REF CS3/AIGIBOIDO Dale / Tol 20 | 08 | 2019 AIG To Inspect Vehicle No 01-17 118 BIK 2 Kaki Bukit Ne 2 6097407800SG Policy No. 2100473514 Claim No: Sum Insured Excess 14/05/2018 Make of Veh (* Recent) CA / REV / REP. / REV 24 HRS 14p) Date/Time 11.45mm 4 616 Person Contacted Vehicle (N) OUT Action/Instruction (X) Estimate Date/Time

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RECEIVED 0 5 UL 2018

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Service Servic		1			7072	

Nivitha (LKK Auto)

From:

Syed-Yusoff, Saliha <Saliha.Syed-Yusoff@aig.com>

Sent:

Tuesday, 20 August 2019 8:26 AM

To:

Celine Fong (LKKAuto)

Cc:

Admin-D (LKKAuto); SUR

Subject:

RE: ref: 6097407800SG-003 II TP vehicle no. SKD8899U [DOA: 14/05/18] ** URGENT

Attachments:

SAS2407350.PDF; 6097407800SG TP survey report.pdf

Importance:

High

Dear Celine,

Please assist with the paper adjustment as we have received LOD from TP Lawyer.

Kind Regards, Saliha

Saliha Syed Yusoff

AIG

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

AIG Building,78 Shenton Way #08-16, Singapore 079120 Tel +(65) 6419 1917 |

www.aig.sg

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From: Celine Fong (LKKAuto) [mailto:celinefong@lkkauto.com]

Sent: Monday, August 19, 2019 4:53 PM

To: Syed-Yusoff, Saliha <Saliha.Syed-Yusoff@aig.com>

Cc: Admin-D (LKKAuto) <admin-d@lkkauto.com>; SUR <sur@lkkauto.com>

Subject: [EXTERNAL] RE: ref: 6097407800SG-003 II TP vehicle no. SKD8899U [DOA: 14/05/18] ** URGENT

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

Dear Saliha,

We have conducted the resurvey on dismantle and after repair. All photographs had uploaded in Merimen.

Best Regards,

Celine Fong

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: celinefong@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Syed-Yusoff, Saliha <Saliha.Syed-Yusoff@aig.com>

Sent: Monday, 19 August 2019 9:27 AM

To: Admin-D (LKKAuto) admin-d@lkkauto.com">s; SUR <sur@lkkauto.com

Subject: ref: 6097407800SG-003 II TP vehicle no. SKD8899U [DOA: 14/05/18] ** URGENT

Importance: High

Dear Team,

Please confirm how many round of survey carried out for PRI?

Kind Regards, Saliha

Saliha Syed Yusoff

AIG

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

AIG Building,78 Shenton Way #08-16, Singapore 079120 Tel +(65) 6419 1917 | www.aig.sg

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number

Contact Number

EMail Address

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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 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.
- 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	16/05/2018 12:27
Date Of Accident	14/05/2018 21:05
Exact Location Of Accident	OPEN CARPARK OF BLK 167
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKD8899U
Insured/Policyholder	
Name Of Registered Owner	NG KWANG SENG
NRIC No	S7923647J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96668889
Alternative Phone No	OFFICE-64558989
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	SLK250
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA068129
Cover Note Number	
Driver	
Name of Driver	NG KWANG SENG
NRIC No	S7923647J
Date Of Birth	12/08/1979
Occupation	INDOOR
Date Of Driving Pass	11/07/2002
Driving Experience	15 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96668889

OFFICE-64558989

NOEMAIL

Address

BLK 166 BISHAN ST 13 #07-248

Postcode

570166

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

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?

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

I WAS STATIONARY STOPPED, QUEUING UP TO EXIT FROM THE OPEN CARPARK OF BLK 167 BISHAN ST 13. WHILE QUEUING UP, SUDDENLY I FELT AN IMPACT FROM THE LEFT REAR SIDE OF MY VEHICLE. I ALIGHTED FROM MY VEHICLE AND REALISED IT WAS A VEHICLE BEARING (SKG7133X) THAT COLLIDED ONTO THE LEFT REAR PORTION OF MY VEHICLE. WHEN I WAS IN A STATIONARY POSITION QUEUING UP TO EXIT FROM THE OPEN CARPARK. THE REPORTING WAS FILED IN LATE AS AT FIRST WAS PLANNED FOR PRIVATE SETTLEMENT. BUT END UP, HE REJECTED, SO I PROCEED TO FILE IN FOR ACCIDENT CLAIM.

