

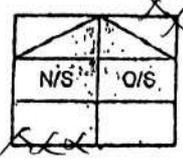
ASS. REC. BY: Steve REF: A10

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD/TP/WS/TP RES/OD-RES/EVA/INV/MY
To Inspect Vehicle No: _____
at Workshop m/s _____
of _____
Insured: _____
Policy No. _____
Claims No. _____
Sum Insured: _____ Excess: _____
(Client's Record)
Make of Veh: _____

Veh No: SMP 240K Yr Regn: 6/9/19
Type: (M)Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____
Make: Mitsubishi Attrage c.c. 1193
Colour: Silver A/C: Insured / Std / NI / N
Sp. Reading: 28459 T/Radio: Insured / Std / NI / N
Eng/No: _____
C/No: MMB STAIBAKI 092668
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Mod: Nil / S/Rim / STD A/Rim or
Tyre Size: F: 185/55R15
R: _____
(S) BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or _____

(Policy Condition)
Remark: The veh had commenced its repair at the time of inspection.
Bal. or Market Value: _____
IDAC Accident Rpt: _____ Consistent? : Yes or No
GIA / PR Seen: _____ Consistent? : Yes or No
Est. Repairs: _____ days Res.: Yes or No
Cum Sum: _____ % 3 Val.: Yes or No
CA / REV / REP. / 24 HRS
Date: _____ Person Contacted: _____
Vehicle: IN / OUT



Front Rear
R/Bal. 4 mm R/Bal. 4 mm
L/Bal. 4 mm L/Bal. 4 mm
D.O.A. 15/12/20 D.O.I. 16/12/20
Survey held at Cycle & Carriage
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear LH & front RH
The U/C / Chassis frame / Body Structure affected due to collision

Date / Time	Action / Instruction
	<u>MK-57K</u>

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

Days Of Repair: 12
Resurvey No. of Trip: 1

Survey Fee:	
Transportation:	
S + RS, SI	
Photos	
Others	
TOTAL	

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

Report Formed: Merimen
Comp Sum / E.F. : \$9819.71



CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE
 209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



ESTIMATE

Co Reg No : 197701469G

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPARTMENT 78 SHENTON WAY #08-16 AIG BUILDING SINGAPORE 079120 Contact No 64191000	Cust No/Name KCV12020/F00 MEI LIN ROSELINE MRS.KONG M Reg No/Reg Date SMP240K*DC17P/ 06/09/201 Date In/Mileage / 0 Chassis No MMBSTA13AKH002668 Engine No 3A92UHX8994 Make/Model MIT/19MY ATTRAGE 1.2 CVT Colour/Trim A06 COOL SILVER MET/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
14X00000	Credit	16/12/2020/ 10:35		442 / Cocolu	60765			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
E PNT88000								3600.00
RENEW REAR BUMPER, BOOTLID, REAR FENDER LH, REAR LAMP HOUSING LH REAR END PANEL, 2					450 x 6			2700
E PNT88000								240.00
REMOVE & INSTALL REAR WINDSCREEN								225.00
E PNT88000								225.00
REMOVE & INSTALL REAR COMARTMENT TRIMS & REAR FENDER TRIMS								2100.00
E PNT98000								1575
SPRAY PAINT FOR REAR BUMPER, BOOTLID, REAR END PANEL, REAR FENDER RH, REAR LAMP HOUSING RH, LH					350 x 45			80.00
M SUNDRY								40.00
APPLY SEALANT FOR REAR WINDSCREEN								120.00
M SUNDRY								40.00
C&C LOGO								120.00
M SUNDRY								30.00
APPLY SEALANT FOR ACCIDNET PORTION								120.00
A 54900099								120.00
CHECK WIRING & ELECTRICAL SYSTEM								225.00
A 10028901								(photo)
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST USING HI-SCAN PRO TEST								20.00
A 54900099								120.00
REMOVE & INSTALL FUEL TANK SYSTEM								350.00
M SUNDRY								120.00
Sundry								350.00
B WHEELALIGNMENT								120.00
To Conduct Computerize Full Wheel Alignment								350.00
E PNT98000								575.96
SPRAY PAINT FOR FRT BUMPER					1.00	748.00	23.00	575.96
M FACE,RR BUMPER					1.00	28.00	23.00	21.56
M BRACKET,RR BUMPER,LH					1.00	791.00	23.00	609.07
M PANEL,TRUNK LID					1.00	203.00	23.00	156.31
M HINGE,TRUNK LID,RH					1.00	203.00	23.00	156.31

Estimate

Confirm & accepted by

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 any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



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ESTIMATE

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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
LAX00000	Credit	16/12/2020/ 10:35		442 / Cocol u	60/65

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M HINGE, TRUNK LID, LH	1.00	203.00	23.00	156.31
M WEATHERSTRIP, TRUNK LID / CRU	1.00	157.00	23.00	120.89
M LATCH, TRUNK LID X	1.00	218.00	23.00	167.86
M PANEL, QTR, OTR LH / OO	1.00	755.00	23.00	581.35
M PANEL, RR COMB LAMP HSG, LH / OO	1.00	60.00	23.00	46.20
M EXTN, QTR PANEL, UPR OTR LH / OO	1.00	118.00	23.00	90.86
M PANEL, RR END / OO	1.00	425.00	23.00	327.25
M SPACER, RR WINDOW / MC	3.00	9.00	23.00	20.79
M STOPPER, WINDSHIELD GLASS / MC	2.00	3.00	23.00	4.62
M MUD GUARD, RR LH	1.00	41.00	23.00	31.57
M SHIELD, RR WHEELHOUSE, LH	1.00	40.00	23.00	30.80
M GARNISH, RR END PANEL	1.00	336.00	23.00	258.72
M MARK, THREE-DIA / MC	1.00	69.00	23.00	53.13
M MARK, ATTRAGE / MC	1.00	21.00	23.00	16.17
M TRIM, RR END	1.00	66.00	23.00	50.82
M BOARD, TRUNK ROOM FLOOR / BR	1.00	195.00	23.00	150.15
M TRIM, TRUNK ROOM SIDE, LH / CRU	1.00	160.00	23.00	123.20
M LAMP ASSY, COMB, RR LH / BR	1.00	335.00	23.00	257.95
M REFLECTOR	1.00	23.00	23.00	17.71
M BUZZER, KEYLESS OPERATIO, RR / BR	1.00	91.00	23.00	70.07
M ANT, KEYLESS OPERATION, RR / BR	1.00	96.00	23.00	73.92
M COVER, RR VENTILATOR	1.00	40.00	23.00	30.80
M DUCT, RR VENTILATOR	1.00	30.00	23.00	23.10

Estimate

19.30 am, 16/12/20
Stere CLKK)
OO- Nm Aud
Excess - ?
P/P
By Bel spy
12 days

Confirm & accepted by 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 work(s) must be resurveyed and authorized signatory and company stamp	7% GST on	11337.14	11,337.14
	Nett	793.60	11,337.14
	Total Payable		12,130.74

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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 Submission	16/12/2020 09:56 (SGT)
Date of Accident	15/12/2020 14:40 (SGT)
Exact Location of Accident	8 Elliot Rd, Singapore 458694
Additional Location Information	8, ELLIOT WALK SINGAPORE 458663
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMP240K

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	FOO MEI LIN ROSELINE MRS KONG MEI LIN ROSELINE
NRIC No	SXXXX999I
Email Address	ROSSYKONG@GMAIL.COM
Mobile Phone No	(Phone) +65-90681923
Alternative Phone No	+65-90681923

VEHICLE PARTICULARS

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

INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900157279
Cover Note Number	-

DRIVER

Name of Driver	FOO MEI LIN ROSELINE MRS KONG MEI LIN ROSELINE
NRIC No	SXXXX999I
Date Of Birth	01/07/1956
Occupation	Indoor

Year Of Driving Pass	04/01/1983
Driving experience	37 YEARS AND 11 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90681923
Alt. Phone Number	+65-90681923
Email Address	ROSSYKONG@GMAIL.COM
Address	8 EILLOT WALK
Address complement	-
Postcode	458663
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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

Type of Accident	Collided into Parked Vehicle
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS 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?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY II

Vehicle Registration Number	XE4394B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	SHAHRUDIN BIN SELAMAT
Contact Number	(Phone) +65-97523800
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-

Area Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

WITNESS DETAILS

WITNESS 1

Name
Phone
Email

RICHARD KONG
(Phone) +65-93822426
-

WITNESS 2

Name
Phone
Email

MR LEE
-
-

WITNESS 3

Name
Phone
Email

MR LIM
-
-

SKETCH PLAN

IMPORTANT NOTICE

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 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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 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:

15/12/20 5.35 pm

Driver's Signature

(If driver is not the policyholder)

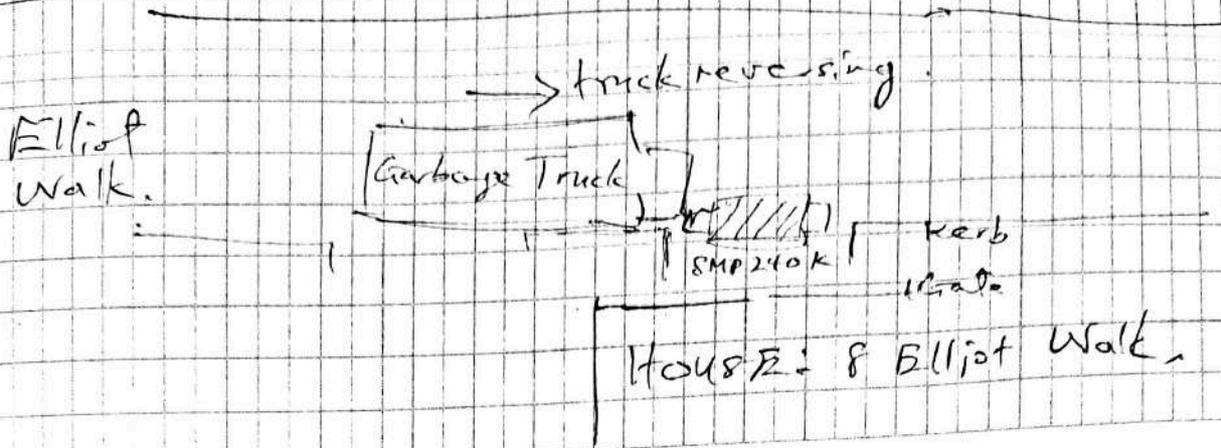
Date & Time:

15/12/20 5.35 pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I parked my car SMP 240 in front of my house gate, well into the entrance of the driveway. At about 2.40 pm on 15 Dec. 2020, we noticed the garbage truck reversing at a speed along Elliot Walk. My husband, Richard Kong (~~93822426~~) (93822426) saw the truck hitting the left side corner of the rear of my car, pushing the car about 2.5 metres up onto the kerb. That section of my car was badly damaged including the entire boot area. As the parking gear was engaged, the forced movement of the car may have caused damage to the autogear system. The front of the undercarriage was also noted damaged when the car was forced up the kerb. The front tyres & their attachments may also be damaged. The front right tyre was hanging over the kerb/drain after the car was pushed kerbside.

DECLARATION

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

Policyholder's Signature
Date & Time: 15/12/20

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

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

