

ASS. REC. BY:

Steve

REF:

AIG

ASSIGNMENT

From:

Date:

Estimated Cost:

☒ OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(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

SIA / 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

Date / Time

Action / Instruction

MV- 68K

Veh No:

SLA 3918K

Yr Regn:

29/12/16

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

KIA Optima

c.c

1999

Colour:

Black

A/C:

Insured / Std / NI / N

Sp. Reading

12280

T/Radio:

Insured / Std / NI / N

Eng/No:

C/No:

KNAGU411M145934644

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

215/55R17

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Kunho

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

20/12/20

D.O.I.

21/12/20

Survey held at

Cycle & Carriage

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear L/H

The U/C / Chassis frame / Body Structure affected due to collision

Date/Time, File Pass to?



: Prel. Report



: Final Report

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Merimen

\$3051.60

1/2/21-Typist



CYCLE & CARRIAGE

CYCLE & CARRIAGE KIA PTE LTD
PANDAN GARDENS CUSTOMER SERVICE CENTRE
 209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

**ESTIMATE**

GST Reg No : MR-8500111-X

Co Reg No : 199405410K

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 /Dufu Industries Services Pte. L Reg No/Reg Date SLA391BK / 29/02/201 Date In/Mileage / 62280 Chassis No KNAGU411MG5034644 Engine No G4NDFH092301 Make/Model KIA/OPTIMA 2.0 A 707 Colour/Trim ABP / WK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
LAX00000	Credit	21/12/2020/ 12:54	BLE	261 / Edwin Caina	26097			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
E PNT88000								1600.00
RENEW LHR DOOR								600
REPAIR LHR FENDER								700.00
E PNT98000								120.00
RESPRAY LHR DOOR & LHR FENDER								120.00
E PNT88000								30.00
REMOVE & REFIT LHR DOOR COMPONENT								120.00
A 54900099								
CHECK WIRING ELECTRICAL SYSTEM								
A 10028901								
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST								
USING HI-SCAN PRO TEST								40 80.00
M SUNDRY								20 30.00
APPLY ANTI CORROSION ON AFFECTED AREAS								
M SUNDRY								
Sundries								
M HANDLE ASSY-DOOR OUTSIDE,LH					1.00	55.00	20.00	44.00
M PAD-DOOR OUTSIDE HANDLE,LH					1.00	3.00	20.00	2.40
M COVER-FR DR O/S HDL LH					1.00	25.00	20.00	20.00
M PAD-DOOR O/S HANDLE REAR,LH					1.00	3.00	20.00	2.40
M PANEL ASSY-REAR DOOR,LH					1.00	1307.00	20.00	1045.60
M MOULDING ASSY-RR DR FRAME,LH					1.00	132.00	20.00	105.60
M GARNISH ASSY-RR DR FR FRAME,LH					1.00	104.00	20.00	83.20
M GARNISH ASSY-RR DR RR FRAME,LH					1.00	126.00	20.00	100.80
M MOULDING-RR DR OPNG W/STRIP MT					1.00	22.00	20.00	17.60
M W/STRIP ASSY-RR DR BELT O/S LH					1.00	78.00	20.00	62.40

SURVEYOR NAME: Steve (LKK) 21/12/20, 4:00pm

SURVEYOR SIGNATURE: OO-NH AL

DATE: EXCPT - ?

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

Authorized signatory and company stamp

REMARKS:

PIP
By Bel Sy
4 dys

Nett

4,164.00

4164.00

291.48

Total Payable

4,455.48

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 renewal. the rubber seal or other repair requiring the removal of the windscreen.