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

SKG7173X

Vehicle Make/Model/Colour Details Of Properties

VEHICLE B

PRIVATE CAR

Vehicle Category Name of Driver

LOUIS TAN

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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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
- 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
- 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)
 - (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
- (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 GtA 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.

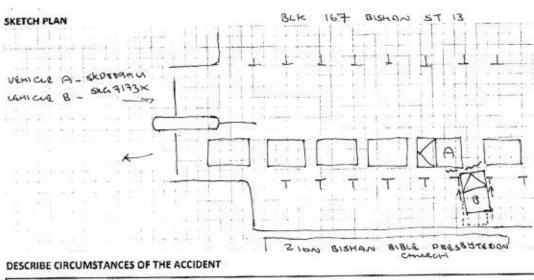
Policyholder's Signature Date & Time:

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

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Sketch Plan #2 Pg. 1



I was stationery stopped, animoh bep FROM 70 BUK 167 BUHAN ST 13. OPEN CARPARK OF WHILE QUEUING UP, SUPPRINCY I FELT A IMPACT FROM THE LEFT REAR SIDE OF MY VENICLE. ALIGHTED FROM MY VEMICUE AND REALIZED IT WAS A VEHICLE BEARING (SKG 7173 x) THAT COLLIDED TO THE WAS IN LEGT REAR PORTION OF MY JEHNCUE, WHEN I STATIONARY ADSITION UNGUNG UP TO EXIT FROM OPEN CARPARK. VEMICUE A - SKD 98994 VAMILLE B- SKA 7173 X THE REPORTING WAS INLED IN LATER TIME AS AT FIRST WAS PLANNED FOR PRUATE SETTLEMENT, BUT END UP HE REJECTED AND SO I PROCERD TO FILE IN FOR ACCIDENT CLAIM.

DECLARATION

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

Policyholder's Signature

Driver's Signature

Date & Time:

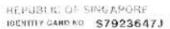
(If driver la not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

LETTER OF UNDERTAKING

I/We, Na KWANA SOAh	, the owner of vehicle no	
My/Our Insurance is under M/s AXA Insto claim under my/our Policy or against claim to M/s AXA Insurance Singapore I 14(fourteen) days of occurrence of	the I hird Farty and it the form the Ltd with all relevant facts a	AUL DANGER
My/Our Third Party claim is handle by my	our preferred workshop,	
	,	
Signed and Acknowledge by:		
	1	
	2	1 C
()		(6(05(2018
Nric no. and signature of policyholder	Company Stamp	Date
Nric no. and signature of poneyhorder	J. 5. 55 € 100 € 100 € 10	4

Driving License



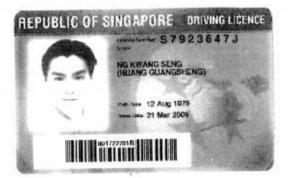


NG KWANG SENG (HUANG GUANGSHENG)



CHINESP West by a loc 12-15-1979 N Courts of title SINGAPORE

黄 光 廸





13-08-8009

 4++=356

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

PASS DATE

Close 3 Noter Cars < 9000kg with ~CF passengers, backerive 11 Jul 2002 of the clarec; and other matter window < 2000kg

V-18-4

Licence No. 57923647.

INSURANCE





AXA insurance Pte Ltd 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) £ (65) 6880 4740

Customor.careData.com.sg

₩ww.axa.com.sg

eccount number 04155

Certificate of Insurance

Arotar Web close to a Party Risks and Companisation (Av. (Chapter 1986) Motor Ventoles (Third Peny Tieks and Companisation) Rubin, 1960-Tice J Transport Act, 1987 (Act by Sec. 1986) (Act by Sec. 1987) (A

Policy details

Policyholder masso Plan name NCD applicable

Webtele registration number Period of Insurance Floance loss company

NG KWONG SENG Comprehessive Private APW **RANK** SKD8899U

from 18/10/2017 to 17/10/2018 (both dates and usive) OCBC BANK LIMITED

GA068129 / 1 Certificate number WOO 1724472F01627L Chresia number 271 961 30294898 Engine number

Persons or classes of persons entitled to drive*

(b) The Policyholder

(b) Any Names Driver as stated in the Policy:

2. NE KWANG HONG 1. NG SOON MENG

(c) Any person who is driving or the Policyholder's order or with their permission.

