

REF: CS/AIG19020047 Gyf3L2

Special Instruction:

LS \$3410.00

ASSIGNMENT (Office)

From (Person): Bonnie Tan of ALG Date/Time: 11/11/2019
Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant: Owner

Surveyor: RW Automotive

Workshop: Sorn Lee Choon

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: YP6367Y Insured: YN7813E

at Workshop m/s Soon Lee Choon Tel: 64840217

of BLC 5032 AMK #01-283.

Policy No: _____ Claim No: 951502998386.

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 28/8/2019

(Client's Record)

15/11/2019 10am

H.O.D. Endorsement/Date:

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT _____

Date/Time: _____ Confirmed with _____ Final Fig _____, _____ days (Red \$ _____ / _____ %; Original 5 days)

Date/Time: 15/11 Submit Final Fig 550, 3 days (Red \$ 3470 / 86 %; Original 3 days)

[illegible]

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:

<p><i>Fee Charged:</i></p>

Basic & Add

Transport

Photos

Others

Total

Date: _____

200

200

1) Date/Time 3/2/19 File Pass to Typist

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 _____

C121N

Nivitha (LKK Auto)

From: Tan, Bennie-WZ <Bennie-WZ.Tan@aig.com>
Sent: Monday, 11 November 2019 2:00 PM
To: Admin-D (LKKAuto); SUR
Cc: Shanthi Marimuthu; 'Sarjeet Singh'; 'Foo Shu Hui'; 'Batharnisha Begam Binte Abdul Karim'
Subject: AIG Ref: 9515029983SG-003 || Re-inspection for YP6367Y (DOA: 28/03/2019) - KCP Ref : SS/YX/ni/2019002039.AIG(mpd) ; MC/MC 11476/2019

Importance: High

Hi LKK

Kindly assist on the request for physical re-inspection request. (See below email)

We will be forwarding the necessary documents separately in another email.

Please keep me updated once the re-inspection been confirmed with Third Party.

Best Regards

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

78 Shenton Way #08-16 Singapore 079120
Tel +(65) 6419 1718

Bennie-WZ.Tan@aig.com | www.aig.sg

From: Jia Pei [mailto:jiapei@kscgp.com]
Sent: Monday, November 11, 2019 11:48 AM
To: 'Teo Yi Xuan'
Cc: 'Sarjeet Singh'; 'Foo Shu Hui'; 'Batharnisha Begam Binte Abdul Karim'; Tan, Bennie-WZ; 'Shanthi Marimuthu'
Subject: [EXTERNAL] RE : AIG Ref: 9515029983SG-003 || Your Ref: GS/19/2863/SLC/jp/cl- KCP Ref : SS/YX/ni/2019002039.AIG(mpd) ; MC/MC 11476/2019
Importance: High

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

Dear Yi Xuan,

We refer to your email dated 8 November 2019.

In the event your client is not agreeable, please confirm the re-inspection appointment on **15 November 2019 at 10am**, at our client's workshop:

Soon Lee Choon Auto Services Pte Ltd
Block 5032 Ang Mo Kio Industrial Park 2
#01-283
Singapore 569535

Thank you and best regards,
Jiapei (JP)
M/s KSCGP Juris LLP
10 Hoe Chiang Road
#13-03A Keppel Towers
Singapore 089315
Tel: 6538 3611 / DID: 3152 0985
Fax: 6538 3708
E-mail: jiapei@kscgp.com

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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	28/03/2019 14:06
Date Of Accident	28/03/2019 11:30
Exact Location Of Accident	PIE (CHANGI) AFTER LORNIE RD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN7813E
Insured/Policyholder	
Name Of Registered Owner	MASINDO LOGISTIC PTE LTD
Co Reg No	200301939M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

Vehicle Particulars

Manufacturer	ISUZU
Model	NPR85UH5A
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994545/100862878
Cover Note Number	

Driver

Name of Driver	MOHAMED SALEHUDIN BIN ABDUL RAHIM
NRIC No	S8222091G
Date Of Birth	10/07/1982
Occupation	OUTDOOR
Date Of Driving Pass	30/11/2012
Driving Experience	6 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85420149
Fax Number	
Contact Number	OFFICE-85420149
Email Address	NOEMAIL

Address	BLK 54 LORONG 5 TOA PAYOH #07-194
Postcode	310054
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG THE STATED VENUE, I FELL ASLEEP AND MY VEHICLE HIT ONTO VEHICLE B REAR LEFT PORTION.

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	YP6367Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: :
GENDER: :

Accident Sketch Plan

SKETCH PLAN

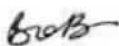
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all Insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

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.:

A: YN7813E
B: YP6367Y

Refer to Statement.

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

Date & Time:

NRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

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ACCIDENT STATEMENT

Date Of Report	29/03/2019 12:24
Date Of Accident	28/03/2019 12:00
Exact Location Of Accident	PIE TOWARDS CHANGI AFTER ENG NEO EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP6367Y
Insured/Policyholder	
Name Of Registered Owner	HONLY COMPANY (PTE) LTD
Co Reg No	NA 191902121N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62981233
Vehicle Particulars	
Manufacturer	ISUZU
Model	NPR75L-S.2 D (M)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3034441800
Cover Note Number	07/06/2018 - 06/06/2019
Driver	
Name of Driver	TEO THIAM SIONG
NRIC No	S0209747H
Date Of Birth	21/03/1953
Occupation	OUTDOOR
Date Of Driving Pass	18/02/1974
Driving Experience	45 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93635891
Fax Number	
Contact Number	
Email Address	NOEMAIL

**RW AUTOMOTIVE APPRAISERS SERVICES**

(Licensed Appraisers & Claims Adjusters)
256 Bishan St. 22 #12-472 Singapore 570256
Tel: +65 6996 9988 Hp: +65 8338 9988 Fax: + 65 6553 3912
Reg. No. 52821270B

PHOTOCOPY

INVOICE

Soon Lee Choon Auto Services Pte. Ltd. Invoice No : 190029
Blk 5032, Ang Mo Kio Industrial
Park 2, #01-283 Date : 24.04.2019
Singapore 569535
On behalf of Honly Company (Pte) Ltd.

Being:	
Survey Fees (including 26 photographs and transport charges)	S 366.00
S'pore Dollars : Three Hundred and Sixty-Six only.	<u>S 366.00</u>
Our Reference No. : RW/0029/19TP	
Vehicle No. : YP 6367 Y	

SURVEYED WITHOUT PREJUDICE



RICHARD WONG
(Licensed Appraiser)



RW AUTOMOTIVE APPRAISERS SERVICES

(Licensed Appraisers & Claims Adjusters)
256 Bishan St. 22 #12-472 Singapore 570256
Tel: +65 6996 9988 Hp: +65 8338 9988 Fax: + 65 6553 3912
Reg. No. 528212708

Honly Company (Pte) Ltd.
c/o Soon Lee Choon Auto Services Pte. Ltd.
Blk 5032, Ang Mo Kio Industrial
Park 2, #01-283
Singapore 569535

Report No : RW/0029/19TP

Date : 24.04.2019

VEHICLE INSPECTION REPORT

REFERENCE

Requested by : Workshop, owner's behalf
Date of Request : 12.04.2019
Date of Accident : 28.03.2019
Date of Inspection : 12.04.2019
Inspected at : Soon Lee Choon Auto Services Pte. Ltd.
Blk 5032, Ang Mo Kio Industrial Park 2
#01-283, Singapore 569535

VEHICLE DETAILS

Vehicle No.	: YP 6367 Y	Make & Model	: Isuzu Lorry
Year Make	: 2017	Colour	: White
Engine No.	: 4HK1596135	Chassis No.	: JAANPR75HH101677
Engine Capacity	: 5193 cc	Mileage	: 47,407 km
Air-Con	: Yes	Radio/CD/Cassette	: Yes
Seat Belt	: Yes	Rims	: Standard

GENERAL CONDITION OF VEHICLE

General Condition	: Good	Modification	: Nil
Brakes	: Serviceable	Handbrake	: Serviceable
Steering	: Serviceable		

<u>Tyres</u>	<u>Make</u>	<u>Size</u>	<u>Rim</u>	<u>Tread Balance</u>
Front Right	Bridgestone	215/75 R17.5	Standard	7 mm
Front Left	Bridgestone	215/75 R17.5	Standard	7 mm
Rear Right	Bridgestone	215/75 R17.5	Standard	7 mm
Rear Left	Bridgestone	215/75 R17.5	Standard	7 mm

ASSESSMENT

	<u>Repairer's Estimate</u>	<u>Recommendation</u>
Spare Parts	: \$ 3,370.00	\$ 3,370.00
Labour Charges	: \$ 600.00	\$ 400.00
Paint Work	: \$ 400.00	\$ 250.00
Towing Charges	: \$ -	\$ -
Total	: <u>\$ 4,370.00</u>	<u>\$ 4,020.00</u>
Recommend lump sum repairs	: \$ 3,410.00	
Reduction	: \$ 960.00	
Estimated Period Required for Repair	: 5 days	



RW AUTOMOTIVE APPRAISERS SERVICES

(Licensed Appraisers & Claims Adjusters)
256 Bishan St. 22 #12-472 Singapore 570256
Tel: +65 6996 9988 Hp: +65 8338 9988 Fax: +65 6553 3912
Reg. No. 52821270B

Page : 1

ADJUSTMENT ON REPAIR COST & REPLACEMENT OF PARTS

Vehicle No: YP 6367 Y

Report No.: RW/0029/19TP

<u>S/No</u>	<u>QTY</u>	<u>Description</u>	<u>Condition/ Remarks</u>	<u>Repairer's Estimates</u>	<u>My Recommendation</u>
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REPLACEMENT OF DAMAGED PARTS

1)	1	Side wooden gate LH	Torn	\$ 2,500.00 SN	\$ 2,500.00 X Repair
2)	1	Side wooden gate hinge LH	Bent	\$ 150.00 SN	\$ 150.00 /
3)	1	Side wooden gate handle LH	Dented	\$ 55.00 SN	\$ 55.00 X SVC
4)	1	Side wooden gate advertisement sticker LH	Necessary	\$ 380.00 SN	\$ 380.00 200 (SN)
5)	1	Rear side mudguard LH	Distorted	\$ 285.00 SN	\$ 285.00 X NH
Total (Parts):				\$ 3,370.00	\$ 3,370.00

LABOUR CHARGES

6)	Remove and replace all damaged parts.	\$ 600.00	\$ 400.00 100
7)	Spray painting on affected area.	\$ 400.00	\$ 250.00 /
Total (Labour):		\$ 1,000.00	\$ 650.00

Total: \$ 4,370.00 \$ 4,020.00

150
10%: 135

685
20%: 550
3 Days.



RW AUTOMOTIVE APPRAISERS SERVICES

(Licensed Appraisers & Claims Adjusters)

256 Bishan St. 22 #12-472 Singapore 570256

Tel: +65 6996 9988 Hp: +65 8338 9988 Fax: + 65 6553 3912

Reg. No. 528212708

Page : 2

Vehicle No: YP 6367 Y

Report No.: RW/0029/19TP

POINT OF IMPACT

Along the left side body of the vehicle.

RECOMMENDATION

The vehicle was inspected thoroughly based on the repairer's estimate against the actual damages found on the vehicle. My findings and recommendation are listed as per attached.

My adjusted amount for the cost of repair is \$4,020.00.

CONCLUSION

The repairer has agreed to undertake repairs at a lump sum of \$3,410.00 corresponding to labour charges, spray painting and replacement of parts.

SURVEYED WITHOUT PREJUDICE



RICHARD WONG
(Licensed Appraiser)

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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Date Of Accident	28/03/2019 12:00
Exact Location Of Accident	PIE TOWARDS CHANGI AFTER ENG NEO EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP6367Y
-----------------------------	---------

Insured/Policyholder

Name Of Registered Owner	HONLY COMPANY (PTE) LTD
Co Reg No	NA
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-62981233

Vehicle Particulars

Manufacturer	ISUZU
Model	NPR75L-5.2 D (M)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3034441800
Cover Note Number	07/06/2018 - 06/06/2019

Driver

Name of Driver	TEO THIAM SIONG
NRIC No	S0209747H
Date Of Birth	21/03/1953
Occupation	OUTDOOR
Date Of Driving Pass	18/02/1974

Gender	MALE
Mobile Number	(LOCAL) +65-93635891
Fax Number	
Contact Number	
Email Address	NOEMAIL
Address	BLK 700B ANG MO KIO AVE 6 #10-322
Postcode	562700
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

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

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 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	YN7813F
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE

NRIC/Passport Number

Contact Number

85420149

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

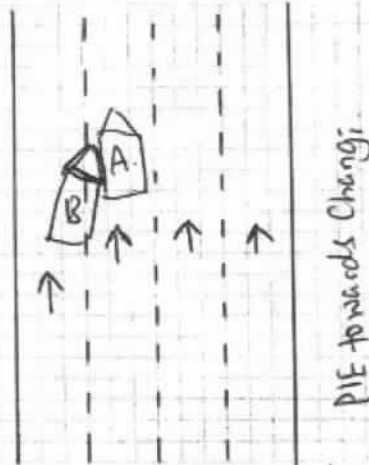
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurers) 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:
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 - (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/ID No.:

SKETCH PLAN



A - YP6367Y.
B - YN7813F.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle No: YP6367Y (China)

I WAS travelling along PIE towards Changi on 28/3/2019 at about 12pm. Suddenly there was a big impact on my vehicle, I came out of my vehicle and realised that vehicle B had hit onto the left portion of my vehicle. I am lodging this report to claim against the insurance of vehicle B, YN7813F.

*Claim TP (by Soon Lee Choon Auto Servs P/L)

DECLARATION

(We declare that the foregoing particulars are true to every respect.)

Policyholder's Signature
Date & Time



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

29/3/19

Reporting Officer's Signature
Name
NRIC/FIN No.

(Signature)

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





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/AIG19020047/Gyf3e2

78 SHENTON WAY #08-16
CHARTIS BUILDING
SINGAPORE 079120

Date : 04-12-2019



Code : AIG

1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)

Insured Veh.	YN 7813E	Veh. Inspected	YP 6367Y
Policy No.	999994545/100862878	Coverage (\$)	0.00
Claim No.	9515029983SG	Excess (\$)	0.00
Assign From	BENNIE TAN	Assign Date	11/11/2019

2. Vehicle Particulars & Condition

Make & Model	ISUZU NPR75UH5A	c.c	5193
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JAANPR75HH7101677	Colour	WHITE
Odometer	66152	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/75 R17.5	BRIDGESTONE	5 mm
L/H Front Tyre	215/75 R17.5	BRIDGESTONE	5 mm
R/H Rear Tyre	215/75 R17.5 (D)	BRIDGESTONE	5/5 mm
L/H Rear Tyre	215/75 R17.5 (D)	BRIDGESTONE	5/5 mm

4. Description of Damages

THE VEHICLE HAD COMPLETED ITS REPAIR WORKS. REPAIR CONDITION SEE DETAILS.
--

5. General Information

Accident Date	28/03/2019	Inspection Date	15/11/2019
Survey held at	SOON LEE CHOON AUTO SERVICES BLK 5032 ANG MO KIO IND.PARK 2 #01-283 SINGAPORE 569535		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. YP 6367Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	SIDE WOODEN GATE LH	REPAIRED SEE LABOUR	2,500.00	-
1	SIDE WOODEN GATE HINGE LH	REPLACED	150.00	150.00
1	SIDE WOODEN GATE HANDLE LH	SERVICEABLE	55.00	-
1	REAR SIDE MUDGUARD LH	NOT CHANGED	285.00	-
	LESS 10% DISCOUNT		-	-15.00
			2,990.00	135.00
SPECIAL NETT ITEMS				
1	SIDE WOODEN GATE ADVERTISEMENT STICKER LH (SN)	REPLACED	380.00	200.00
			380.00	200.00
LABOUR				
	REMOVE AND REPLACE ALL DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF SIDE WOODEN GATE LH. SPRAY PAINTING ON AFFECTED AREA.		600.00	100.00
			400.00	250.00
			1,000.00	350.00
GRAND TOTAL			4,370.00	685.00
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				550.00

Report Ref No. CS/AIG19020047/Gyf3e2

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

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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