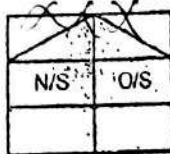


ASSIGNMENT

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. 1900117812
 Claims No. 8866329523SG
 Sum Insured: _____ Excess: 600
 (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 Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Turn Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SMM 6890K Yr Regn: 10/7/19
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or 1193
 Make: Mitsubishi Attrage c.c. 1291
 Colour: Grey A/C: Insured / Std / NI / N
 Sp. Reading: 23032 T/Radio: Insured / Std / NI / N
 Eng/No: _____
 C/No: MMB5TA13AKH002063
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modl: NII / S/R/m / STD A/R/m or
 Tyre Size: F: 185/55R15
 R: 11
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or B
 Front Rear
 R/Bal. 5 mm R/Bal. 5 mm
 L/Bal. 5 mm L/Bal. 5 mm
 D.O.A. 30/12/20 D.O.I. 31/12/20
 Survey held at cycle & Carriage
 Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time	Action / Instruction
	<u>MV- 56K</u>
<u>4/1/21</u>	<u>Seek mandate via merimen</u>
<u>5/1/21</u>	<u>Rece approved from Kok Chong via merimen</u>
<u>5/1/21</u>	<u>Informed Edwin C/A excess \$600 by email</u>
<u>15/1/21</u>	<u>Final fig \$9069.52 confirmed by email (Red 4018.03,30%)</u>

ale/Time, File, Pass lo?

☐ : Prell. Report
☐ : Final Report

Days Of Repair: 5

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

\$ + RS, SI

Photo

Others

TOTAL

15/1/21-Typist

Approved: Merimen

Final Sum / U.C. : \$9069.52



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED

PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



ESTIMATE

GST Reg No : MR-8500111-X

Co Reg No : 197701469G

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 6419 1000	Cust No/Name KCV11692/Mr Tan Han Qi Reg No/Reg Date SMM6890K*DC17/ 10/07/201 Date In/Mileage / 23032 Chassis No MMBSTA13AKH002063 Engine No 3A92UHT5347 Make/Model MIT/19MY ATTRAGE 1.2 CVT Colour/Trim U01 TITANIUM GREY M/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
FAX00001	Credit	31/12/2020/ 08:54	QUE	261 / Edwin Caina	61336		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000				450 X 2			900 2700.00
RENEW FRT BUMPER , FRT BUMPER BODY KIT , BONNET & FRT SUPPORT							
REPAIR LHF FENDER & RHF FENDER							
E PNT98000				350 X 3			1050 2100.00
RESPRAY FRT BUMPER , FRT BUMPER BODY KIT , BONNET , FRT SUPPORT ,							
LHF FENDER & RHF FENDER							? 100.00
E PNT88000							? 80.00
REMOVE & REFIT AC COND & RADIATOR							
M SUNDRY							30.00
TOP UP AIRCON GAS							
A 54900099							120.00
CHECK WIRING ELECTRICAL SYSTEM & ADJUST HEADLAMP AIM							
A 10028901							50.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST							
USING HI-SCAN PRO TEST							
M SUNDRY							60 80.00
SUPPLY FRT NUMBER PLATE WITH CASING							
M SUNDRY							120.00
SUPPLY BODY KIT SEALANT							
M SUNDRY							20 30.00
APPLY ANTI CORROSION ON AFFECTED AREAS							
M SUNDRY							
Sundries							
M FACE,FR BUMPER	OR			1.00	703.00	23.00	541.31
M CLIP,FR BUMPER	APC			5.00	4.00	23.00	15.40
M COVER,FR BUMPER	(Tr con)			1.00	12.00	23.00	9.24
M COVER,HEADLAMP SUPT PANEL	?			1.00	62.00	23.00	47.74
M MARK,THREE-DIA	APC			1.00	69.00	23.00	53.13
M GRILLE,FR UNDER	OR			1.00	165.00	23.00	127.05
M BRACKET,FR BUMPER,LH	BR			1.00	13.00	23.00	10.01
M BRACKET,FR BUMPER,RH	BR			1.00	13.00	23.00	10.01
M GARNISH,FR BUMPER,LH	X			1.00	127.00	23.00	97.79
M GARNISH,FR BUMPER,RH	X			1.00	127.00	23.00	97.79

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.



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED

PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

MITSUBISHI
MOTORS

ESTIMATE

GST Reg No : MR-8500111-X

Co Reg No : 197701469G

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 6419 1000	Cust No/Name KCV11692/Mr Tan Han Qi Reg No/Reg Date SMM6890K*DC17/ 10/07/201 Date In/Mileage / 23032 Chassis No MMBSTA13AKH002063 Engine No 3A92UHT5347 Make/Model MIT/19MY ATTRAGE 1.2 CVT Colour/Trim U01 TITANIUM GREY M/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
FAX00001	Credit	31/12/2020/ 08:54	QUE	261 / Edwin Caina	61336			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
M	GRILLE,RADIATOR	✓	OK		1.00	554.00	23.00	426.58
M	HOOD	✓	OD		1.00	734.00	23.00	565.18
M	HINGE,HOOD,LH	✓	X		1.00	56.00	23.00	43.12
M	HINGE,HOOD,RH	✓	X		1.00	56.00	23.00	43.12
M	CLIP,HOOD INSULATOR	✓	MC		8.00	3.00	23.00	18.48
M	LATCH,HOOD	✓	X		1.00	69.00	23.00	53.13
M	PANEL ASSY,FR END	✓	?		1.00	1055.00	23.00	812.35
M	PANEL,HEADLAMP SUPPORT,UPR	✓	X		1.00	65.00	23.00	50.05
M	PANEL,AIR GUIDE,LH	✓	?		1.00	11.00	23.00	8.47
M	PANEL,AIR GUIDE,RH	✓	?		1.00	11.00	23.00	8.47
M	CONDENSER ASSY,A/C REFRIGE	✓	?		1.00	758.00	23.00	583.66
M	PANEL,AIR GUIDE	✓	?		1.00	112.00	23.00	86.24
M	RADIATOR ASSY	✓	?		1.00	967.00	23.00	744.59
M	FAN,COOLING	✓	X		1.00	77.00	23.00	59.29
M	SHROUD,COOLING FAN	✓	X		1.00	130.00	23.00	100.10
M	MOTOR,COOLING FAN	✓	X		1.00	479.00	23.00	368.83
M	HEADLAMP ASSY,LH	✓	CUT		1.00	660.00	23.00	508.20
M	HEADLAMP ASSY,RH	✓	?		1.00	660.00	23.00	508.20
M	UNPAINTED BODYKITS	✓	OR		1.00	1643.00	20.00	1314.40
M	LLC 4L	✓	?		1.00	26.00	23.00	20.02
M	EMBLEM ECO	✓	X		1.00	17.00	00.00	17.00

SURVEYOR NAME: Steve (LKK) 31/12/20, 11:00am

SURVEYOR SIGNATURE: OD - NM AL
EXCESS - ?

DATE: 4 dys

REMARKS: P/P

P/P

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

7% GST on **Nett** 12,758.95
893.13
Total Payable 13,652.08

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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	30/12/2020 17:13 (SGT)
Date of Accident	30/12/2020 15:30 (SGT)
Exact Location of Accident	Boon Lay Way, Singapore 649846
Additional Location Information	BOON LAY WAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM6890K
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN HAN QI
NRIC No	SXXXX913F
Email Address	HANQI1984@GMAIL.COM
Mobile Phone No	(Phone) +65-91154908
Alternative Phone No	+65-91154908

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	1900117812
Cover Note Number	-

DRIVER

Name of Driver	TAN HAN QI
NRIC No	SXXXX913F
Date Of Birth	10/02/1984
Occupation	Indoor

Date 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

01/08/2005
15 YEARS AND 4 MONTHS
Male
(Phone) +65-91154908
+65-91154908
HANQI1984@GMAIL.COM
BLK 93B TELOK BLANGAH STREET 31 #12-181
-
102093
Yes
-
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Head to Rear
Clear
Wet

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
2
No
-
Yes
1
No

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Was notice of intended Prosecution given?
If yes, against whom?