Previded that the sensor unding is portrated in accordance with the licensing or other loss or inspirations to drive the Motor Vehicle or may because periodice and is not disquelified by order of a Court of lew or by resson of any enactment or regulation in that celeair from thising the Mobel Vehicles.

Limitation as to use*

User only for social, comestic and dieasure purposes and for the Policyholder's business.

The prificy decembed cases ruse for himson rows of, rocking, belief in all only that, speed testing the combing of goods other than samples in connection with any mailtent bear ross of use for any suppose in connection with maker trade; or when the Motor Car, electher stationary, in , se or otherwise, is in or on, a rating rows, clicult, rate, course or any other rocca by whetever more called that are opically used for eachig, pade-making or such a refer purposes.

Limitations rendered inspandiously Section Section Section Section Section Section (It of Party Taks and Comparation) Act, (Unspect 189) and Section 95 of the Section Section Section 2011 (We expire), and not to be included under these recadings.

EXCESS

Runic Own Danrage Decess. Windscreen Excess

980 0.00 20,001,008

An Additional excess is applicable to follows:

1, S\$500 for unnamed Asthonison Privat

2. \$5500 for declared Young and Presperimenta Delete

3, \$55,000 for undeclared Young and Mickementary Driven. To a additional excess is reclarate to \$52,500 if You have chosen AXA From an Workshops.

Additional clauses & endorsoments to your policy

(We hereby cordly that the policy to which this Genthesia relates is issued in a condition with the provision of the Mator Vent dies (Third Party Risks and Compensation) Act. (Chapter 189) and Part Mothe Roca Transport Act, 1087 (Malaysia).

AXA Insurance Pte Uld

Authorised signature

Important note

Polity-bonders are warried that, on the sale of a mater which they must surrence the Certificate of line, and one the Policy of the linear residence in the Act of the Certificate of line and the Certificate of the Certific

in error on Westerly Clause requires the previous to be gold in full within a specific parcel falling which there would be no lieb ity under the policy, received contribute, are observant on.

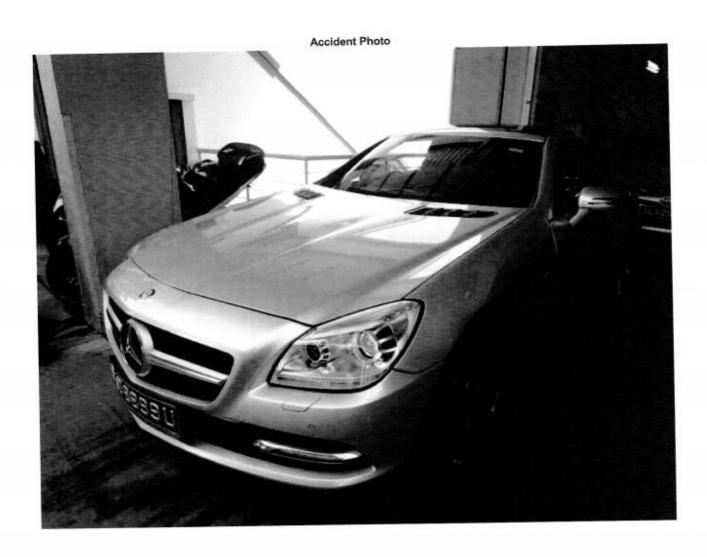
AXA ingurance Piet 31d (199903512M) B Shanton Way, #24-01, AXA Trees. Singapore Offs811 Customer Contro, #81-01

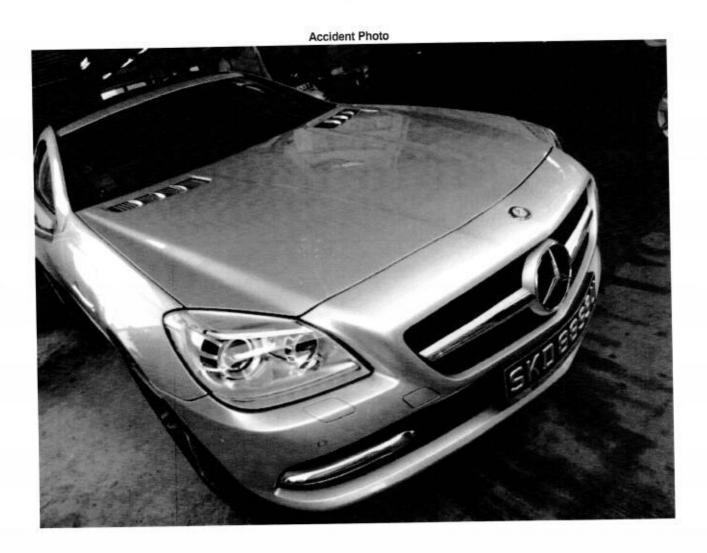
1 of 3





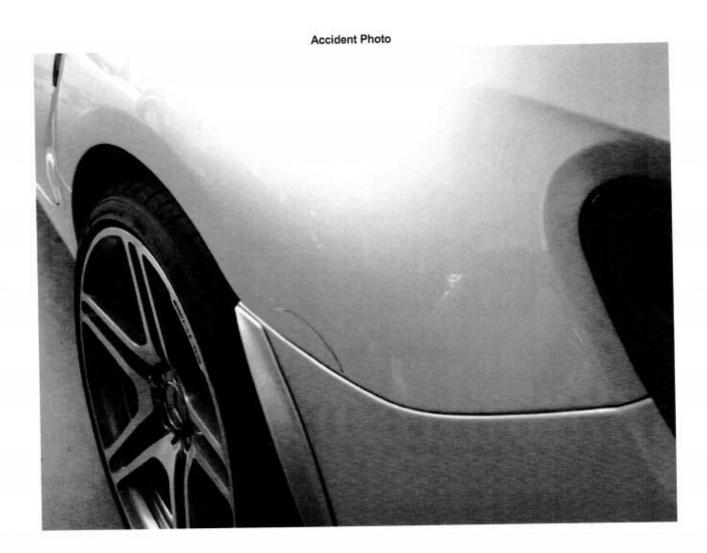














MPA118063499 / Premium Automobiles Pte Ltd - UBI ENTRY DATE & TIME: 15/05/2018 18:06 SUBMITTED BY: Jeffrey Tan Eng Su

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

- 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 and accurate</u> 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.

的现在分词 医共享主义 医神经神经	ACCIDENT STATEMENT
ate Of Report	15/05/2018 18:06
pate Of Accident	14/05/2018 21:00
exact Location Of Accident	BISHAN STREET 13 CARPARK - INFRONT OF BLK 167
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SKG7173X
nsured/Policyholder	
Name Of Registered Owner	TAN GIM HOE
NRIC No	S7234049C
Email Address	GIMHOE88@GMAIL.COM
Mobile Phone No	(LOCAL) +65-87812312
Alternative Phone No	Home-64560884
Vehicle Particulars	
Manufacturer	AUDI
Model	Q7-3.0 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	NO
Policy Number	2100473514-01
Cover Note Number	
Driver	
Name of Driver	TAN GIM HOE
NRIC No	S7234049C
Date Of Birth	22/09/1972

INDOOR

29/05/1995

Gender

Mobile Number

(LOCAL) +65-87812312

Fax Number

Contact Number

EMail Address

GIMHOE88@GMAIL.COM

Address

BLK 491 YIO CHU KANG ROAD #04-06

Postcode

7887078

Was driver an employee of the Insured's Company

NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OWNER

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?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

0

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

-THE ABOVE ACCIDENT HAPPENED AT THE CARPARK OF BISHAN STREET 13 WHILE I WAS TRYING TO EXIT FROM MY CARPARK LOT. -WHILE EXITING FROM THE CARPARK LOT,I DID NOT REALIZE THAT MY CAR HIT ONTO THE VEHICLE INFRONT OF ME.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKD8899U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver