ASS. REC. BY: Steve 1 65/A16 2	0013242/Egd3
From: Date:	Veli No. JMC 8687X Yr Regn: 267/18 Type: (M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
Estimated Cost:	
OD TP/WS/JP RES/OD RES/EVA/INV/MY	Truck / Trailer or
To Inspect Vehicle No:	Make: Mitchish Attage c.c 1193
el Workshop m/s	- CORDI
of	Sp. Resound
Insured:	Eng/No: 0574174-11001967
Policy No. 1800085929	CINO: MIMISSIAISAJIAUSTESS
Claims No. 0495508771SG	Gen. Cond: Good / Fair / Poor / Burnt
Sum insured: Excess: 300	Steering: Inforder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Interder / Jammed / Leaked / Burnt or
Make of Veh;	Modi: NII / S/RIm / STO A/Rim or
	/ Tyre Size: F: 85/55R/5
\frac{1}{2}	R:
(Policy Condition)	OS BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Remark: The veh had commenced its repair at the time of inspection.	TOYO I YOKO OF
repair at the time of mapoonom.	- Control Control
Bal. or Market Value:	Fron Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. R/Bal mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. J mm L/Bal. J mi
Est. Repairs: 3 days Res.: Yes or No	D.O.A. 29/11/79 0.0.1. 2/12/29
2 Val. Van ar No	Survey held al Cycle & Colling
Lum Sum: % 3 Val.: Tes ul No	Des. of Damages, Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS	
Vehicle: IN	The U/C / Chassis frame / Body Structure affected due to collision
	110 00 1 011111111111111111111111111111
Date / Time Action / Instruction	
03/12/20@10am revert to AIG via Merimen.	
	via Mariman
04/12/20@3.07pm Kok Chong informed C/A	
04/12/20@4.03pm Informed Kevin C/A & ex:\$ 18/12/20@3.35pm confirmed with Ms Loi final	
10/12/20@5.55pm committee with this committee	ing \$0040.01, 3 days (red \$0005.05, 5470)
ale/Tine, File, Pass 10? : Prell. Report	Days Of Repair: 3
Final Report	Resurvey No. of Trip: 2 Survey Fee:
Uate/Time, File Return to?	Transportation:
Add I	Fee: : Site Insp (\$)_s+Rs_Si
·	: Interview (\$) Photos
	: Tech. Inve (3
Peperforme: MER-OD	
1900 Som / LE.I: FF 6046.87	:Weelend (\$)



CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED PANDAN GARDENS CUSTOMER SERVICE CENTRE

MITSUBISHI MOTORS

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

ESTIMATE

GST Reg No : MR-8500111-X

197701469G		Owner Name & Vehicle Info
Invoice Name & Address AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPT 78 SHENTON WAY #08-16	Cust No/Name Reg No/Reg Date Date In/Mileage Chassis No	/WONG SOOK LENG SMC8687X / 26/07/201 01/12/2020/ 0 MMBSTA13AJH002253
AIG BUILDING	Fnaine No	3A92UGY1382
SINGAPORE 079120 Contact No 6419 1892	Make/Model	MIT/18MY ATTRAGE 1.2 CVT
	Colour/Trim	AOG COOL SILVER MET/ BK BLACK

		Date/Time Pr	inted	CSE	Operator		WIP No			
ccount No	Terms	01/12/2020/		OUK	282 / Kevin Le	ong	60261			
AX00008	Credit	Description	of Good			Qty	Unit Price	Disc%	An	nount
		Description	01 0000	37 00111000					450	900.0
PNT88000 REPLACE F PNT98000	FRT BUMP	ER, BODY KIT	& AFFEC		45°				350	700.0
PAINT WOR		T BUMPER & BO		38	1					30.0
CHECK WIF		HASSIS ELECTR GNOSTIC CHECK			O TEST					120.0
USING HI-	-SCAN PR	O TEST								50.00
SUNDRY		MBER PLATE WI	THERAM		ime	off@)		20	50.00
SUNDRIES		TS X L	L	7)(6		21 (4.60-	7 1643.00			1314.40
HEADLAMP						1.00	660.00			508.20
FACE, FR	BUMPER	/ ll 1	P			1.00	703.00 62.00			47.74
COVER, HE	ADLAMP S	UPT PANEL "				1.00	165.00			127.05
GRILLE, F	R UNDER	D 1 1 1				1.00	13.00			10.01
BRACKET, AIR DAM,						1.00	18.00	23.00		13.86
GRILLE, R						1.00	554.00			426.58
MARK, THE						1.00	69.00			53.13
REINFORG	EMENT, FR	BUMPER (1.00	466.00	23.00		358.82
	Ste	we CLKK,) 01 E) - N/1 /	7					
			_	3 dys						
			2	12/19, 1 PIP	1.30pc					
Confirm &				M B.	L 5U			1		
			-1	,	J	7% GST on	Net 5251.1		5	,251.1 367.5
K Auto Consu	iltants hen	ce notify					: W 5000 5000 - 0440		5/4	
e Repairer of	the following	ng:				T	otal Payab	e	5	,618.6

Park prices are subject to communition.

Validity of this estimate is, 14 days from the park of quote. This is a computer generated document, no signature is required.

ESTEMBATE OF OFFICE THE WOULD BE WOULD BE

A20C1000G / CYCLE & CARRIAGE AUTOMOTIVE PTE LTD TRY DATE & TIME: 01/12/2020 14:53 (SGT) DBMITTED BY 1500CCUAN LAURO JR ARAOS ERSION: 1 (01/12/2020 14:53 (SGT))



SINGAPORE ACCIDENT STATEMENT

Please report <u>correctly</u> the details of the accident to speed up the claims process. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

2. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or witholding 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 Submission 01/12/2020 14:53 (SGT) Date of Accident 29/11/2020 15:15 (SGT) **Exact Location of Accident** Tampines Ave 3, Singapore Additional Location Information TAMPINES AVENUE 3, OPPOSITE SPC PETROL STATION Country/State of Loss Singapore

EDETAILS OF OWN VEHICLES

SMC8687X INSURED/POLICYHOLDER company? Name Of Registered Owner WONG SOOK LENG NRIC No SXXXX411J **Email Address** paulinewsl@gmail.com Mobile Phone No (Phone) +65-82230469 Alternative Phone No. +65-82230469

VEHICLE PARTICULARS

Vehicle Registration Number

Manufacturer Mitsubishi Model Attrage Variant Exact purpose for which vehicle was being used at time of arcident Private use Are you claiming under your own insurance policy for repair to our vehicle? Yes Vehicle Category

Private car

INSURANCE COMPANY

Name of Insurance Company AIG Type of Coverage Comprehensive Fleet Policy Policy Number 1800085929 Cover Note Number

_DRIVER

Name of Driver NRIC No Date Of Birth Occupation

JACKIE LOH JIAHAO SXXXX114E 26/10/1992 Indoor

Of Driving Pass 06/07/2012 ving experience 8 YEARS AND 4 MONTHS Male lender (Phone) +65-87497549 Mobile Number All. Phone Number jackieloh92@gmail.com r_{mail} Address BLK. 885 TAMPINES STREET 83 Address #06-19 SINGAPORE Address complement 520885 Postcode is the driver the policyholder? No If No. Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Collision - Head to Rear Type of Accident Clear */eather Conditions Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? LIDETAILS OF POLICE ACTION Was the accident reported to the police? No 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? IDETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJJ5299B
Vehicle Manufacturer	Mini
Vehicle Model	_
Vehicle Variant	_
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	- iivate cai
Contact Number	(Phone) +65 02762866
Address	(Phone) +65-92762869
Address complement	- 55
	-
	#
Insurance Company Name	2

or Damage alls of property damaged in accident or passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 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
- 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
 - (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
 - 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: 1/12/2020

1.USPM

Reporting Centre Personnel's Signature

NRIC/FIN No .:

TANSINES AVENUES MY CON- STS SLOPERS SI Fed light Inches

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	u 116 buck as I d.d not
	the other vehicle's fuck
hike in three If was a red light junction	

DECLARATION

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

Policyholder's Signature Date & Time: Driver's Signature
(If driver is not the policyholder)
Date & Time: 1/2 120

1.05PM

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

(では、大きなは、対して、ちゅうへの)というは、まました。

E & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

of Policyholder

: WONG SOOK LENG

geried of Insurance

: 26 Jul 2020 To 25 Jul 2021

Engine No. Chassis No. : 3A92UGY1382 : MMBSTA13AJH002253

Vehicle No.

: SMC8687X

Policy No.

: 1800085929-01

Endorsement No. Issued Date

: 28 Jun 2020

N. V. Tapagon

ABOUT THE GOVER

Make/Model

: MITSUBISHI ATTRAGE 1.2 CVT

Engine Capacity/Tonnage : 1,193.00 CC

Sum Insured : Market Value

First Year of Registration : 2018

Driver Restriction

: NA

Off Peak Car ; No

Insuring with COE/PARE

: Yes

person or Classes of Persons Entitled to Drive*:

properties. The Piphocholder

grams one personance is always or the holloyholder or any authorised driver only it he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less I years driving expenence

Age Condition

: All Age Condition

Use only for social domestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or pushess or use for any purpose in connection with Motor Trade

missions randered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport and Transport Act 2019 are not to be included under these headings. Loss of Use 1500cc - 1600cc

re - SD Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2 Properly Damage - \$0

Windscreen: \$100

Nameo Driver and Excess (where applicable)

WO'NG SOOK LENG - \$600 (Own Damage), \$600 (Flood Cover)

PPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Supplied Sup

orner Activities Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg or SE Moorie Aug. Simply search and download "AIG SG" from iTunes or Google Play.

THE STATE OF THE S

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

IV./a nereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504620202

C&CMICP2 - AL

239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

AIGSGMOBILEADO

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