

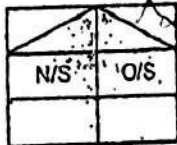
ASS. REC. BY: Steve REF: AIG

## 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. 1900067228  
 Claims No. 5642301637SG  
 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  
 CIA / PR Seen: \_\_\_\_\_ Consistent? Yes or No  
 Est. Repairs: 5 days Res.: Yes or No  
 Cum Sum: \_\_\_\_\_ % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SMJ 7715T Yr Regn: 20/3/19  
 Type: ☒ M.Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /  
 Truck / Trailer or  
 Make: KIA STONIC c.c. 998  
 Colour: White A/C: ☒ Insured / ☐ Std / ☐ NI / ☐ N  
 Sp. Reading: 24554 T/Radio: ☒ Insured / ☐ Std / ☐ NI / ☐ N  
 Eng/No: \_\_\_\_\_  
 C/No: KNA 06811 VK 6244 997  
 Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ Burnt  
 Steering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or  
 Brakes: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or  
 Modl: ☒ Nil / ☐ B/Rim / ☐ STD A/Rim or  
 Tyre Size: F: 185/65R15  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Kumho  
 Front: \_\_\_\_\_ Rear: \_\_\_\_\_  
 R/Bal. 5 mm R/Bal. 5 mm  
 L/Bal. 5 mm L/Bal. 5 mm  
 D.O.A. 5/1/20 D.O.I. 5/1/20  
 Survey held at Cycle & Carriage  
 Des. of Damages: ☒ Frt / ☒ Rear / ☐ O/S / ☐ N/S / ☐ UIC / ☐ Rooftop or  
Frt R.M.  
 The UIC / Chassis frame / Body Structure affected due to collision

Date / Time	Action / Instruction
	<u>MV-73K</u>
06/01/21 @ 10.36am	revert to AIG via Merimen.
06/01/21 @ 8.50am	Kok Chong informed C/A via Merimen.
07/01/21 @ 10.27am	Informed Coco C/A & ex:\$600 by email.
21/01/21 @ 11.18am	Confirmed with Ms Loi final fig \$6,395.20, 5 repair days. (Red \$1183.20, 16%)

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

File/Time, File Return to?

Days Of Repair: 5  
 Resurvey No. of Trip: 2

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

Survey Fee:

Transportation:

S + RS, SI

Private

Others

TOTAL

Approved: MER-ODTotal Cost / L.E.B. / \$ 6395.20



CYCLE &amp; CARRIAGE

# CYCLE & CARRIAGE KIA PTE LTD PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240



## ESTIMATE

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
CHIEW AI JUAN (JIANG AIJUAN)	Cust No/Name LCV08947/CHIEW AI JUAN (JIANG AIJUAN)
BLK 288 BISHAN STREET 24	Reg No/Reg Date SMJ7715T / 20/03/201
#15-07	Date In/Mileage / 0
SINGAPORE 570288	Chassis No KNAD6811VK6244907
Contact No	Engine No G3LCJP143385
	Make/Model KIA/STONIC 1.0 A BET
	Colour/Trim UD CLEAR WHITE / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
LCV08947	CRDVCH	05/01/2021/ 11:39		442 / CocoLu	26774			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
E PNT88000								1600.00
RENEW FRT BUMPER, BONNET, FRT SUPPORT PANEL, REPAIR FRT FENDER RH					470 X2			1050.00
E PNT98000								30.00
SPRAY PAINT FOR FRT BUMPER, BONNET, FRT FENDER RH					380 X3			120.00
A 90000001								20.00
CHECK WIRING & ELECTRICAL SYSTEM								100.00
A 10028901								80.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST								
USING HI-SCAN PRO TEST								
M SUNDRY								
Sundry								
E PNT88000								
REMOVE & INSTALL AIRCON CONDENSOR & RADIATOR								
M SUNDRY								
TOP UP AIRCON GAS					1.00	476.00	00.00	476.00
M COVER-FR BUMPER UPR					1.00	55.00	00.00	55.00
M SKID PLATE-FR BUMPER					1.00	32.00	00.00	32.00
M LIP ASSY-FRONT BUMPER					1.00	46.00	00.00	46.00
M COVER-RADIATOR GRILLE UPR					1.00	64.00	00.00	64.00
M COVER-FR BUMPER FOG LAMP, RH					1.00	234.00	00.00	234.00
M LAMP ASSY-FRONT FOG, RH					1.00	38.00	00.00	38.00
M AIR DUCT-FR BUMPER, RH					1.00	98.00	00.00	98.00
M ABSORBER-FRONT BUMPER ENERGY					1.00	13.00	00.00	13.00
M BRACKET-FR BUMPER SIDE, RH					1.00	367.00	00.00	367.00
M COVER-FR BUMPER, LWR					1.00	123.00	00.00	123.00
M STIFFNER-FR BPR LWR					1.00	904.00	00.00	904.00
M PANEL ASSY-HOOD					1.00	544.00	00.00	544.00
M BEAM COMPLETE-FR BUMPER					1.00	556.00	00.00	556.00
M CARRIER ASSY-FRONT END MODULE					1.00	32.00	00.00	32.00
M ORNAMENT-KIA NO.115					1.00	56.00	00.00	56.00
M GUARD ASSY-FRONT WHEEL, RH					1.00	152.00	00.00	152.00
M RESERVOIR & PUMP ASSY-WASHER					1.00	1845.00	00.00	1845.00
M LAMP ASSY-HEAD, RH								

# Estimate

Steve CLKK)  
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# Estimate

Steve CLKK)  
5/1/21, 12.00pm  
00 - AM AL  
EXCISE - ?  
PIP

### 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

Authorized signatory and company stamp

No illegal modification(s) is allowed

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.

Date:

Py Bel SPY  
4 days

7% GST on	8635.00	8,635.00
		604.45
<b>Total Payable</b>		<b>9,239.45</b>



## 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  
Date of Accident  
Exact Location of Accident  
Additional Location Information  
Country/State of Loss

05/01/2021 12:30 (SGT)  
05/01/2021 07:30 (SGT)  
Marymount, Singapore  
MARYMOUNT RD  
Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMJ7715T

INSURED/POLICYHOLDER

Is company?  
Name Of Registered Owner  
NRIC No  
Email Address  
Mobile Phone No  
Alternative Phone No

No  
CHIEW AI JUAN  
SXXXX823F  
CHIEWJANET@GMAIL.COM  
(Phone) +65-98214779  
+65-98214779

### VEHICLE PARTICULARS

Manufacturer  
Model  
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?  
Vehicle Category

Kia  
Stonic  
-  
-  
Yes  
Private car

### INSURANCE COMPANY

Name of Insurance Company  
Type of Coverage  
Fleet Policy  
Policy Number  
Cover Note Number

AIG  
Comprehensive  
No  
1900067228  
-

### DRIVER

Name of Driver  
NRIC No  
Date Of Birth  
Occupation

CHIEW AI JUAN  
SXXXX823F  
12/02/1976  
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 .....

14/08/1999  
 21 YEARS AND 5 MONTHS  
 Female  
 (Phone) +65-98214779  
 +65-98214779  
 CHIEWJANET@GMAIL.COM  
 BLK 288 BISHAN STREET 24 #15-07  
 -  
 570288  
 Yes  
 -  
 No  
 -  
 -

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident .....  
 Weather Conditions .....  
 Road Surface .....

Collision - Change/cross lane  
 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  
 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 11

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 .....

SMG7346R  
 Volkswagen  
 Passat  
 -  
 -  
 Private car  
 -  
 (Phone) +65-97643373  
 -  
 -  
 -  
 AIG

1

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

**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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 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.



