

22/03/2002

ASS. REC. BY:

REF: CS3 / A141 9022263 / Gs f3021 Special Instruction: 06

SURVIVOR:
MUMEN

GQ

ASSIGNMENT (Office)

From (Person): Winnie Fun of A14 Date/Time: 18/12/19 @ 4:50pm

Estimated Cost: Bill to:

OD TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SLQ 333H Insured: SJH 3033A

at Workshop m/s Auto Dynamic Tel: 9728 8661

of 31K 3019A Ubi Road 1 #

Policy No: Claim No:

Sum Insured: Excess:

Make of Veh: D.O.A. 12/04/2019
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 9:43am 19/12/19 Person Contacted: Raymond Vehicle: IN / OUT

Date/Time Action/Instruction (X) Estimate

SLQ 333H - X

SJH 3033A - CS3 / A141 9021790 / As f3

DUA: 5/12/19

ASS. REC. BY:

REF:

ALG

ASSIGNMENT

From:

PRS

Date:

20/12/2019

Veh No:

SLQ333H

Yr Regn:

05 Jul 2017

Estimated Cost:

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

OD ☒ TP ☐ WS / TP RES / OD RES / EVA / INV / MV

Truck / Trailer or

To Inspect Vehicle No:

SLQ 333H

Make:

Merced CLA180 c.c 15985

at Workshop m/s

Auto Dynamic

Colour:

white

A/C: Insured / Std / NI / NA

of

BLK 30194 Ubi Road 1 # 01-28

Sp. Reading

37024

T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No:

C/No:

WDD 1179422 N. 485 805

Claims No:

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Sum Insured:

Excess:

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

(Client's Record)

Brake: ☒ In order / Jammed / Leaked / Burnt or

Make of Veh:

4pm (waiting)

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

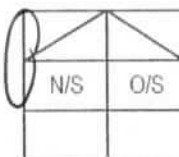
(Policy Condition)

Tyre Size:

F: 235/35 ZR 19

R: 11

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

IDAC Accident Rpt:

Consistent? : Yes or No

TOYO / YOKO or

Continental

GIA / PR Seen:

Consistent? : Yes or No

Front

5

mm

Rear

5

mm

Est. Repairs:

3

days

Res.:

Yes or No

L/Bal.

5

mm

L/Bal.

5

mm

Lum Sum:

%

3 Val.:

Yes or No

D.O.A.

D.O.I.

20-12-19

Survey held at

w/s

4pm

CA / REV / REP. / 24 HRS

cup

Vehicle: IN / OUT

Date:

Person Contacted:

Des. of Damages: Frt / Rear / O/S / ☒ N/S / U/C / Rooftop or

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

Date / Time

Action / Instruction

RECEIVED 17 JAN 2020

Date/Time, File Pass to?

17/01/20



Preli. Report

Final Report

1)

Type 4

Date/Time, File Return to?

Days Of Repair:

3

Resurvey No. of Trip:

2

Survey Fee:

180

Transportation:

S + RS, SI

Photos

Others

TOTAL

11

191

Report Format:

PRS

Lump Sum / L&E/C

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Nivitha (LKK Auto)

From: AIG SGP, Claims-Survey <AIGSGP_ClaimsSurvey@aig.com>
Sent: Wednesday, 18 December 2019 4:50 PM
To: Admin A; assignments
Cc: Fong, Andy-SY
Subject: Aigencypt [PRI] AIG insured SJH3033A - EAL: 2019.6597.MK.ya - SLQ333H

Hi LKK,

Kindly assist to survey.

Kindly the repairer at 9728 8661 (Mr Raymond).

Winnie Fan
AIG
Claims Service Associate
Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

winnie-lw.fan@aig.com | www.aig.sg

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From: Yvonne
Sent: Friday, 6 December, 2019 3:20 PM
To: 'AIGSGP_ClaimsSurvey@aig.com'; 'Abu Kassim, Noor Mariesa'; 'Azlan, Syazairdina'; 'Subramaniam, Divyashni'; 'Mithoosingh, Aashweenjeetkaur'
Subject: [PRI] AIG insured SJH3033A - EAL: 2019.6597.MK.ya - SLQ333H

Our ref : 2019.6597.MK.ya - **SLQ333H**
Your ref : **SJH3033A**

PLEASE REPLY VIA EMAIL (yvonne@ealc.com.sg)

AIG Asia Pacific Insurance Pte Ltd
No. 78 Shenton Way
#07-16 AIG Building
Singapore 079120
Attn: Motor Claims Department
2 DAYS' PRE-REPAIR NOTICE

Surveyor from M/s AIG Asia Pacific Insurance Pte Ltd		
Vehicle SLQ333H inspected as follows by Name:		
Before repair	Parts removed	After repair
_____	_____	_____
Signature	Signature	Signature
Date/ Time:	Date/ Time:	Date/ Time:

Dear Sir/Madam,

NOTICE TO THIRD PARTY INSURERS FOR PRE-REPAIR NOTICE
CLAIMANT: LYE PO LENG

ACCIDENT INVOLVING SLQ333H & SJH3033A ON (MMDDYYYY) 12/4/2019 ALONG COMMONWEALTH AVE AT ABOUT 1405 HOURS

We refer to the above matter wherein we are instructed to act for **LYE PO LENG**, the owner of vehicle no. **SLQ333H**.

The date of accident is 4 December 2019.

There is no agreement to the surveyors proposed by parties.

Our client's vehicle **SLQ333H** is available as follows, please call prior appointment for the pre-repair inspection:

M/s Auto Dynamac Service Trading
Blk 3019A Ubi Road 1,
#01-28,
Singapore 408713
Tel: 9728 8661 (Mr Raymond)

Please arrange for the pre-repair inspection on the damaged vehicle within 2 working days from the time of notification, excluding Saturdays, Sundays and public holidays.

Regards,
Yvonne Ang

East Asia Law Corporation
No. 133 New Bridge Road, #10-02 Chinatown Point, Singapore 059413
Tel: 63232565 Fax: 63232373

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If you have received this message in error, please delete the message and all copies from your system and notify the sender immediately by return e-mail.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	564I
Vehicle Details	
Vehicle No.:	SLQ333H
Vehicle to be Exported:	No
Intended Deregistration Date:	20 Dec 2019
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	CLA180 SB URBAN (R18 LED)
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	27091031229353
Chassis No.:	WDD1179422N485805
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$31,069.00
Original Registration Date:	05 Jul 2017
First Registration Date:	05 Jul 2017
Transfer Count:	1
Actual ARF Paid:	\$30,497.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	04 Jul 2027
PARF Rebate Amount:	\$22,872.00
Intended COE Rebate Details	
COE Expiry Date:	04 Jul 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$51,106.00
COE Rebate Amount:	\$38,526.00
Total Rebate Amount:	\$61,398.00

The information contained herein is correct as at 20 Dec 2019

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report 04/12/2019 16:45
Date Of Accident 04/12/2019 14:05
Exact Location Of Accident ALONG COMMONWEALTH AVE W
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLQ333H
Insured/Policyholder
Name Of Registered Owner LYE PO LENG
NRIC No S7521564I
Email Address PAULINELYE@HOTMAIL.COM
Mobile Phone No (LOCAL) +65-97602228
Alternative Phone No OFFICE-97602228

Vehicle Particulars

Manufacturer
Model MERCEDES-BENZ
Exact Purpose for which vehicle was being used at time of accident CLA180 SB URBAN (R18 LED)

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken

Vehicle Category THIRD PARTY
PRIVATE CAR

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number GA471040
Cover Note Number 27/05/2019-26/05/2020

Driver

Name of Driver LYE PO LENG
NRIC No S7521564I
Date Of Birth 16/07/1975
Occupation INDOOR
Date Of Driving Pass 17/03/1998
Driving Experience 21 YEARS AND 8 MONTHS
Gender FEMALE
Mobile Number (LOCAL) +65-97602228
Fax Number OFFICE-97602228
Contact Number PAULINELYE@HOTMAIL.COM
Email Address

Address	BLK 603 BEDOK RESERVOIR ROAD #10-552
Postcode	470603
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 - 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

REFER TO ATTACHMENT

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	SJH3033A
Vehicle Make/Model/Colour	AUDI Q2
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHOI YEE HANG, IAN
NRIC/Passport Number	S9206529D
Contact Number	96785941
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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: 4 Dec
4.09 am

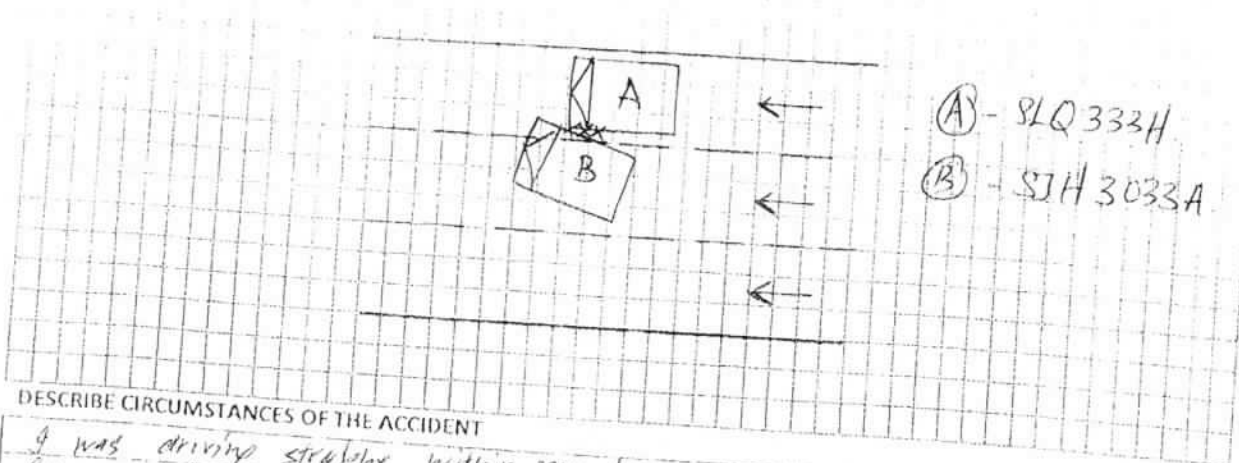
Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:
NRIC/IN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving straight within my lane, suddenly a vehicle from my left ~~hit my car~~ cut into my lane and hit my vehicle.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

DECLARATION

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

- Reporting Only
- Claim OD
- Claim TP
- Claim OD/TP at other workshop

Policyholder's signature
Date & Time

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

Reporting Centre Personnel's Signature
Name:
Nric/Fin No.

MOTOR CAR (LH)

Vehicle No: SLQ333H

Left Portion

NAC	INC	Item	CON	AC	Qty
1255	995326	Frt LH Door			
1256	995140	Frt LH Door Protector			
1257	995104	Frt LH Door Hinge <i>Wing mirror cover repair</i>			
1258	995142	Frt LH Door Wing Mirror <i>amp</i>			
1259	995102	Frt LH Door Garnish			
1260	991593	Frt LH Door Glass Outer Moulding			
1261	991588	Frt LH Door Glass Inner Moulding			
1262	995103	Frt LH Door Glass			
1263	991595	Frt LH Door Glass Regulator			
1264	991596	Frt LH Door Glass Regulator Motor			
1265	991662	Frt LH Door Rubber			
1266	991636	Frt LH Door Outer Handle			
1267	991607	Frt LH Door Inner Handle			
1268	991625	Frt LH Door Lock w/Key			
1269	991624	Frt LH Door Lock			
1270	991562	Frt LH Door Central Lock			
1271	991675	Frt LH Door Switch			
1272	991617	Frt LH Door Inner Trim Board			
1273	991568	Frt LH Door Checker			
1274	991575	Frt LH Door Felt			
1275	991688	Frt LH Door Wire Harness			
1276	991683	Frt LH Door Window Glass Pillar			
1277	991640	Frt LH Door Outer Pillar			
1278	991613	Frt LH Door Inner Pillar			
1279	991646	Frt LH Door Pillar Inner Garnish			
1280	990554	Centre Pillar LH			
1281	990542	Centre Inner Pillar LH			
1282	990517	Centre Pillar Upper Garnish LH			
1283	990564	Centre Pillar Lower Garnish LH			
1284	991670	Frt LH Door Step Garnish			
1285	994052	Rocker Panel LH			
1286	994049	Rocker Panel Inner Panel LH			
1287	994046	Rocker Panel Garnish LH			
1288	994055	Rocker Panel Outer Side Skirt LH			
1004	991300	Frt Bumper			
1006	991325	Frt Bumper Bracket			
1007	991462	Frt Bumper Side Retainer			
1008	991433	Frt Bumper Reinforcement			
1010	991468	Frt Bumper Sponge			
1011	991427	Frt Bumper Protector			
1014	991301	Frt Bumper Moulding			
1015	991407	Frt Bumper Lower Spoiler			
1029	995153	Frt LH Headlamp Assy			
1031	995088	Frt LH Side Lamp			
1096	995070	Frt LH Fender			
1098	995147	Frt LH Fender Lamp			
1099	995148	Frt LH Fender Protector			
		<i>Left LH wheel rim cut</i>			

