	ASSIGNMENT (C			
stimated Cost:	F MG Date/Time _	6/8/2019	HS! 14200 Third Parties: Claimant:	00.00
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		01===	Workshop: Twir	car Automotive
Workshop m/s Twincar A	utomotive insured:	STF 763-	4 B	
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lient's Record)	D.O.A.	15/08/	3018	
		11.0	D.D. Ezdorsement/Date:	
Date/Time: Po	rson Contacted:\	ehicle IN / OUT		
Date/Time: Confirme	d with Final Fig	, days (Red	s / %: Or	iginal Qtana
Pate/Time: Submit F	nal Fig,days	(Red \$/	%; Original	days)
te/Time Action/Instruction				
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SIF 7634B	- MA /INCIRDIA 9 40/13		ADA - ISI E I I	
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			/	1 X
ara(1): Parts found not re	placed (To highlight I	R or UB, LR,	Etc)	
				-
ara(2) : Comments on con	sistency of damages (Parts		t : NC)	
ara(3) : Nett Value				
			E . 01	
Market Value	Inspected/		Fee Charged: Basic & Add	Date:
Salvage Value :	Evaluated	by:	Transport	150
			Photos	
Nett Value :_			Others Total	190
	ass to 2) Date/Tim	e E	ile Return to	170
) Date/Time File P	ass to 4) Date/Tim		ile Return to	
) Date/TimeFile P	ass to 6) Date/Tim		ile Return to	

## Nivitha (LKK Auto)

From:

Gan, Angiegeokling < Angiegeokling. Gan@aig.com>

Sent:

Tuesday, 6 August 2019 3:01 PM

To:

Admin-D (LKKAuto); SUR; assignments

Subject:

Paper re-survey / Our ref. 9910659755SG-003 / Accident involving SLF7634B and

SKR9305L on 15/08/2018

Attachments:

survey report.pdf; SLF7634B\_OI.PDF; SKR9305L\_TP.PDF; PRI.PDF

Dear LKK,

We wish to seek your urgent assistance with paper re-survey.

Please find attached GIA reports, TP's survey report and PRI photos.

If you need any other information, please let me know.

Kindly acknowledge this email.

Thank you.

Best Regards,

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

AIG Building, 78 Shenton Way, #08-16. Singapore 079120 Tel +(65) 6419 1013

Angiegeokling Gan@aig.com | www.aig.sg

AIG Asia Pacific won General Insurance Company of the Year at the 22nd Asia Insurance Industry Awards. Click here to find out more.

#### IMPORTANT NOTICE

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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.

Thomson Rd Post Office PO Box 029 Singapore 915701. Tel: 645 31173, Fax: 645 36131.

Report No: 0242-19-TCA

21 May 2019

## ACCIDENT VEHICLE SURVEY REPORT

Teong Zhi Xiong Blk 467 North Bridge Road #11-5047 Singapore 190467

## VEHICLE INFORMATION:

Vehicle Reg No .:

SKR9305L

Odometer:

159040km

Make & Model:

Mercedes Benz C180

Colour:

Grev

Chassis number:

WDD2040452A681671

Date of accident:

15/08/2018

Year of Regn.:

30/04/2012

Date inspected:

18/08/2018

Repairer at:

Twincar Automotive Pte Ltd Date inspected (After Repair):

25/08/2018

2 Kaki Bukit Ave 2 #01-17

Kaki Bukit Auto Hub Singapore 417921

## STATIC CHECKS, where applicable:

Steering:

serviceable

Footbrake:

serviceable

Handbrake:

serviceable

Paintwork:

Good

General condition:

Good

#### TIRE CONDITION:

LH / Make

RH / Make

Size

Front:

5mm/Dunlop

5mm/Dunlop

225/40ZR16

Rear:

5mm/Dunlop

5mm/Dunlop

225/40ZR16

## POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the rear RH portion.

Please see details as described in the Annex for parts and labour.

## REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

## Parts and Labour Assesment

PARTS

Description of part	Qty	Condition	Repairer's estimate	Our adjustment	
REAR BUMPER	1	squashed	1,350.00	1,350.00	
REAR BUMPER CENTER BRACKET	1	repair	265.00	0.00	HH
REAR BUMPER CENTER CHROME MOULDING	1	deformed here	180.00	180.00	-
REAR BUMPER CHROME MOULDING L/R	2	deformed the	260.00	260.00	
REAR BUMPER SIDE RETAINER L/R	2	necessary	76.00	76.00	ны
REAR RH ABS SENSOR	1	shorted	375.00	375.00	1495
REAR RH CONTROL ARM (FRONT)	1	bent	325.00	325.00	_
REAR RH CONTROL ARM (REAR)	1	bent	325.00	325,00	-
REAR RH DRIVE SHAFT	1	bent	1,780.00	1,780.00	bipl
REAR RH FENDER	1	buckled	1,900.00	1,900.00	_
REAR RH FENDER INNER AIR VENT	1	fractured	25.00	25.00	MH
REAR RH FENDER INNER SHIELD	1	fractured	165.00	165.00	HH
REAR RH FENDER INNER TRIM	1	deformed	660,00	660.00	HL
REAR RH KNUCKLE ARM	1	distorted	952.00	952.00	-
REAR RH KNUCKLE BEARING 7247	1	dislodged	156.00	156.00	-
EAR RH LOWER ARM	1	bent	425.00	425.00	-
REAR RH KNUCKLE ARM REAR RH KNUCKLE BEARING REAR RH LOWER ARM REAR RH SHOCK ABSORBER	1	bent	816.00	816.00	-
REAR RH SHOCK ABSORBER TOP MOUNTING	1	necessary	278.00	278.00	trel
REAR RH SPORT RIM	1	abraded	1,850.00	1,850.00	R
REAR RH STABILIZER LINK	1	bent	115.60	115.60	-
REAR RH TAILLAMP	1	fractured	535.00	535.00	HH
REAR RH TAILLAMP INNER RUBBER GASKET	1	necessary	18.00	18.00	HI
REAR RH TAILLAMP LOWER BRACKET	1	bent	65.00	65.00	HU
REAR RH UPPER ARM	1	bent	265.00	265.00	-
REAR WINDSCREEN SEAL	1	necessary	180.00	180.00	-
	Subtota	il before discount	S\$ 13,341.60	S\$ 13,076.60	
Percentage discount 10% and 10%			S\$ 1,334.16	S\$ 1,307.66	
		Sub-total 1	S\$ 12,007.44	S\$ 11,768.94	
REAR BUMPER CLIPS - SET	1	necessary	100.00	100:00	30
REAR BUMPER REVERSE SENSOR - SET	1	shorted	700.00	700,00	her
REAR RH 225/40ZR18 TYRE	1	abraded	600.00	600,00	MH
EAR RH FENDER INNER SHIELD CLIPS - SET	1	necessary	60.00	60.00	HH
REAR RH FENDER INNER TRIM CLIPS - SET	1	necessary	60.00	60.00	HH
REAR WINDSCREEN SEALANT	1	necessary	100.00	100:00	40
	Subtota	al before discount	S\$ 1,620.00	S\$ 1,620.00	
		Sub-total 2	S\$ 1,620.00	S\$ 1,620.00	
		Parts-total	SS 13,627.44	SS 13,388.94	

## LABOUR

Labour Total Parts & Labour Total	SS 4,270.00 SS 17,897.44	SS 3,290.00 SS 16,678.94
To apply anti-rust chemical on repaired and replaced panel.	120.00	_60.00-40
To provide labour, workmanship to change the above damaged bodyparts, repair, re- construct and re-align body structure, body alignments and damaged consistent to the accident.	1,500,00	1,250.00 600 -
To re-spray painting on the change bodyparts, repair portion, and where consistent to the accident.	1,500.00	1,000.00 500
To remove, reinstall roof top trim upholstery, cushion seat, trim garnish, trim liner carpet. (to FR)	140.00	120.00 80 -
To remove, reinstall petrol tank. (to FR)	80,00	80.00 Fall
To road test driving, check and resetting wheel alignments system	180,00	180:00 60
To remove, change rear suspension parts, axle carriage, absorber, lower arm, top arm, trailing arm, knuckle arm, wheel bearing, bearing hub and etc.	480,00	400:00 180
To remove, reinstall windscreen (REAR)	150.00	120.00
To remove, reinstall electrical wiring harness, check lighting and rewire for parking sensor.	120.00	89:00 40 -

Results of inspection of the accident vehicle are as shown above.

We have taken into consideration the age and condition of the vehicle in our recommendation.

Hence, the recommended cost of repairs based on Lump Sum repairs is : SS 14,200,00 and the recommended number of working days for the repairs is within 9 day(s).

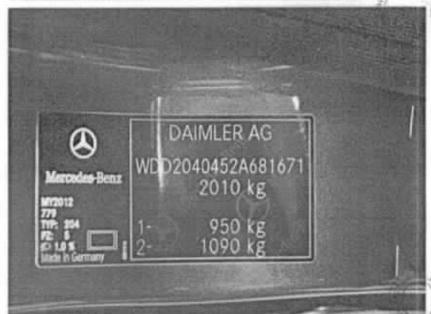
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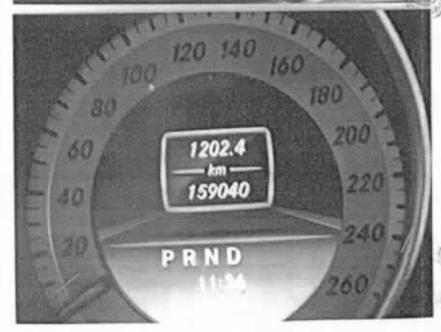
Automotive Appraiser

821464

7 days.





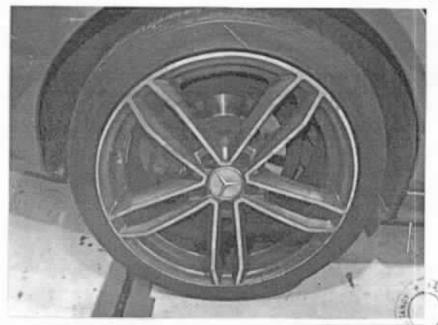






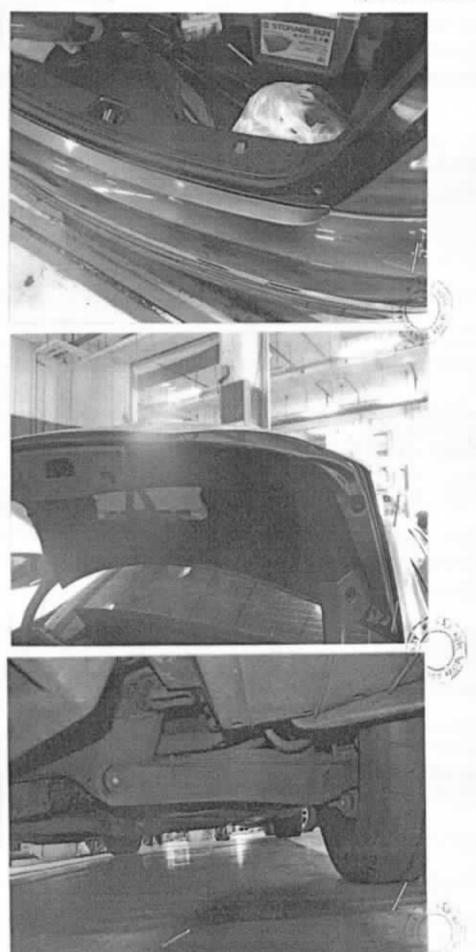


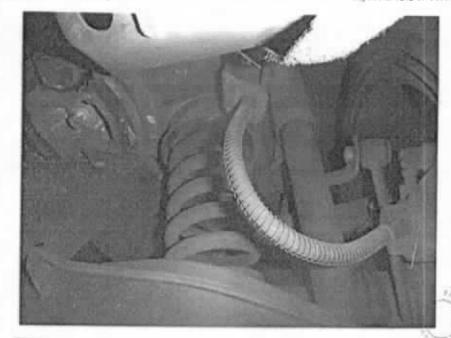














Thomson Rd Past Office PO Box 029 Singapore 915701. Tel: 645 31173, Fax: 645 36131.

Report No: 0242-19-TCA

21 May 2019

## ACCIDENT VEHICLE SURVEY REPORT

Teong Zhi Xiong Blk 467 North Bridge Road #11-5047 Singapore 190467

## VEHICLE INFORMATION:

Vehicle Reg No.	SKR9305L	Odometer	159040km
Make & Model	Mercedes Benz C180	Colour:	Grev
Chassis number:	WDD2040452A681671	Date of accident:	15/08/2018
Year of Regn	30/04/2012	Date inspected:	18/08/2018
Repairer at:	Twincar Automotive Ptc Ltd 2 Kaki Bukit Ave 2 #01-17	Date inspected (After Repair):	25/08/2018
	2 Kaki Dukit /4/4 2 901+1/		

Kaki Bukit Auto Hub Singapore 417921

## RE-INSPECTION

We had carried out re-inspection during works in progress and post repair inspection on the above vehicle.

Attached in Annex B are the re-inspection photos, showing the work in progress and our re-inspection to the hidden part that were damaged.

## REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Gender

Mobile Number

Fax Number Contact Number

EMail Address

- Please report <u>correctly</u> 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.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurence Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 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.

Mark the state of the state of	ACCIDENT STATEMENT
Date Of Report	16/08/2018 15:20
Date Of Accident	15/08/2018 17:20
Exact Location Of Accident	BLK 123 TOA PAYOH LOR 1 CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKR9305L
Insured/Policyholder	
Name Of Registered Owner	TEONG ZHI XIONG
NRIC No	S93258471
Email Address	WIZMEDIAPRODUCTION@GMAIL.COM
Mobile Phone No	(LOCAL) +65-84182475
Alternative Phone No	OTHERS-84182475
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180
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 HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094227018
Cover Note Number	
Driver	
Name of Driver	TEONG ZHI XIONG
NRIC No	\$93258471
Date Of Birth	17/07/1993
Occupation	OUTDOOR
Date Of Driving Pass	09/04/2014
Driving Experience	4 YEARS AND 4 MONTHS
Conder	****

MALE

(LOCAL) +65-84182475

WIZMEDIAPRODUCTION@GMAIL.COM

OTHERS-84182475

BLK 467 NORTH BRIDGE ROAD Address

#11-5047 190467

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

Postcode

Insurance Company of Driver's Own Vehicle

#### General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR

Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

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

NO

Number of Passengers (Including Driver)

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

PLS REFER TO THE ATTACHED STATEMENT.

#### 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

SLF7634B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NG CHIN HENG

NRIC/Passport Number

Contact Number

97525724

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **DETAILS OF INJURED PERSON 1**

Name

TEONG ZHI XIONG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SLIGHT

SKR9305L

YES

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
- 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 ladgment 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)

Lunderstand, 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 vehicles) 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.
  - 10 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 being about delivery of the same as well as on the evternal cover of envisiones/mail packagesic and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes"
- (2) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to spliest, 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 QIA 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

(4) for complying with requirements under any regulations, laws or court orders.

Policyfiolded's Denature

Clate & Time

Driver's Signature

if driver is not the policy-older) Date & Time:

Report

- 16/08/18

NRICFIN No.

#### Individual Statement

## SKETCH PLAN

BLK 123 Tex Reych Let 1	(B) 3KR 9305 L (B) 3KF 7634B
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#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On	5/05/18 at C	1720 48	of ourse of	enough the may
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LARATION				
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4				
#	7		Lyn	16/08/18
and some	Driver's Strature		Separate Carrie	
& Tone	it driver is not the poil		reporting centre	Personnel's lignature











## **Accident Photo**







#### SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

Fax Number Contact Number EMail Address

- 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 <u>truthful</u> and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.

ELICOPERA PROPERTY	ACCIDENT STATEMENT
Date Of Report	16/08/2018 16:32
Date Of Accident	15/08/2018 16:15
Exact Location Of Accident	TOA PAYOH BLOCK 126 OSCP
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLF7634B
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66944919
Vehicle Particulars	
Manufacturer	TOYOTA
Model	AXIO
Exact Purpose for which vehicle was being used at time of accident	HIRER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995142
Cover Note Number	
Driver	
Name of Driver	NG CHIN HENG
NRIC No	S1328897F
Date Of Birth	27/06/1958
Occupation	OUTDOOR
Date Of Driving Pass	06/10/1978
Driving Experience	39 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90106639
And the state of t	

NOEMAIL

Address

6 BENOLSECTOR

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

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 involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

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 FOLLOWING ATTACHED, THANK YOU. COLLISION - INSURED REVERSE HIT TP

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

SKR9305L

Vehicle Make/Model/Colour Details Of Properties

VEHICLE B

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 Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

- I. Please report correctly the details of the accident to speed up the claims process.
- 1. This Form must be completed by the Policyholder and/or the Authorised Oriver
- Information provided must be as truthful and accurate as assailed. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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 Puller for investigation
- The report will be forwarded by the insurers of the GIA flaconds Management Centra established by the General Insurance Association of Singapors (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the inturers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- B. Consent under the Personal Data Protection Act (POPA)

l understand, acknowledge, agree and consent that

- (a) My insurer, my workship and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/paramal 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 lime, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - processing, handling and/or dealing with my claims including the settlement of the slaims 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 this same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administraing, 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 Purposet; and
- (c) my Personal information may/can be distinged by any of the treaters and/or GIA to their third perty service provides an agents (including their lawyers/few firms), which may be sited outside of Singapore, for one or more of the above flugouss.
- (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.
- (a) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing read, 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

The second sections in

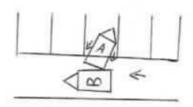
Oriver's Signature (If driver is not the policybolder) Date & Time: **EDMOND** 

Reporting Centre Personnel's Senstare Martie: mRIC/Fib No.

## Sketch Plan Pg. 2

Tool poych Black 126 OSCP

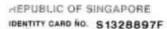
SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was neversing out from the parking h	th I had check my minus
and there is nothing behind me have I purewished felt or impart out the near myst portion of m	to newse out, Suddenly I
CLARATION	
te develope the foregoing particulars are true in every respect.	EDMOND
Cylindider's Signature & Oriver's Signature (If driver is not the policyholder) Dete & Time:	Reporting Contre Personnel's Signature Name: NRIC/Fex No.:

#### Sketch Plan Pg. 3







NG CHIN HENG

27-06-1958

SINGAPORE







## VOCATIONAL LICENCE

Licence No : 51328807F

NG CHIN HENG

Issue Date : 5/7/2005

Please visit www.lta.gov.sg to check the status of this vocational licence





AG USE ONLY

24-12-2011

APT BLK 123 LORONG 1 TOA PAYON 903-901 SINGAPORE 310123

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

VMG USE BNLYTAXE VL

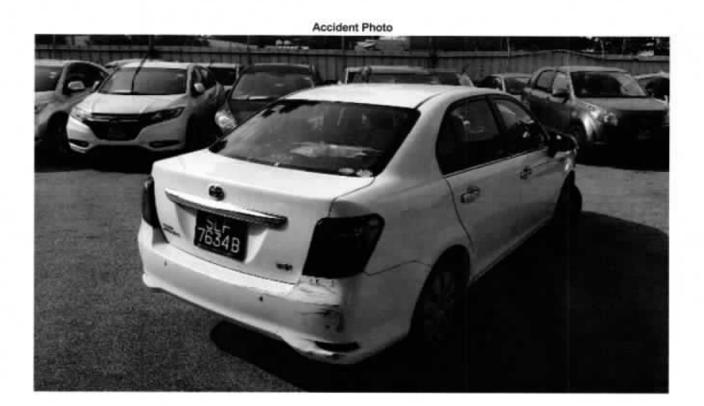
This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surmovered to LTA on request. If found, please secure to LTA, TO Set Many Drive. Singapore 575701.

Type

Japus Date 05/07/2005





















51 UBI AVE 1, #01/02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 6256 3561 FAX: (065) 6256 4315

Your Ref: 9910659755SG-003

Date: 15th Aug 2019

Our Ref: CS1/AIG19013829/Dsd3e2

#### M/s AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #08-16 Chartis Building Singapore 079120

Attn: Angie Gan

Dear Sir / Madam,

## EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: SKR 9305L

INSURED VEHICLE: SLF 7634B ACCIDENT DATE: 15/08/2018

We thank you for your instruction on 06/08/2019.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of SLR 9305L from M/s Par Automotive Consultancy.
- Singapore Accident Statement of Vehicle SKR 9305L and SLF 7634B.
- c) Colour damaged vehicle photographs of SKR 9305L.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number

: SKR 9305L

Make & Model

: Mercedes Benz C 180 Kompressor

Year of Registration

: 2012

Chassis Number

: WDD2040452A681671

Engine Capacity

: 1597 cc

- We recommend that the repairs of the entire damage require about \_\_\_\_\_\_ 7 (Seven) \_\_\_\_\_ working days to complete.
- We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



## 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 3

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKR 9305L

ty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	SQUASHED	1,350.00	1,350.00
1	REAR BUMPER CENTER BRACKET	NOT NECESSARY	265.00	3
1	REAR BUMPER CENTER CHROME MOULDING	NECESSARY	180.00	180.00
2	REAR BUMPER CHROME MOULDING L/R	NECESSARY	260.00	260.00
2	REAR BUMPER SIDE RETAINER L/R	NOT NECESSARY	76.00	9.
1	REAR RH ABS SENSOR	NOT NECESSARY	375.00	
1	REAR RH CONTROL ARM (FRONT)	BENT	325.00	325.00
1	REAR RH CONTROL ARM (REAR)	BENT	325.00	325.00
1	REAR RH DRIVE SHAFT	NOT NECESSARY	1,780.00	3
1	REAR RH FENDER	BUCKLED	1,900.00	1,900.00
1	REAR RH FENDER INNER AIR VENT	NOT NECESSARY	25.00	· " s
1	REAR RH FENDER INNER SHIELD	NOT NECESSARY	165.00	
1	REAR RH FENDER INNER TRIM	NOT NECESSARY	660.00	3
1	REAR RH KNUCKLE ARM	DISTORTED	952.00	952.00
1	REAR RH KNUCKLE BEARING	DISLODGE	156.00	156.00
1	REAR RH LOWER ARM	BENT	425.00	425.00
1	REAR RH SHOCK ABSORBER	BENT	816.00	816.00
1	REAR RH SHOCK ABSORBER TOP MOUNTING	NOT NECESSARY	278.00	13
1	REAR RH SPORT RIM	TO REPAIR SEE LABOUR	1,850.00	8
1	REAR RH STABILIZER LINK	BENT	115.60	115.60
1	REAR RH TAILLAMP	NOT NECESSARY	535.00	:4
1	REAR RH TAILLAMP INNER RUBBER GASKET	NOT NECESSARY	18.00	13
1	REAR RH TAILLAMP LOWER BRACKET	NOT NECESSARY	65.00	ā
1	REAR RH UPPER ARM	BENT	265.00	265.00
1	REAR WINDSCREEN SEAL	NECESSARY	180.00	180.00
	LESS 10% DISCOUNT		-1,334.16	-724.96
			12,007.44	6,524.64
	SPECIAL NETT ITEMS			
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	100.00	30.00
1	SET REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	700.00	3

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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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	REAR RH 225/40ZR18 TYRE (SN)	NOT NECESSARY	600.00	-
1	SET REAR RH FENDER INNER SHIELD CLIPS (SN)	NOT NECESSARY	60.00	
1	SET REAR RH FENDER INNER TRIM CLIPS (SN)	NOT NECESSARY	60.00	1
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	100.00	40.00
	W 2		1,620.00	70.00
	LABOUR			
	TO REMOVE, REINSTALL ELECTRICAL WIRING HARNESS, CHECK LIGHTING AND REWIRE FOR PARKING SENSOR.		120.00	40.00
	TO REMOVE, REINSTALL WINDSCREEN(REAR)		150.00	120.00
	TO REMOVE, CHANGE REAR SUSPENSION PARTS, AXLE CARRIAGE, ABSORBER, LOWER ARM, TOP ARM, TRAILING ARM, KNUCKLE ARM, WHEEL BEARING, BEARING HUB AND ETC.		480.00	180.00
	TO ROAD TEST DRIVING, CHECK AND RESETTING WHEEL ALIGNMENTS SYSTEM.		180.00	60.00
	TO REMOVE, REINSTALL PETROL TANK (TO FR).	NOT NECESSARY	80.00	10
	TO REMOVE, REINSTALL ROOF TOP TRIM UPHOLSTERY, CUSHION SEAT, TRIM GARNISH, TRIM LINER CARPET (TO FR).		140.00	80.00
	TO RE-SPRAY PAINTING ON THE CHANGE BODYPARTS, REPAIR PORTION, AND WHERE CONSISTENT TO THE ACCIDENT.		1,500.00	500.00
	TO PROVIDE LABOUR, WORKMANSHIP TO CHANGE THE ABOVE DAMAGED BODYPARTS, REPAIR, RECONSTRUCT AND RE-ALIGN BODY STRUCTURE, BODY ALIGNMENTS AND DAMAGED CONSISTENT TO THE ACCIDENT. INCLUSIVE OF THE REPAIR OF REAR RH SPORT RIM.		1,500.00	600.00
	TO APPLY ANTI-RUST CHEMICAL ON REPAIRED AND REPLACED PANEL.		120.00	40.00
			12	-
			5.5	
			4,270.00	1,620.00
	GRAND TOTAL		17,897.44	8,214.64

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RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)	6	,550.00
(1011011LE-ACCIDENT CONDITION)		

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ANG BRYAN TANI

Automotive Assessor / Investigator

St. S.

ADRIAN LING WAI PING

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

Licensed Appraiser

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