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	21/12/2020 15:10 (SGT)
Date of Accident	20/12/2020 08:00 (SGT)
Exact Location of Accident	373 Upper Aljunied Rd, Singapore 367859
Additional Location Information	UPPER ALJUNIED ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA3918K
INSURED/POLICYHOLDER	
Is company?	Yes
Name of Registered Owner	DUFU INDUSTRIES SERVICES PTE LTD
Company Reg No	2XXXXX589D
Email Address	ANGIE@DUFU.COM.SG
Mobile Phone No	(Phone) +65-98339711
Alternative Phone No	+65-98339711

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Optima
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	2100452547
Cover Note Number	-

DRIVER

Name of Driver	NG HWEE NGEE
RIC No	SXXXX139F
Date Of Birth	02/12/1967
Occupation	Indoor

Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

20/10/1997
23 YEARS AND 2 MONTHS
Female
(Phone) +65-98339711
-
ANGIE@DUFU.COM.SG
16 LEITH ROAD
-
547921
No
Employee
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collided into Pedestrian
Clear
Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other material or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance?

No
1
Yes
No
No
3
No

PASSENGER 1

Name
Gender

WONG SER YIAN
Male

PASSENGER 2

Name
Gender

WONG CHUN KEET
Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address
Was notice of intended Prosecution given?
If yes, against whom?

Yes
Traffic Police
(Phone) +65-65470000
(Fax) +65-65474900
10 Ubi Avenue 3 Singapore 408865
No
-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Was there any audio recorded?

Yes
No
No

INJURED PERSONS DETAILS

RED 1

Name of injured person
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

MAMUD MD RASEL

-

-

-

-

-

-

No

No

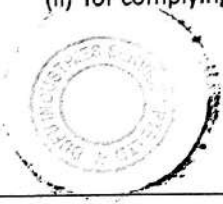
SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

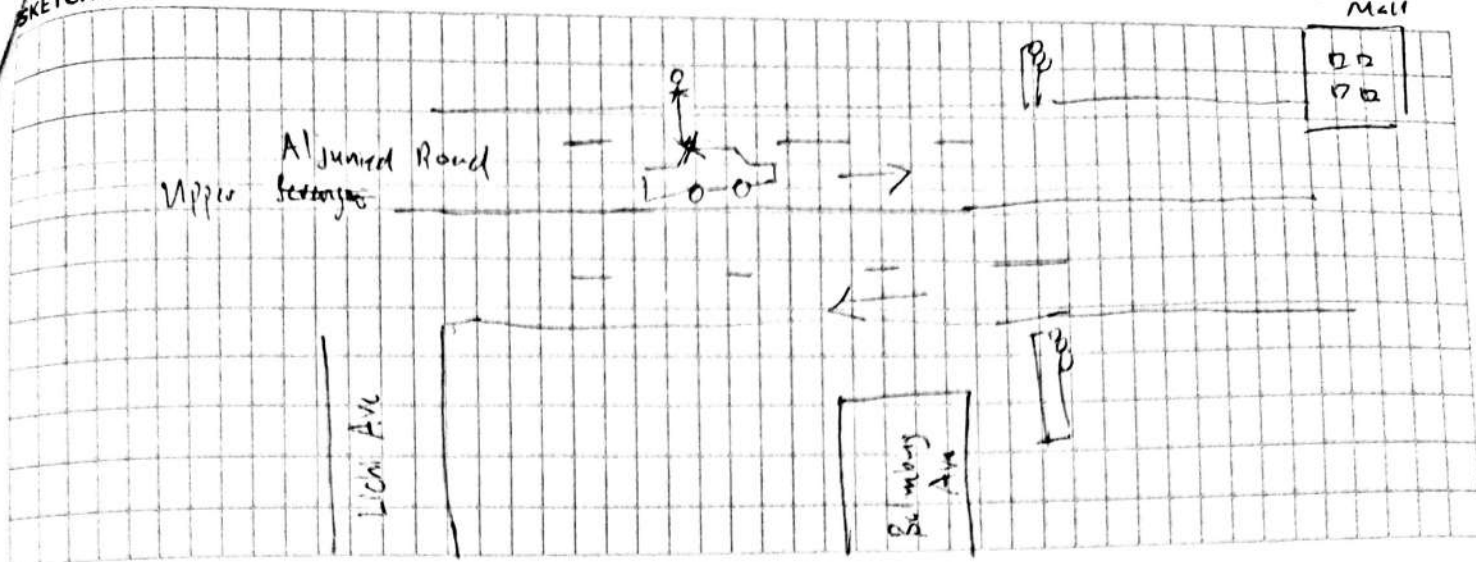


Policyholder's Signature
Date & Time:


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


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was moving along Upper Aljunied Road on 19 Dec 2020, around 8 am, towards Mugherston Mall.

