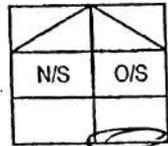


ASS. REC. BY: PAN REF: CS/CTI20006465/R19f3 | 9650

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / LWS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SLN 8886S
 at Workshop m/s CYCLE & CARRIAGE
 of 209, PANMAN GARDEN
 Insured: CTI
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition) 4pm
 Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: 79K
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

Veh No: SLN 8886S Yr Regn: 2017 / MAY
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: MITSUBISHI OUTLANDER 2.4 c.c 2360
 Colour: RED A/C: Insured / Std / NI / NA
 Sp. Reading: 047434 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JMYXTHF3W#2001891
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brake: Inorder / Jammed / Leaked / Burnt or _____
 Modi: Nil / Rim / STD A/Rim or _____
 Tyre Size: F: 225/55R18
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front Rear
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. 06/05/2020 D.O.I. 26/06/2020
 Survey held at CYCLE & CARRIAGE
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
REAR O/S
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
30/06/20 @ 3.37pm	revised to Ben Tang by email.

Date/Time, File Pass to? : Preli. Report
 : Final Report

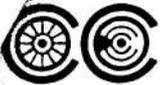
1) _____ Date/Time, File Return to?
 2) _____

Days Of Repair: _____
 Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$) _____
 : Interview (\$) _____
 : Tech. Invs (\$) _____
 : Weekend (\$) _____

Report Format: _____
 Lump Sum / I.B.H: (%) _____

Survey Fee: _____
 Transportation: _____
 S + RS. SI _____
 Photos _____
 Others _____
 TOTAL _____



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



ESTIMATE

Co Reg No : 1977014696

GST Reg No : MR-8500111-X

Table with 2 main columns: Invoice Name & Address, Owner Name & Vehicle Info. Includes details for Lim Koon Teck and vehicle specifications like SLN8886S*DC17/ 30/05/201.

Table with 6 columns: Account No, Terms, Date/Time Printed, CSE, Operator, WIP No. Row 1: CSM00041, Cash, 18/06/2020/ 15:56, QUD, 247 / DonBong, 53948.

Main table with 5 columns: Description of Goods / Services, Qty, Unit Price, Disc%, Amount. Lists items like RENEW ACCIDENT DAMAGED PARTS ON REAR BUMPER, REMOVE AND INSTALL PARKING ASSIST, etc. Includes handwritten notes and a box with LKK Auto Consultants notification.

LKK Auto Consultants hence notify the Repairer of the following:
• To resurvey before/after spray painting
• To display damaged part(s) during resurvey
• Parts prices are subject to confirmation
• Third party survey is on a "Without Prejudice" basis
• No illegal modification(s) is allowed
• Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Estimate

SURVEYOR NAME: Rasul - Hp 90010068
SURVEYOR SIGNATURE: [Signature]
DATE: 26/06/2020 @ 1600
REMARKS: 3 days

confirm & accepted by

Summary table with 3 columns: Description, Amount, Total Payable. Rows: Resy before print, 7% GST on 5211.00, Total Payable 5,575.77.

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include additional parts or labour which may be required after repair work has commenced.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 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.
- 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 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.
- 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	08/05/2020 12:23
Date Of Accident	06/05/2020 10:25
Exact Location Of Accident	CITADINE @ ROCHOR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE:

Vehicle Registration Number	SLN8886S
Insured/Policyholder	
Name Of Registered Owner	LIM KOON TECK
NRIC No	SXXXX965D
Email Address	LIMKOONTECKLKT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91773360
Alternative Phone No	OFFICE-91773360

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	OUTLANDER-2.4 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PARKING
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700010469-03
Cover Note Number	

Driver

Name of Driver	LIM KOON TECK
NRIC No	SXXXX965D
Date Of Birth	05/12/1985
Occupation	INDOOR
Date Of Driving Pass	27/04/2005
Driving Experience	15 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91773360
Fax Number	
Contact Number	OFFICE-91773360
Email Address	LIMKOONTECKLKT@GMAIL.COM

BLK 30 GHIM MOH LINK
#34-328
272030

Is driver an employee of the Insured's Company NO
No, Relationship of the Driver with the Insured OWNER
Vehicle Registration Number of Driver's Own Vehicle -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions NOT APPLICABLE, CAR PARKED
Road Surface MULTI STOREY CARPARK

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? NO
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? YES
If Yes, Please state which Police Station
Police Station Name CLEMENTI POLICE DIVISIONAL HQ (D DIVISION)
Police Station Address ROAD: 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: 1800-7740000 - FAX NO: 67741705
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

REFER ATTACHMENTS.

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 SLK8546P
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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

I understand, acknowledge, agree and consent that:

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



Policyholder's Signature
Date & Time:

08/05/2020



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

08/05/2020



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



**SINGAPORE
POLICE FORCE**

POLICE REPORT (NP299)

CONTINUATION OF REPORT



D/20200508/7007

2 of 2

Report No. D/20200508/7007

Victim			
Person Name	LIM KOON TECK		
ID Type	NRIC NO	ID No	
Gender	Male	Age	34
Race	Chinese	Language	English
Occupation	Chemical engineer (general)	Address Type	
Address	APT BLK 30 GHIM MOH LINK #34-328 SINGAPORE 272030	Mobile No	91773360
Is Informant A Victim?	Yes		
Person Name	LIM KOON TECK (Informant)		

Signature Of Officer Recording The Report: Not applicable
Signature Of Interpreter: Not applicable
Officer In-Charge Of Case:

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 08/05/2020 11:11
Classification Of Case:

Authentication Stamp

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	965D
Vehicle No.:	SLN88865
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Jun 2020
Vehicle Make:	MITSUBISHI
Vehicle Model:	OUTLANDER 2.4 CVT 4WD
Primary Colour:	Red
Manufacturing Year:	2017
Engine No.:	4B12SY7663
Chassis No.:	JMYXTGF3WHZ001891
Maximum Power Output:	123.0 kW (164 bhp)
Open Market Value:	\$20,462.00
Original Registration Date:	30 May 2017
First Registration Date:	30 May 2017
Transfer Count:	0
Actual ARF Paid:	\$20,647.00
PARF Eligibility Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 May 2027
PARF Rebate Amount:	\$15,485.00
COE Rebate Details	
COE Expiry Date:	29 May 2027
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$54,000.00
COE Rebate Amount:	\$37,393.00
Total Rebate Amount:	\$52,878.00

The information contained herein is correct as at 26 Jun 2020

OK

Mitsubishi Outlander 2.4A

Overview

Financial

Accessories

Similar

Research

Photos

Map

CARRO

SOUTHEAST ASIA'S LARGEST CAR MARKETPLACE

Price **\$78,800**

Depreciation **\$10,070 /yr**
View models with similar depre

Reg Date **27-Apr-2017**
(6yrs 10mths COE left)

Mileage **53,741 km (17k /yr)**

Manufactured **2017**

Road Tax **\$1,636 /yr**

Transmission **Auto**

Dereg Value **\$51,334 as of today (change)**

OMV **\$19,867**

COE **\$53,300**

ARF **\$19,867**

Engine Cap **2,360 cc**

Power **123.0 kW (164 bhp)**

Curb Weight **1,625 kg**

No. of Owners **1**

Type of Vehicle **SJV**

Features

Leather Upholstery, A Heated Steering Wheel, LED Headlights, A Power Liftgate, A Multiview Camera: Forward Collision Mitigation. View specs of the Mitsubishi Outlander (2014-2015)