NAC	INC	Item	CON	AC
1289	995156	Rear LH Door		
1290	993282	Rear LH Door Protector		
1291	995194	Rear LH Door Hinge		
1292	993228	Rear LH Door Garnish		
1293	993278	Rear LH Door Glass Outer Moulding		
1294	993231	Rear LH Door Glass Inner Moulding		
1295	995190	Rear LH Door Glass		
1296	993238	Rear LH Door Glass Regulator		
1297	995192	Rear LH Door Glass Regulator Motor		
1298	993294	Rear LH Door Rubber		
1299	993275	Rear LH Door Outer Handle		
1300	993250	Rear LH Door Inner Handle		
1301	993261	Rear LH Door Lock		
1302	993256	Rear LH Door Inner Trim Board		
1303	993218	Rear LH Door Checker		
1304	993230	Rear LH Door Glass Channel		
1305	993242	Rear LH Door Glass Triangle Garnish		
1306	993285	Rear LH Door 1/4 Glass		
1307	993288	Rear LH Door 1/4 Glass Rubber		
1308	993287	Rear LH Door 1/4 Glass Pillar		
1309	993305	Rear LH Door Step Garnish		
1310	993309	Rear LH Door Switch		
1311	994070	Roof Top Panel		
1312	994098	Roof Top Moulding		
1313	994085	Roof Top Air-bag		
1314	994084	Roof Top Air-bag Sensor		
1315	994083	Roof Top Air-bag Control Unit		
1141	992958	Rear Bumper		
1147	992976	Rear Bumper Bracket		
1148	993068	Rear Bumper Side Retainer		
1149	993045	Rear Bumper Reinforcement		
1151	993077	Rear Bumper Sponge		
1153	993040	Rear Bumper Protector		
1155	993026	Rear Bumper Moulding		
1157	993023	Rear Bumper Lower Spoiler		
1163	993851	Rear LH Taillamp		
1218	993436	Rear LH Fender		
1219	993449	Rear LH Fender Protector		
1136	990247	Sticker		

No of Items: _____

Assessor: _____

...CLAIM SUBFOLDER...(Pending for Survey Report)

PRI

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	19 Dec 2019 Edit Reg		18 Dec 2019 00:00 Edit Adj Rpt	\$S\$0.00 Edit Estimates	\$S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
-------------	------------------	----------------------	------------------	--------------------------

CLAIM SUBFOLDER DETAILS [Created by adjuster]

Insured:	CHAN MEI LING ALISON, Co. Reg. No.: -		
Main Claimant:	-		
Vehicle Reg. No.:	SLQ333H	Date of Loss:	04/12/2019 00:00 - :59 [28 Months and 29 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 0130447812SG	Policy/Cover Note No.:	1700094795
Vehicle Reg. No. (Insured):	SJH3033A	Policy No. (Claimant):	
		Excess:	
Repairer:	Auto Dynamac Service Trading (HQ) BLK 3019A UBI ROAD 1, #01-28, 408713 Ubi - Tel:		
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Lee, Ming-Yao] MingYao.Lee@aig.com		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 31/12/2019]		

ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

- AIG_SG (20/12/2019): Request to upload TP GIA Report
- AIG_SG (20/12/2019): No OI GIA Report

ALL ASSOCIATED TASKS [View All](#) [Search Tasks](#) [Create New Task](#) [Complete](#)















































Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SLQ333H (0130447812SG)
[SJH3033A]
TP
-

Dec 4 2019 12:00AM
[CHAN MEI LING ALISON]
Auto Dynamac Service Trading

Upload Documents			Upload Photos			Compose New Letter			Upload Video			Upload Audio			View			View In Browser					
Photos/Images															3 per page								
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)														Thumbnail		Print					
1	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
2	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
3	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
4	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
5	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
6	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
7	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
8	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
9	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
10	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
11	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
12	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
13	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
14	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
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18	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
19	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
20	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
21	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
22	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
23	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
24	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
25	16/01/20 09:52	General View														Load JPG		<input checked="" type="checkbox"/>					
26	16/01/20 09:53	General View														Load JPG		<input checked="" type="checkbox"/>					
27	16/01/20 09:53	General View														Load JPG		<input checked="" type="checkbox"/>					
28	16/01/20 09:53	General View														Load JPG		<input checked="" type="checkbox"/>					
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41	16/01/20 09:53	General View														Load JPG		<input checked="" type="checkbox"/>					
42	16/01/20 09:53	General View														Load JPG		<input checked="" type="checkbox"/>					
43	16/01/20 09:53	General View														Load JPG		<input checked="" type="checkbox"/>					

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
44	16/01/20 09:53	General View	 Load JPG	<input checked="" type="checkbox"/>
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46	16/01/20 09:53	General View	 Load JPG	<input checked="" type="checkbox"/>
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51	16/01/20 09:53	General View	 Load JPG	<input checked="" type="checkbox"/>
52	16/01/20 09:53	General View	 Load JPG	<input checked="" type="checkbox"/>
53	16/01/20 09:53	General View	 Load JPG	<input checked="" type="checkbox"/>
54	16/01/20 10:01	Odometer Reading	 Load JPG	<input checked="" type="checkbox"/>
55	16/01/20 10:01	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
56	16/01/20 10:02	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
57	16/01/20 10:02	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
58	16/01/20 10:02	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
59	16/01/20 10:02	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
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65	16/01/20 10:02	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
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73	16/01/20 10:02	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
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76	16/01/20 10:02	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
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88	16/01/20 10:03	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	16/01/20 11:29	TP - Singapore Accident Statement	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)**Show Remarks To:** ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/AIG19022263/GSF3E2

Date: 17/01/2020

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 1700094795
Claimant
Vehicle No : SLQ333H **Insured Vehicle No :** SJH3033A
Date of Loss: 04/12/2019 **Nature of Claim:** TP **Claim No:** 0130447812SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SLQ333H
Make & Model: MERCEDES-BENZ CLA180, 1.6 SB URBAN (R18 LED) (A) **Engine No:** 27091031229353
Reg. Date: 05/07/2017 (Man. Year: 2017) **Chassis No:** WDD1179422N485805
Colour: White **Odometer:** 37024 km
Engine Capacity: 1595 cc
Market Value/New Car Price: N/A
Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes **Footbrake (Serviceable):** Yes
Handbrake (Serviceable): Yes **Engine Modification:** No **Pre-accident Condition:**

CONDITION OF TYRES

Front Tyre Size: 235/35Z R19 **Rear Tyre Size:** 235/35Z R19
Front Left Side: Continental 5 mm **Rear Left Side:** Continental 5 mm
Front Right Side: Continental 5 mm **Rear Right Side:** Continental 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 18/12/2019
Date Inspected: 20/12/2019 **Inspected At:** Auto Dynamac Service Trading (HQ)
 BLK 3019A UBI ROAD 1, #01-28
 Singapore 408713
Estimated Period of Repair: 3.0 days

Adjuster: XING GUO QIANG**Manager:** Hiew May Fung

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT LH DOOR WING MIRROR COVER	Repair	0.00 F	*- F
2	1		*FRT LH DOOR WING MIRROR LAMP	Scratched	0.00 F	*- F
3	1		*FRT BUMPER	Repair	0.00 F	*- F
4	1		*FRT LH FENDER	Repair	0.00 F	*- F
5	1		*FRT LH WHEEL RIM	Cut	0.00 F	*- F
F=Franchise part.						
Total Parts (S\$)					0.00	0.00

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >