# **Shirley Hiew (LKK Auto)**

From: Koh, Victor-CK <Victor-CK.Koh@aig.com>
Sent: Tuesday, 17 November 2020 6:05 pm

To: Shirley Hiew (LKK Auto)
Cc: SUR; Do-Not-Reply

Subject: RE: Alert - Adj Mandate Approved (S\$2982.00) - SLR5653X - Claim Handler: Azlan,

Syazairdina

#### Resurvey photos required.

From: Shirley Hiew (LKK Auto) [mailto:ShirleyHiew@lkkauto.com]

Sent: Tuesday, November 17, 2020 4:29 PM

**To:** Koh, Victor-CK **Cc:** SUR; Do-Not-Reply

Subject: [EXTERNAL] RE: Alert - Adj Mandate Approved (S\$2982.00) - SLR5653X - Claim Handler: Azlan, Syazairdina

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

Dear Victor,

Kindly let us have your approval for labour no.1.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

#### **LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: <u>Sur@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Note: We are on work from home arrangement. All correspondence should be made via email. Submission of claim related documents will be in softcopy. Any inconvenience caused is much regretted.

From: Do-Not-Reply <do-not-reply@merimen.com>

Sent: Friday, 6 November 2020 2:40 pm

To: victor-ck.koh@aig.com
Cc: SUR <sur@lkkauto.com>

Subject: Re: Alert - Adj Mandate Approved (\$\$2982.00) - SLR5653X - Claim Handler: Azlan, Syazairdina

This mail is associated with:

\*SLR5653X (9629521976SG)

OD

Oct 27 2020 10:00AM

[LIM KNG YAU]

Premium Automobiles Pte Ltd

Dear Victor,

According to our surveyor, please see point 2 (i) of zoom meeting minutes as attached.

Spray painting required for rear bumper.

Hence labour (1) is applicable.

Thank you. Best Regards,

### Shirley Hiew | Case Handler **LKK Auto Consultants Pte Ltd**

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

<-- Original Message -->

From: AIG\_SG To: LKK\_HQ

Sent On: 05/11/2020 04:31 PM

Subject: Alert - Adj Mandate Approved (\$\$2982.00) - SLR5653X - Claim Handler: Azlan, Syazairdina

Approved: 2982.00: Authorise repair. Labour 1 not necessary bumper repair. Re-inspection to be done for damage check and supplementary items / labour with clear photos.

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

- 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.
- 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 "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, nvestigation 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: 27/10/20

1145AM

Driver's Signature (If driver is not the po olicyholder)

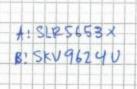
Date & Time: 27/10/20

Reporting Centre Perso nel's Signature Name: Lim bee Exonq NRIC/FIN No.:

GIARMC SketchPlanForm V3

11-45.AM

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE MURENING OF DATE 27/10/2020 TEMS AROUND 10.300m.
I was DRIVING MH CAR OUT OF THE CAR PARK LOT & I ACCEDENTED
(RASH MY CAR LEFT BACK ONTO THE CAR PARKEN NEXT TO ME
VECTILLE NUMBER & SKY9624U CONTING SCRAFCINES OF THE FRAT
RELATE BUMPER & HEADLECHT.

DECLARATION

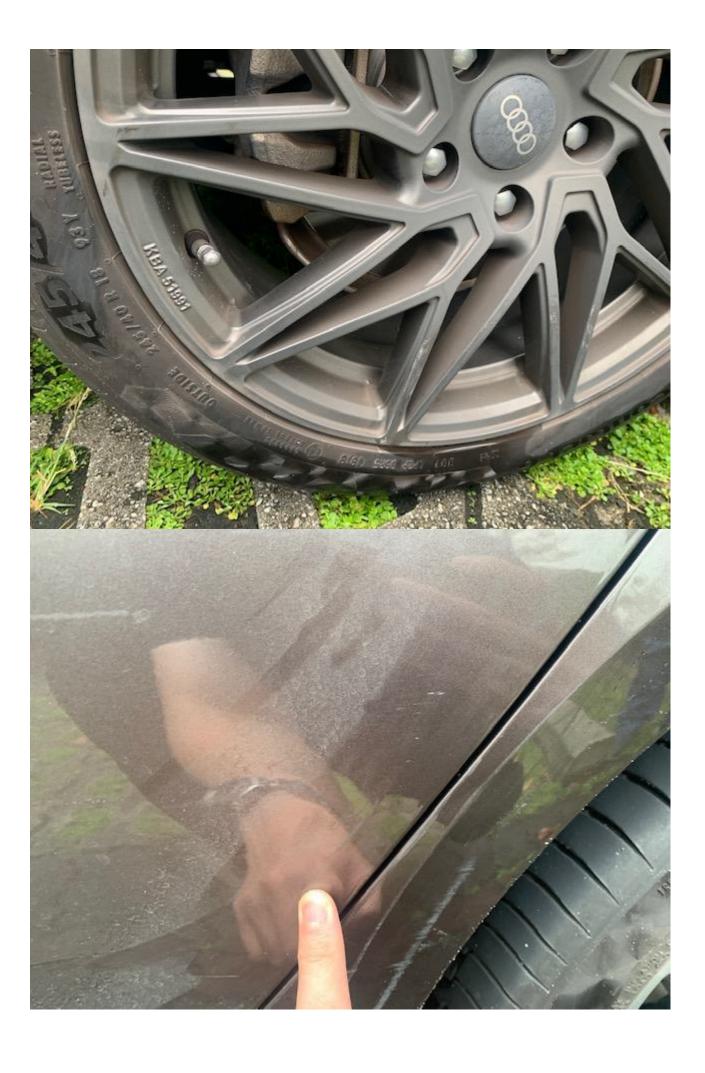
I/We declare the foregoing particulars are true in every respect.

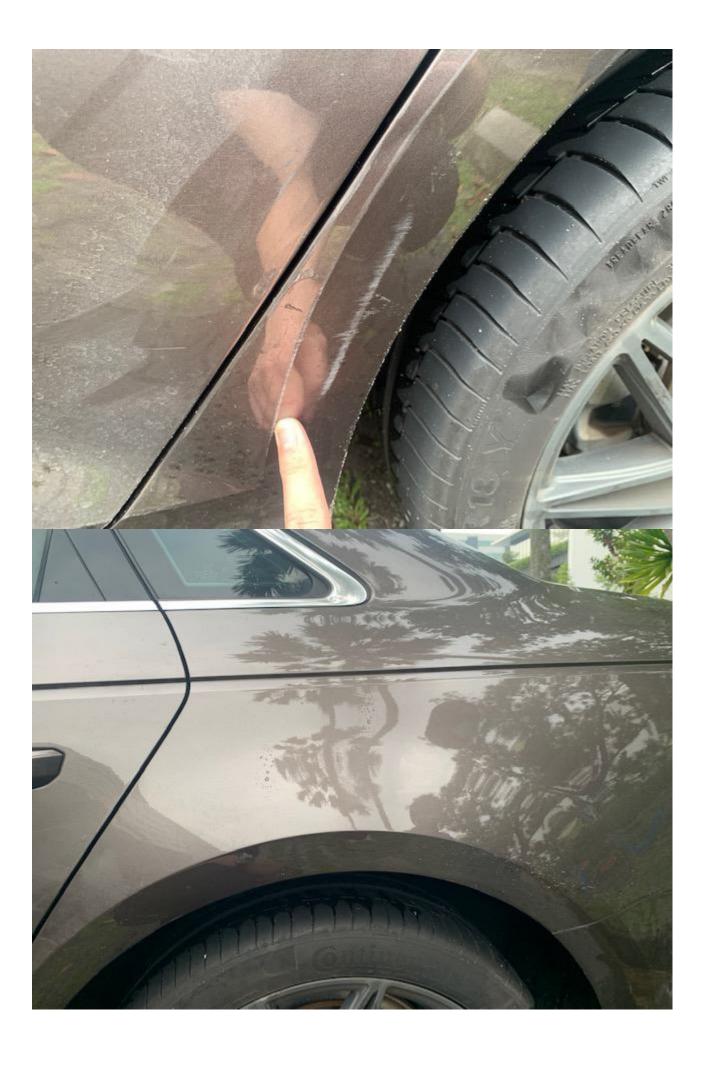
Policyholder's Signature
Date & Time: 20/10/20
11-45 AM
GIARMC SkenchPlanForm\_V3

Driver's Signature
(If driver is not the policyholder)
Date & Time: 26/10/20

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

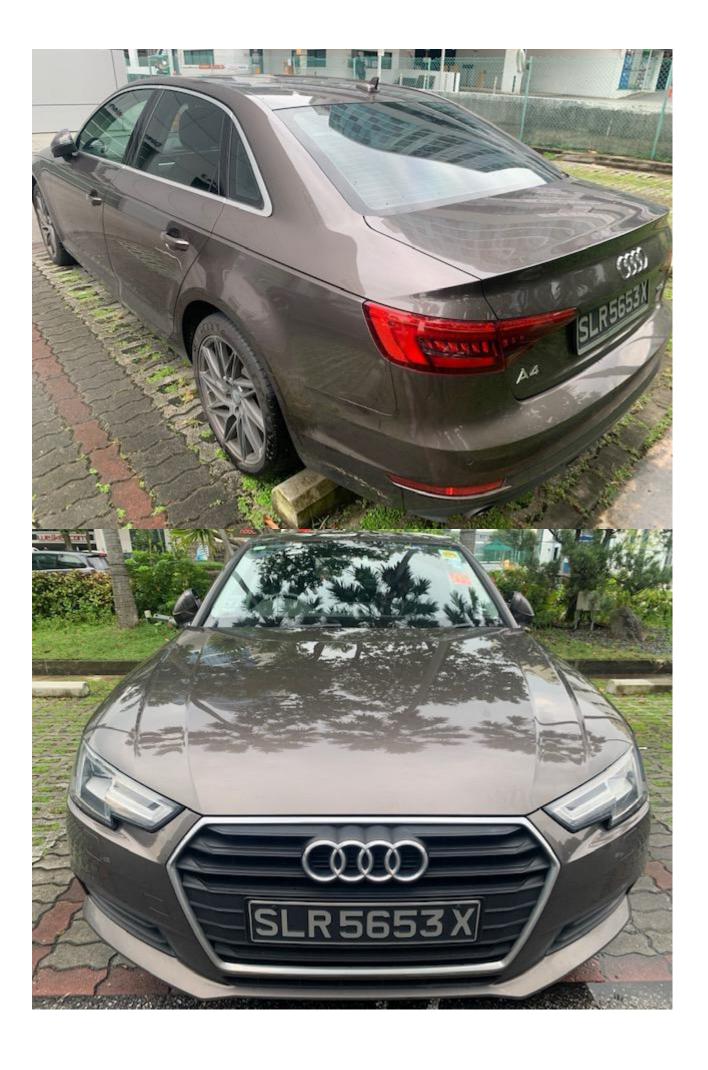
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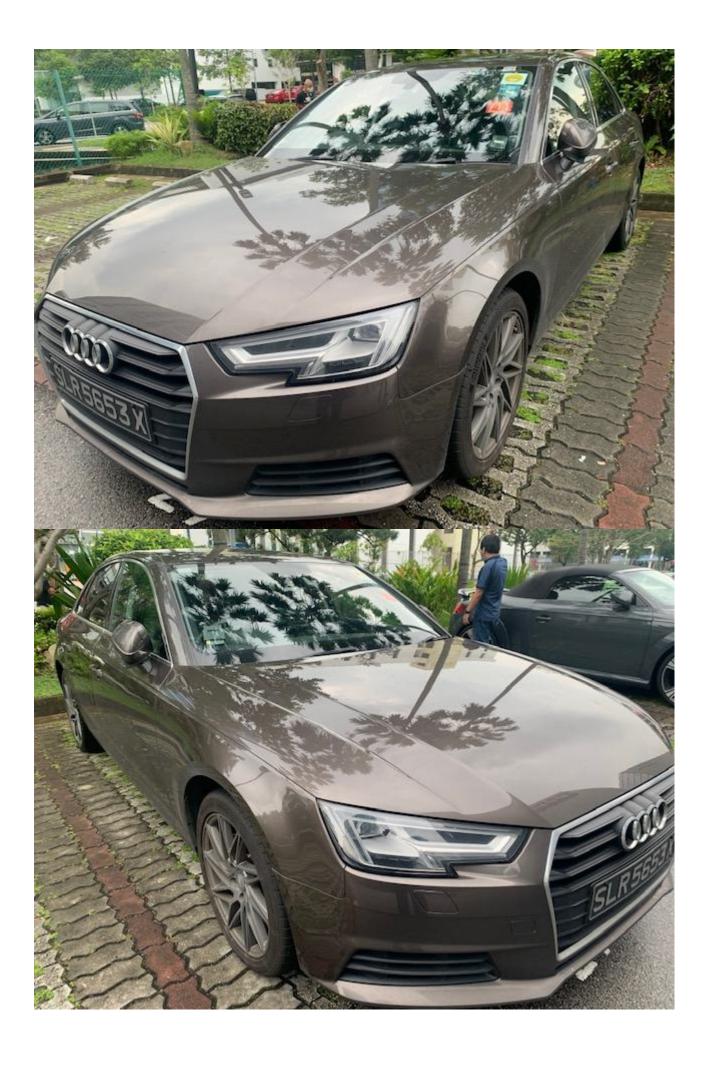


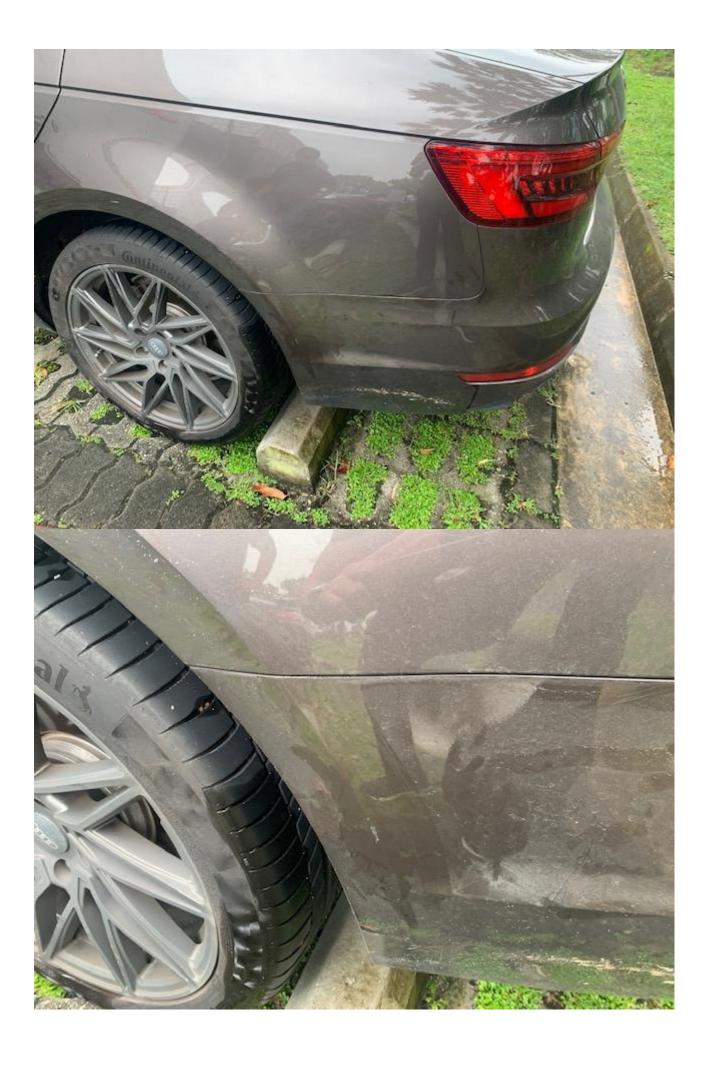




















# Qualified Driving Licence

Qualified Driving Licence Number
Status of Qualified Driving Licence
Class(es) of Qualified Driving Licence
Expiry Date

S7311609J

Valid

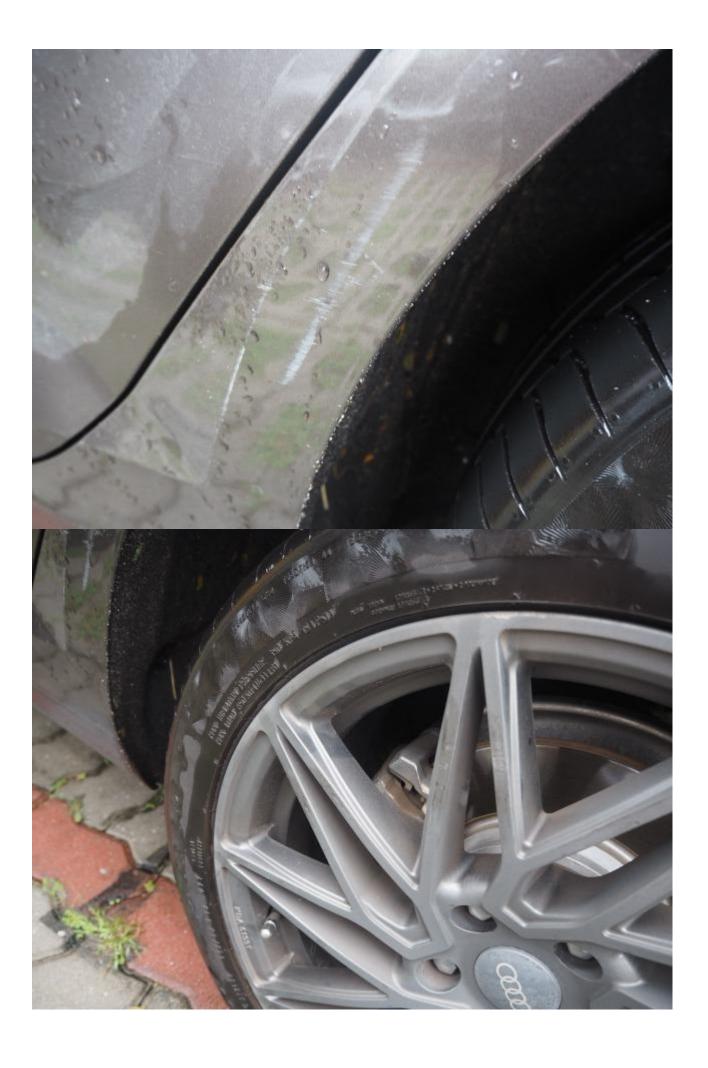
3

Lifetime unless revoked, suspended

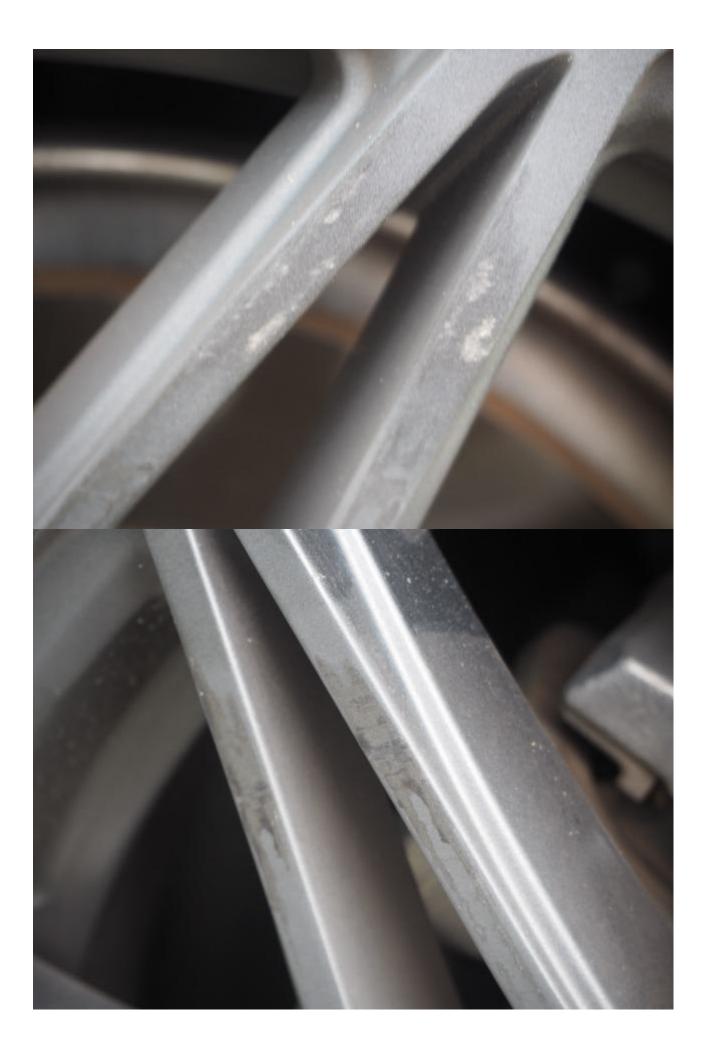








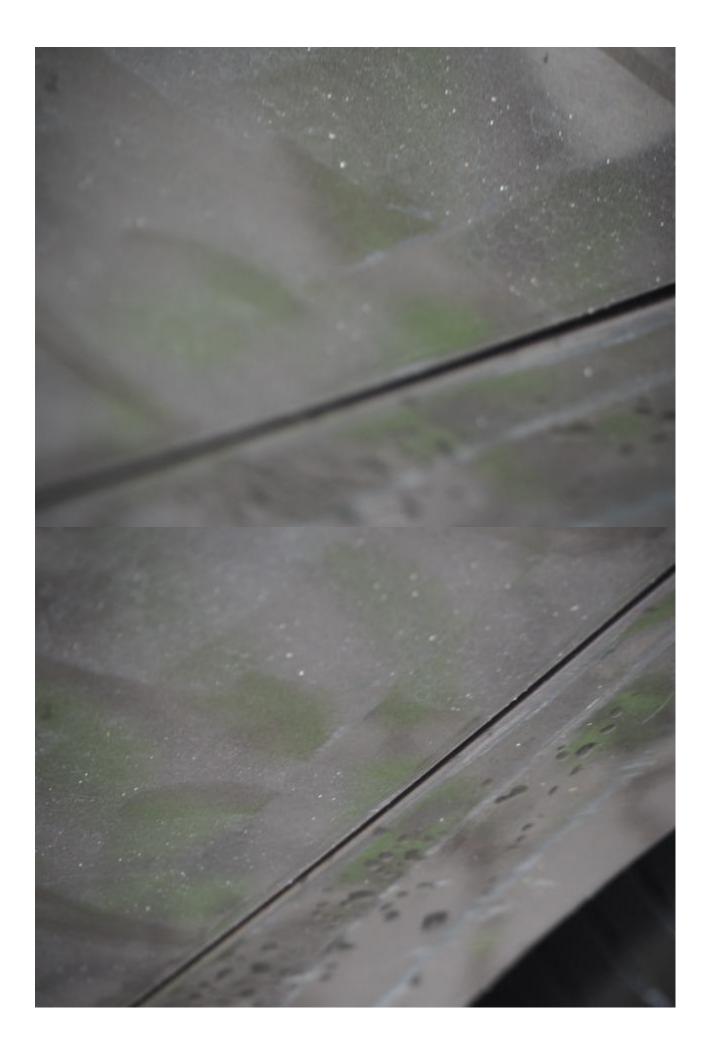












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