

## Shirley Hiew (LKK Auto)

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**From:** Shirley Hiew (LKK Auto)  
**Sent:** Tuesday, 17 November 2020 4:29 pm  
**To:** victor-ck.koh@aig.com  
**Cc:** SUR; Do-Not-Reply  
**Subject:** RE: Alert - Adj Mandate Approved (S\$2982.00) - SLR5653X - Claim Handler: Azlan, Syazairdina

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: [Sur@lkkauto.com](mailto:Sur@lkkauto.com) | 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 (S\$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](mailto: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

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

- 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: 27/10/20  
11:45AM

Driver's Signature

(If driver is not the policyholder)

Date & Time: 27/10/20  
11:45AM

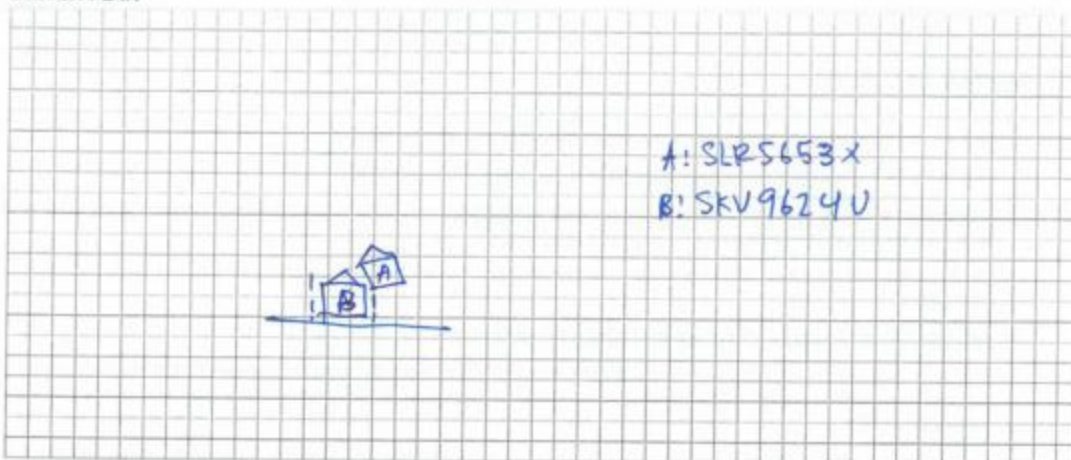
Reporting Centre Personnel's Signature

Name: Lim Bee Eng

NRIC/FIN No.: 67444569M



# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE MORNING OF DATE 27/10/2020 TIME AROUND 10.30AM,  
I WAS DRIVING MY CAR OUT OF THE CARPARK LOT & I ACCIDENTLY  
CRASH MY CAR LEFT BACK ONTO THE CAR PARKING NEXT TO ME  
VEHICLE NUMBER SKV9624U CAUSING SCRATCHES ON THE FRONT  
RIGHT BUMPER & HEADLIGHT.

## DECLARATION

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

Policyholder's Signature

Date & Time: 26/10/20  
11.45AM

GIARMC SketchPlanForm\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26/10/20  
11.45AM

Reporting Centre Personnel's Signature

Name: Lim Kee Seng

NRIC/FIN No.:

GXXXX569M













































**Qualified Driving Licence**

Qualified Driving Licence Number	S7311609J
Status of Qualified Driving Licence	Valid
Class(es) of Qualified Driving Licence	3
Expiry Date	Lifetime unless revoked, suspended



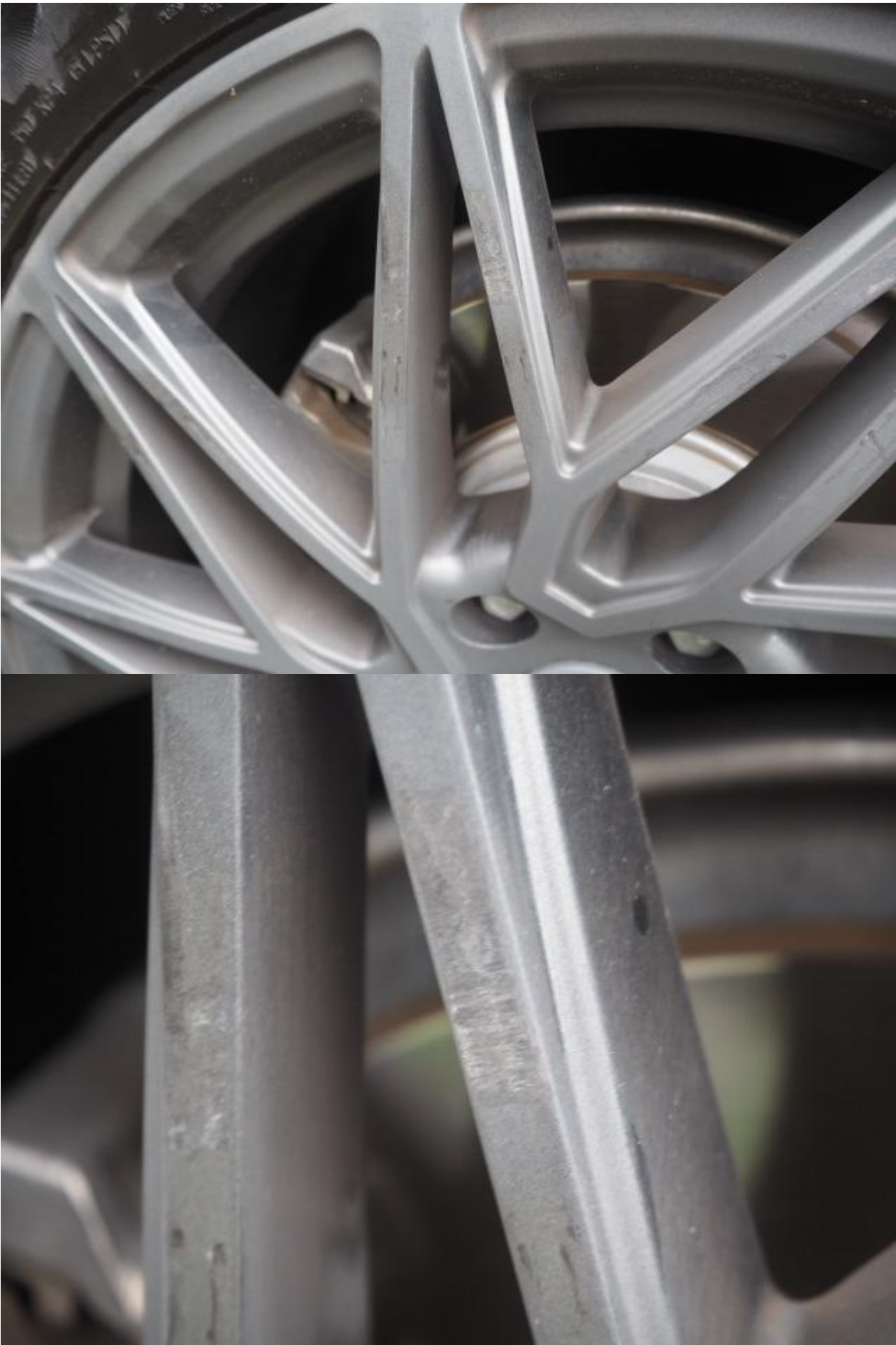




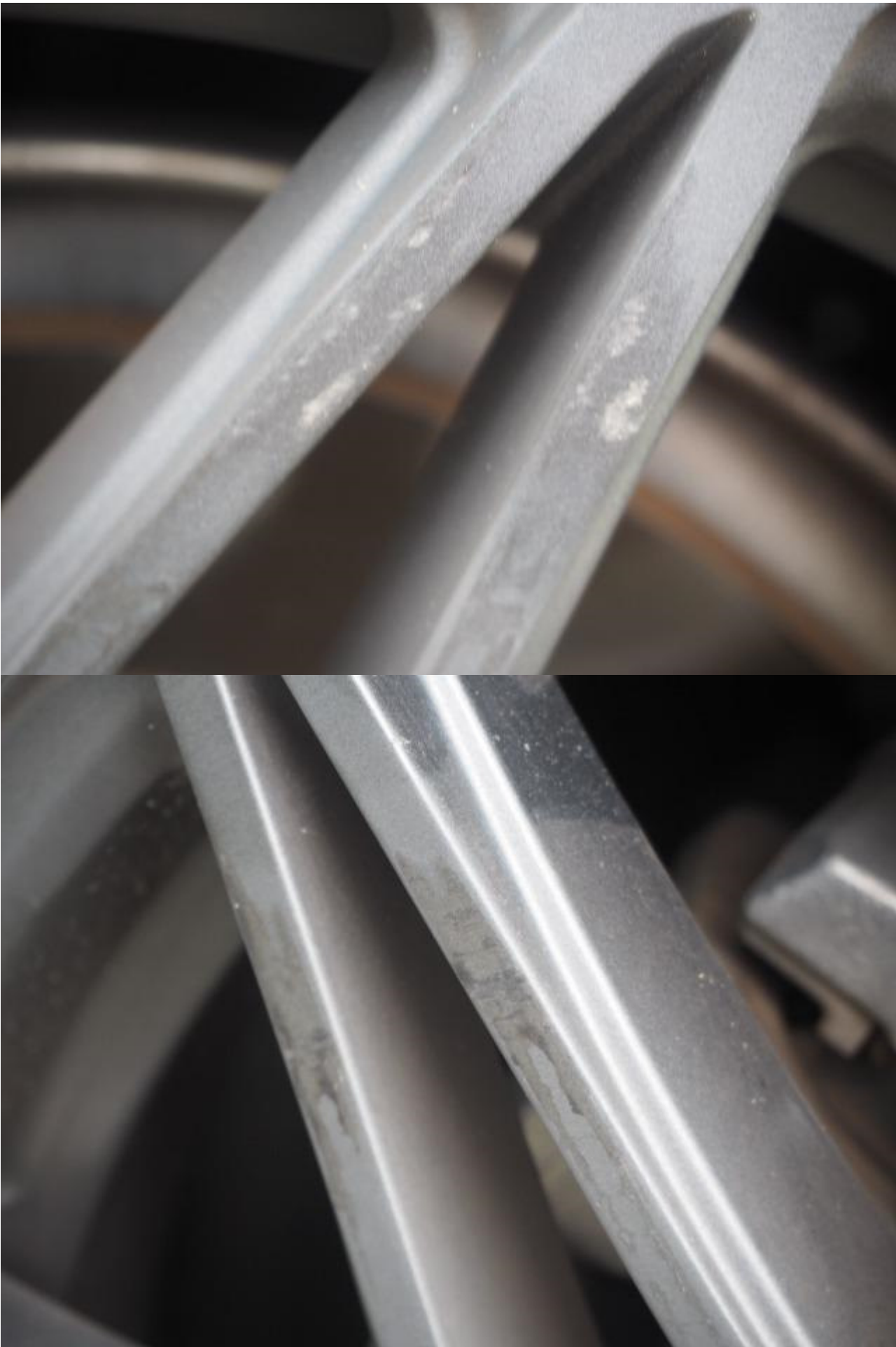
























This is an auto-generated email. Do not reply to this email.

Sent by : Hiew May Fung (LKK Auto Consultants Pte Ltd)