| | Estimate | Amount | Revised | Amount |
| Spares Parts | 11702 | 45 | 9418 | 25 |
| Towing Charges | X | X | X | X |
| PB Labour Charges | 1400 | 00 | 980 | 00 |
| Others Misc Charges | 650 | 00 | 440 | 00 |
| Paintwork | 1400 | 00 | 1200 | 00 |
| Total | \$ 15152 | 45 | \$ 12038 | 25 |

Under normal circumstances, the duration of repairs should not exceed Six (06) days excluding Pre - Repair Inspection (PRI) / Pre - Repair Survey (PRS) waiting time frame & Public Holidays

Attached photographs taken during inspection Sixty - Three (63) Photographs.

SPECIAL REMARKS

1. The inspection was conducted on a 'without prejudice' basis
2. On 30/04/2019, we examined the extent of damages
3. On 06/05/2019, we examined the repaired vehicle.

Yours Faithfully,



TF NG PHILIP FOO
ACII CAE, AMIMI

VEHICLE REGN NO : SLP 1266 S
 OUR REFERENCE : PAS/EHS/190501/TP

APPRAISEMENT SCHEDULE

INSPECTION REPORT DATE : 17-May-19

CONTINUATION SHEET NO : 1

| S/No | Qty | Parts / Labour Descriptions | Remarks / Condition | Repairer's Estimate Amount | Recommendation / Revised Amount |
|------|------|--|---------------------|----------------------------|---------------------------------|
| | | <u>PARTS SUPPLY - LIST ITEMS</u> | | \$ cts | \$ cts |
| 1 | 1pc | Bootlid | Badly dented | 1381.80 | 1381.80 |
| 2 | 1pc | Bootlid centre logo | Necessary | 59.00 | 59.00 |
| 3 | 1pc | Bootlid '523i' emblem | Necessary | 51.00 | 51.00 |
| 4 | 2pcs | Bootlid hinges@\$103.95 | Bent | 207.90 | Repair |
| 5 | 1pc | Bootlid sealant | Necessary | 33.80 | 33.80 X |
| 6 | 1pc | Bootlid sound insulation | Necessary | 266.55 | 266.55 X no page |
| 7 | 1pc | Bootlid central lock motor | Serviceable | 763.50 | - |
| 8 | 1pc | Bootlid upper lock | Serviceable | 425.35 | - |
| 9 | 1pc | Bootlid lower lock | Serviceable | 110.20 | - |
| 10 | 1pc | Bootlid trimboard | Serviceable | 281.55 | - |
| 11 | 1set | Bootlid trimboard clips | Necessary | 40.00 | 40.00 X |
| 12 | 2pcs | Bootlid reverse lamp@\$30.85 | Cracked | 61.70 | 61.70 X no page |
| 13 | 2pcs | Bootlid no. plate lamp@\$123.30 | Cracked | 246.60 | 246.60 X no page |
| 14 | 2pcs | Taillamp@\$389.70 | Cracked | 779.40 | 779.40 X no page |
| 15 | 1pc | Boot rubber | Torn | 110.80 | 110.80 X no page |
| 16 | 2pcs | Bootlid reflector@\$318.90 | Cracked | 637.80 | 637.80 X no page |
| 17 | 1pc | Rear panel | Badly dented | 1341.65 | 1341.65 X repair |
| 18 | 1pc | Rear panel top garnish | Torn | 114.45 | 114.45 X no page |
| 19 | 1pc | Rear panel inner garnish | Torn | 124.45 | 124.45 X no page |
| 20 | 1pc | Rear bumper | Badly dented | 1341.65 | 1341.65 |
| 21 | 2pcs | Rear bumper reflector@\$130.85 | Cracked | 261.70 | 261.70 X no page |
| 22 | 2pcs | Rear bumper bracket, top@\$58.45 | Bent | 116.90 | 116.90 |
| 23 | 2pcs | Rear bumper bracket, lower@\$71.85 | Bent | 143.70 | 143.70 |
| 24 | 1set | Rear panel garnish clips | Necessary | 12.80 | 12.80 X |
| 25 | 1set | Rear panel rivet | Necessary | 80.00 | 80.00 X |
| 26 | 1pc | Rear panel sealant | Necessary | 281.55 | 281.55 X |
| 27 | 1pc | Rear bumper carrier | Badly dented | 631.60 | 631.60 X repair |
| 28 | 1pc | Rear bumper centre reinforcement | Badly dented | 702.55 | 702.55 |
| 29 | 2pcs | Rear bumper mounting@\$139.45 | Bent | 278.90 | 278.90 X no page |
| 30 | 2pcs | Rear bumper tow cover@\$21.80 | Torn | 43.60 | 43.60 X repair |
| 31 | 4pcs | Rear bumper sensor@\$192.50 | Dented | 770.00 | 770.00 700 |
| | | | | 11702.45 | 9913.95 |
| | | Less: 5% discount | | - | 495.70 |
| | | | | 11702.45 | 9418.25 |
| | | <u>LABOUR & MISC. CHARGES</u> | | | |
| 1 | | Remove the necessary affected parts, cut/weld rear panel, straighten both rear fenders and chassis, bootlid hinges and replace parts | | 1400.00 | 700 980.00 |
| 2 | | Putty and spraypaint on all affected parts | | 1400.00 | 800 1200.00 |
| 3 | | Rewire reverse camera | | 50.00 | 30.00 X |
| 4 | | Remove and refit reverse camera | | 100.00 | 60.00 X |
| 5 | | Check electrical | | 100.00 | 80.00 40 |
| 6 | | Tuff Kote | | 100.00 | 60.00 30 |
| 7 | | Remove and refit bootlid components including auto-tailgate | | 150.00 | 120.00 60 |
| 8 | | Remove and refit rear bumper sensors | | 100.00 | 60.00 40 |
| 9 | | Rewire rear portion | | 50.00 | 30.00 X |
| | | Note: Recommended lump sum repair at \$9,600.00nett | | | |
| | | | SUB / GRAND TOTAL | 15152.45 | 12038.25 |

4/5 \$4600 / 4 days.

PRECISION APPRAISAL SERVICES

**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 | | | |
|--|--------------------------------|------------------------------|---|
| AIG ASIA PACIFIC INSURANCE PTE LTD | | Ref : CS/AIG19011943/K1qd3e2 | |
| 78 SHENTON WAY #08-16 CHARTIS BUILDING SINGAPORE 079120 | | Date : 12-07-2019 |  |
| ATTN : LEE MING YAO | | Code : AIG | |
| 1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION) | | | |
| Insured Veh. | SDZ 2291D | Veh. Inspected | SLP 1266S |
| Policy No. | 2100502303-02 | Coverage (\$) | 0.00 |
| Claim No. | 1217381690SG-003 | Excess (\$) | 0.00 |
| Assign From | LEE MING YAO | Assign Date | 05/07/2019 |
| 2. Vehicle Particulars & Condition | | | |
| Make & Model | B.M.W. 520i | c.c | 1997 |
| Engine No. | HIDDEN | Year of Reg. | 2012 |
| Chassis No. | WBAXG12040DV99231 | Colour | BLACK |
| Odometer | 185354 | Steering | IN ORDER |
| Brakes | IN ORDER | Modification | SPORTS RIM |
| General | GOOD | | |
| 3. Conditions of Tyres | | | |
| | Size | Make | Balance |
| R/H Front Tyre | 275/30Z R20 | DUNLOP | 7 mm |
| L/H Front Tyre | 275/30Z R20 | DUNLOP | 7 mm |
| R/H Rear Tyre | 275/30Z R20 | DUNLOP | 7 mm |
| L/H Rear Tyre | 275/30Z R20 | DUNLOP | 7 mm |
| 4. Description of Damages | | | |
| THE VEHICLE HAD COMPLETED ITS REPAIR WORKS. REPAIR CONDITION SEE DETAILS. | | | |
| 5. General Information | | | |
| Accident Date | 25/04/2019 | Inspection Date | 08/07/2019 |
| Survey held at | 36 CHANGI SOUTH ST 1 S(486766) | | |
| Repairer | ENG HUP SENG MOTOR | | |
| 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: | | 4 Working Days | |



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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLP 1266S

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|-------------------------------------|---------------------|---------------------------|-------------------|
| | <u>REPLACEMENT OF PARTS</u> | | | |
| 1 | BOOTLID | REPLACED | 1,381.80 | 1,381.80 |
| 1 | BOOTLID CENTRE LOGO | REPLACED | 59.00 | 59.00 |
| 1 | BOOTLID '523I' EMBLEM | REPLACED | 51.00 | 51.00 |
| 2 | BOOTLID HINGES @\$103.95 | REPAIRED SEE LABOUR | 207.90 | - |
| 1 | BOOTLID SEALANT | NOT NECESSARY | 33.80 | - |
| 1 | BOOTLID SOUND INSULATION | NO DAMAGE | 266.55 | - |
| 1 | BOOTLID CENTRAL LOCK MOTOR | SERVICEABLE | 763.50 | - |
| 1 | BOOTLID UPPER LOCK | SERVICEABLE | 425.35 | - |
| 1 | BOOTLID LOWER LOCK | SERVICEABLE | 110.20 | - |
| 1 | BOOTLID TRIMBOARD | SERVICEABLE | 281.55 | - |
| 1 | SET BOOTLID TRIMBOARD CLIPS | NOT NECESSARY | 40.00 | - |
| 2 | BOOTLID REVERSE LAMP @\$30.85 | NO DAMAGE | 61.70 | - |
| 2 | BOOTLID NO. PLATE LAMP @\$123.30 | NO DAMAGE | 246.60 | - |
| 2 | TAILLAMP @\$389.70 | NO DAMAGE | 779.40 | - |
| 1 | BOOT RUBBER | NO DAMAGE | 110.80 | - |
| 2 | BOOTLID REFLECTOR @\$318.90 | NO DAMAGE | 637.80 | - |
| 1 | REAR PANEL | REPAIRED SEE LABOUR | 1,341.65 | - |
| 1 | REAR PANEL TOP GARNISH | NO DAMAGE | 114.45 | - |
| 1 | REAR PANEL INNER GARNISH | NO DAMAGE | 124.45 | - |
| 1 | REAR BUMPER | REPLACED | 1,341.65 | 1,341.65 |
| 2 | REAR BUMPER REFLECTOR @\$130.85 | NO DAMAGE | 261.70 | - |
| 2 | REAR BUMPER BRACKET, TOP @\$58.45 | REPLACED | 116.90 | 116.90 |
| 2 | REAR BUMPER BRACKET, LOWER @\$71.85 | REPLACED | 143.70 | 143.70 |
| 1 | SET REAR PANEL GARNISH CLIPS | NOT NECESSARY | 12.80 | - |
| 1 | SET REAR PANEL RIVET | NOT NECESSARY | 80.00 | - |
| 1 | REAR PANEL SEALANT | NOT NECESSARY | 281.55 | - |
| 1 | REAR BUMPER CARRIER | REPAIRED SEE LABOUR | 631.60 | - |
| 1 | REAR BUMPER CENTRE REINFORCEMENT | REPLACED | 702.55 | 702.55 |
| 2 | REAR BUMPER MOUNTING @\$139.45 | NO DAMAGE | 278.90 | - |

Report Ref No. CS/AIG19011943/K1qd3e2

**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

Page No.:2 of 2

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|--|---|---------------------|---------------------------|-------------------|
| 2 | REAR BUMPER TOW COVER @\$21.80 | REPAIRED SEE LABOUR | 43.60 | - |
| 4 | REAR BUMPER SENSOR @\$192.50 | REPLACED | 770.00 | 700.00 |
| | LESS 5% DISCOUNT | | - | -224.83 |
| | | | 11,702.45 | 4,271.77 |
| | LABOUR | | | |
| | REMOVE THE NECESSARY AFFECTED PARTS, CUT / WELD REAR PANEL, STRAIGHTEN BOTH REAR FENDERS AND CHASSIS, BOOTLID HINGES AND REPLACE PARTS. INCLUSIVE OF THE REPAIR OF BOOTLID HINGES, REAR PANEL, REAR BUMPER CARRIER AND REAR BUMPER TOW COVER. | | 1,400.00 | 700.00 |
| | PUTTY AND SPRAYPAINT ON ALL AFFECTED PARTS. | | 1,400.00 | 800.00 |
| | REWIRE REVERSE CAMERA. | NOT NECESSARY | 50.00 | - |
| | REMOVE AND REFIT REVERSE CAMERA. | NOT NECESSARY | 100.00 | - |
| | CHECK ELECTRICAL. | | 100.00 | 40.00 |
| | TUFF KOTE. | | 100.00 | 30.00 |
| | REMOVE AND REFIT BOOTLID COMPONENTS INCLUDING AUTO-TAILGATE. | | 150.00 | 60.00 |
| | REMOVE AND REFIT REAR BUMPER SENSORS. | | 100.00 | 40.00 |
| | REWIRE REAR PORTION. | NOT NECESSARY | 50.00 | - |
| | | | 3,450.00 | 1,670.00 |
| GRAND TOTAL | | | 15,152.45 | 5,941.77 |
| RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (AMOUNT AGREED AND ACCEPTED BY REPAIRER) | | | | 4,600.00 |

Report Ref No. CS/AIG19011943/K1qd3e2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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