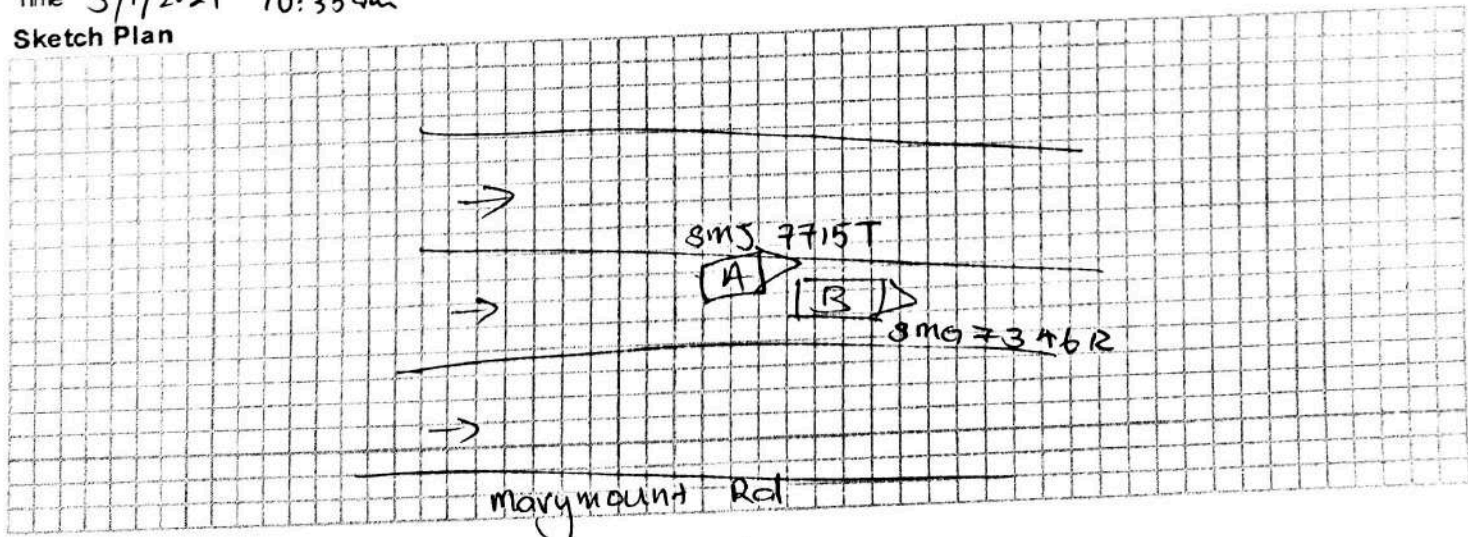
Policyholder's Signature / Date & Time  
5/1/2021 10:35am

Sketch Plan

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



Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

Driving along manymount road, attempting to filter to left lane. Hit the car B in the rear left corner while filtering.

Declaration

We declare the foregoing particulars are true in every respect.



05/01/2021

Policyholder's Signature / Date &  
Time 10:35 am

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



Witnessed by Reporting Centre  
Personnel

# KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Chiew Ai Juan (Jiang Aijuan)  
Period of Insurance : 20 Mar 2019 To 19 Mar 2021  
Engine No. : G3LCJP143385  
Chassis No. : KNAD6811VK6244907

Vehicle No. : SMJ7715T  
Policy No. : 1900067228  
Endorsement No. :  
Issued Date : 26 Mar 2019

## ABOUT THE COVER

Make/Model : KIA Stonic  
Engine Capacity/Tonnage : 998.00 CC  
Driver Restriction : NA

Sum Insured : Market Value  
Off Peak Car : No

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

### 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.

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) and Section 95 of the Road Transport Act, 1987 (Malaysia), 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)

Chiew Ai Juan (Jiang Aijuan) - \$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 Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501
3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800
4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

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](http://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: HL Bank

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) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504624206

FULCOKICP2 - KT

22 UBI ROAD 4 FULCO BUILDING  
SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Manile*  
AIG Asia Pacific Insurance Pte. Ltd.  
AUTHORISED REPRESENTATIVE

SSCZSS

1002061513AC4/Decal