Approximately 20m before the traffic light there was a loud bang on the left rear of my car (left rear passenger door) and there was a man on the ground. I stopped my vehicle at the nearest bus stop and check upon the man, it seems like he dashed across the road and bump into my vehicle.

Within 5 minutes SCDF officers who happened to pass by alighted and rendered assistance to the man. He refused ambulance assistance, but as a precaution, I took him to a nearby clinic to for checkup. Together with X ray.

Upon reaching my vehicle I checked at the mustop, I realised the handle of my left rear passenger seat was gone.

After the checkup at the clinic, doctor advised us to send him to A&E and ^{we} made a police report thereafter.

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:

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



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20201219/2066

1 of 3

Report No. T/20201219/2066

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/12/2020 15:12		Vide Report No.: E/20201219/0106		Station Diary No.:	
Informant's Particulars					
Name of Informant: NG HWEE NGEE			Address: 16 LEITH ROAD GLASGOW GREEN SINGAPORE 547921		
ID Type / ID No.: NRIC NO / S 139F			Contact No.: Home/Office:		Mobile: 98339711
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 53	Date of Birth: 02/12/1967	Type of Informant: Driver		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: CLERK			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/12/2020 08:00	Type of Location:
Location: UPPER ALJUNIED ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLA3918K	Car					2

Details of Person Involved	
Any Pedestrian Involved: Yes	
No. of Pedestrians Injured: 1	Use of Pedestrian Crossing: Not Available



**SINGAPORE
POLICE FORCE**



T/20201219/2066

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20201219/2066

CONTINUATION OF REPORT

Driver Name	NG HWEE NGEE	ID No.	S1 139F
Related Vehicle	SLA3918K (Car)	Contact No.	98339711
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

ON ABOVE MENTIONED TIME, DATE AND LOCATION,

I WAS TRAVELLING ALONG UPP ALJUNIED RD, A PEDESTRAIN SUDDENLY DASH OUT FROM THE ROAD SIDE WITHOUT USING THE TRAFFIC LIGHT CROSSING AHEAD AND HIT MY REAR LEFT DOOR. I WAS VERY SURE THAT THE TRAFFIC LIGHT AHEAD WAS ON MY FAVOUR.



SINGAPORE
POLICE FORCE



T/20201219/2066

3 of 3

Report No. T/20201219/2066

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

TP /
NSPI TEY KE XIAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /
Sr Staff Sgt MOHAMED HUSNUL TAUFIQ BIN
MD YUSOF
Contact No.: 65476358

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

19/12/2020 15:12

Classification Of Case:



SINGAPORE
POLICE FORCE

Signature:

CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Dufu Industries Services Pte Ltd
Period of Insurance : 01 Mar 2020 To 28 Feb 2021
Engine No. : G4NDFH092301
Chassis No. : KNAGU411MG5034644

Vehicle No. : SLA3918K
Policy No. : 2100452547-04
Endorsement No. :
Issued Date : 17 Jan 2020

ABOUT THE COVER

Make/Model : KIA OPTIMA K5 2.0
Engine Capacity/Tonnage : 1,999.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2016
Insuring with COE/PARF : Yes

Any person who is driving on the Policyholder's order or with their permission.
This Policy will indemnify the Policyholder or any authorised driver only if 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 than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use* :

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 business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered 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 (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501
 2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
 3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278900
 4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69326000
- For other Approved 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 AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

We hereby 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).

AIG Asia Pacific Insurance Pte. Ltd.
This computer generated document does not require a signature.

0500710050

C&C FULCO-CORP SALES

22 UBI ROAD 4 FULCO BUILDING
SINGAPORE 408617 ANSP - MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

SSCNFY