No
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

DETAILS OF OTHER VEHICLE PROPERTY 1:

Vehicle Registration Number
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category
Name of Driver
Contact Number
Address
Address complement
Postcode
Insurance Company Name

SLU4077A
Toyota
Sienta
-
-
Private car
-
(Phone) +65-81811108
-
-
-

7 8 9 10 11 12

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

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.
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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.

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

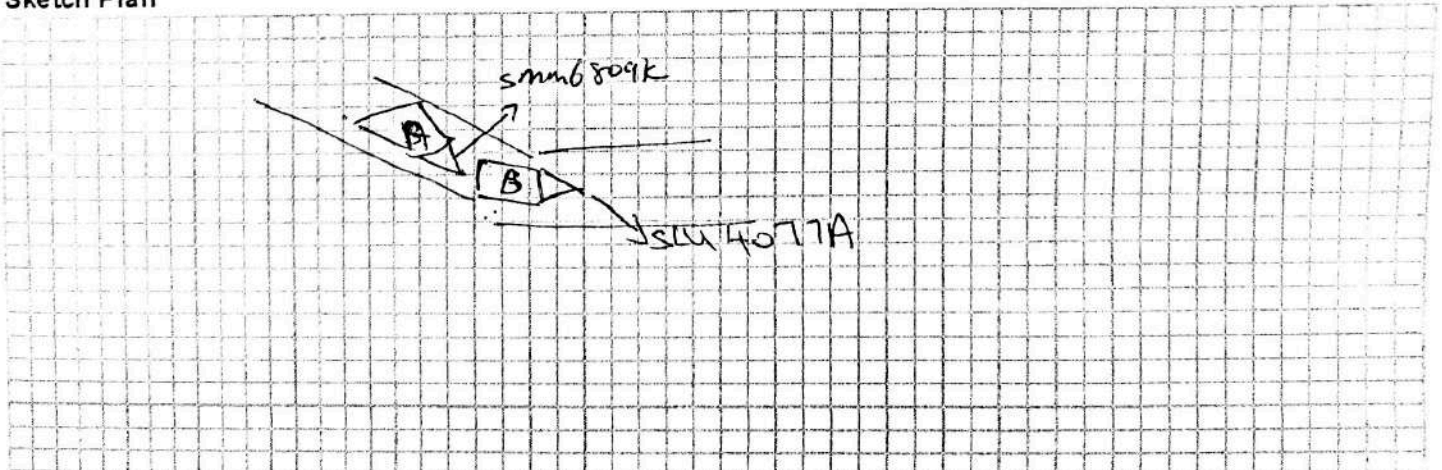
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

- turn on slight Right toward Sunny Point.
- one vehicle was in front of me.
- Both vehicle were stopped before move off.
- suddenly, front vehicle move abit and follow too close and crashed on rear wheels of the vehicle.

Declaration

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



Witnessed by Reporting Centre
Personnel



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tan Han Qi
Period of Insurance : 10 Jul 2019 To 09 Jul 2021
Engine No. : 3A92UHT5347
Chassis No. : MMBSTA13AKH002063

Vehicle No. : SMM6890K
Policy No. : 1900117812
Endorsement No. :
Issued Date : 22 Aug 2019

ABOUT THE COVER

Make/Model : MITSUBISHI ATTRAGE 1.2 CVT

Engine Capacity/Tonnage : 1,193.00 CC

Driver Restriction : NA

Person or Classes of Persons Entitled to Drive* :

- a) The Policyholder
b) Any other person who is driving on the Policyholder's order or with his/her 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.

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2019
Insuring with COE/PAF : Yes

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 - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Tan Han Qi - \$600 (Own Damage)

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

- 1 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000
2 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708688
3 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
4 Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 608339 65684501

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.com.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: DBS BANK LTD

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).

0504623206

FULCOMICP2 - JN
22 UBI ROAD 4 FULCO BUILDING
SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Manik

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSCNMD