

ASS. REC. BY:

Stew

REP:

CS/AIG21000445/ET03

# ASSIGNMENT

From:

Date:

Estimated Cost:

QD / TP / WS / TP RES / QD 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.

|     |     |   |
|-----|-----|---|
| X   | X   | X |
| N/S | O/S |   |
| X   | X   | X |

Est. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No

SLL 5073B

Yr Regn:

28/2/17

Type ☒ M.Ca / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or

Make:

Mitsubishi Attrage

c.c 1193

Colour

Red

A/C: Insured / Std / Nil / N

Sp. Reading

85882

T/Radio: Insured / Std / Nil / N

Eng/No:

MM BSTA 13AHH 00335

C/No:

Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ Burnt

Steering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or

Brake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or

Modl: Nil / ☒ S/Rim / STD A/Rim or

Tyre Size:

F:

195/55R15

R:

VI

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

TOYO / YOKO or

Dayton

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

11/1/21

D.O.I.

11/1/20

Survey held at

Cycle & Carriage

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

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

Date / Time

Action / Instruction

MV-43K

PV-34,949

AK-8051

\* Total 1055

Date/Time, File Pass to?

☐

: Prel. Report

☐

: Final Report

Date/Time, File Return to?

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Insp (\$

☐

: Wheel and (\$

Survey Fee:

Transportation:

\$ + RS \$

Photos

Others

TOTAL

Rep. Form:

Comp. Sum / IE. L. /



Exceptional Journeys

Cycle & Carriage Automotive Pte Ltd

Mitsubishi Service Centre  
209 Pandan Gardens Singapore 609339  
Tel: 6568 4555 Fax: 6569 1056  
Company no. 197701469G

11<sup>th</sup> January 2021

AIG S'PORE INSURANCE PTE LTD  
78 SHENTON WAY #08-16  
AIG BUILDING  
SINGAPORE 079120

Attention: Motor Claim Department

Re: Regn. No SLL5073B MITSUBISHI ATTRAGE 1.2 A-Own Damage Claim

Due to the badly damages on this accident, the car is beyond economical repair of \$26,000.

Kindly arrange your surveyor to inspect the above vehicle at our Service Centre, 209 Pandan Gardens, Singapore 609339 as soon as possible.

Your early reply would be appreciated.

Yours faithfully

CYCLE & CARIAGE AUTOMOTIVE PTE LTD  
Don KH Bong  
Claim, Customer Service

For enquiry, please contact Don at 91865202/65684501

Steve (LKK)  
11/1/20, 4.30pm

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 item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

## 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              | 11/01/2021 13:59 (SGT)                      |
| Date of Accident                | 11/01/2021 06:50 (SGT)                      |
| Exact Location of Accident      | PIE, Singapore                              |
| Additional Location Information | PIE TOWARDS TUAS, UNDER JURONG EAST FLYOVER |
| Country/State of Loss           | Singapore                                   |

### DETAILS OF OWN VEHICLE

|                             |                      |
|-----------------------------|----------------------|
| Vehicle Registration Number | SLL5073B             |
| INSURED/POLICYHOLDER        |                      |
| Is company?                 | No                   |
| Name Of Registered Owner    | LEE FOOK LEONG       |
| NRIC No                     | SXXXX451D            |
| Email Address               | FLLEE@SINGNET.COM.SG |
| Mobile Phone No             | (Phone) +65-97853115 |
| Alternative Phone No        | +65-97853115         |

### 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             | 2100502207    |
| Cover Note Number         | -             |

### DRIVER

|                |                   |
|----------------|-------------------|
| Name of Driver | LEE WEI JIE, IVAN |
| NRIC No        | SXXXX603Z         |
| Date Of Birth  | 29/09/1992        |
| Occupation     | Indoor            |

Of Driving Pass  
 ing experience  
 nder  
 Mobile Number  
 It. 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

04/03/2014  
 6 YEARS AND 10 MONTHS  
 Male  
 (Phone) +65-97822932  
 -  
 LEE.IVAN.SG@GMAIL.COM  
 BLK 303 TAMPINES STREET 32 #08-54  
 -  
 520303  
 No  
 Child  
 No

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident  
 Weather Conditions  
 Road Surface

Chain Collision  
 Raining  
 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  
 3  
 No  
 -  
 Yes  
 3  
 Yes

#### PASSENGER 1

Name  
 Gender

FAM SWEE CHIN  
 Female

#### PASSENGER 2

Name  
 Gender

LEE FOOK LEONG  
 Male

#### 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  
 Yes  
 No

#### DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number  
 Vehicle Manufacturer  
 Vehicle Model  
 Vehicle Variant

SJE1496B  
 Honda  
 Civic  
 -

Vehicle Colour  
Vehicle Category  
Name of Driver  
Contact Number  
Address  
Address complement  
Postcode  
Insurance Company Name  
Nature Of Damage  
Details of property damaged in accident  
No. Of Passenger (Including Driver)

Black  
Private car  
LEE KEM WAT @ WONG KHENG CHOONG  
(Phone) +65-98321891

AIG

#### DETAILS OF OTHER VEHICLE PROPERTY 2

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

SDS8831T

Private car  
ONG SZE WEE, FRANCIS  
(Phone) +65-98358612

## 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.
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.

*[Signature]*

11 JAN 2021 . 1000 HRS .

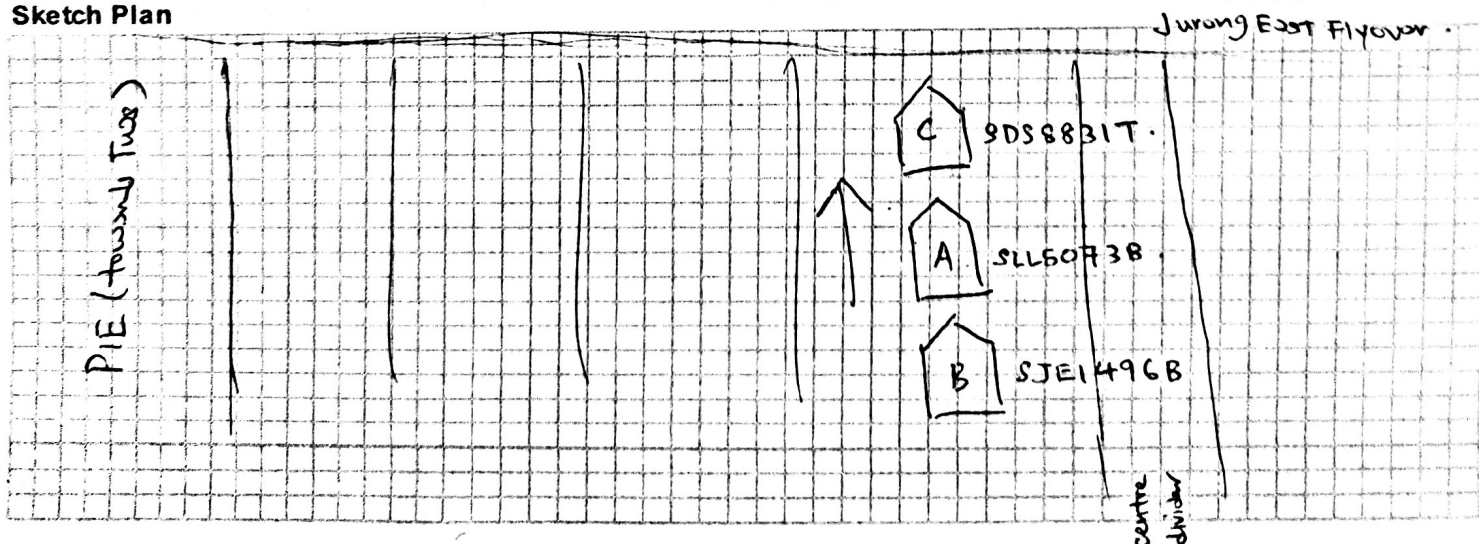
*[Signature]*

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

DATE: 11 JAN 2021.

TIME: AMPM: 0650HRS.

LOCATION: ON PIE (TOWARDS THAB), BELOW JURONG EAST FLYOVER.

FRONT CAR (9DJS8831T) WAS SLOWING DOWN ON FAST/RIGHT MOST LANE (LANE 1).

DRIVER (MYSELF) NOTICED REDUCTION IN ~~FAST~~ SPEED AND SLOWED DOWN ACCORDINGLY.

REAR CAR KNOCKED INTO MY CAR REAR, RESULTED IN MY CAR FRONT KNUCKING INTO  
(9JEM4968)

FRONT CAR'S REAR.

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

11 JAN 2021 1000HRS.

*[Signature]*

# CERTIFICATE OF INSURANCE

## CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Lee Fook Leong  
Period of Insurance : 28 Feb 2020 To 27 Feb 2021  
Engine No. : 3A92UDP1776  
Chassis No. : MMBSTA13AHH003735

Vehicle No. : SLL5073B  
Policy No. : 2100502207-03  
Endorsement No. :  
Issued Date : 12 Feb 2020

### ABOUT THE COVER

Make/Model : MITSUBISHI ATTRAGE 1.2 CVT  
Engine Capacity/Tonnage : 1,193.00 CC Sum Insured : Market Value  
Driver Restriction : NA Off Peak Car : No  
First Year of Registration : 2017  
Insuring with COE/PAF : 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), 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)

Lee Fook Leong - \$600 (Own Damage), \$600 (Flood Cover)

### 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: 20 Leng Kee Rd Singapore 159094 64708688
4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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](http://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: United Overseas Bank Limited

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).

0500720784

CYCLE & CARRIAGE - DLOOI(MIT)

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPDSO



AIG Asia Pacific Insurance Pte. Ltd  
AIG Building  
78 Shenton Way  
#07-16

### MOTOR ACCIDENT INTERVIEW FORM

NAME : LEE WEI JIE IVAN  
VEHICLE NUMBER : SLL5073B  
DATE/ TIME OF ACCIDENT : 11/01/2021 0650HRS  
PLACE OF ACCIDENT : ON PIB (TOWARDS TMS), NEAR JURONG EAST ELEVATOR  
THIRD PARTY VEHICLE (IF ANY) : SJE1496B (rear), SDS8831T (front)

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

JOURNEY START : BLK 303 TAMPAWAS ST 32 MSCP

INTENDED DESTINATION : 5 THRS DRIVE 2

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT WAS THE RESULTS?

NIL

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

SJE1496B front to SLL5073B rear.

SLL5073B front to SDS8831T rear.

MAJOR DAMAGE TO SLL5073B (ALL AROUND).

SJE1496B front body damaged.

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

NIL

11 JAN 2021

NAME: LEE WEI JIE IVAN

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

## UNDERTAKING

I, LEE WEI JIE IVAN, (NRIC No. S9234603E), hereby confirm that the Singapore Accident Statement lodged by me on 11 JAN 2021 at 11 20 hours pertaining to the accident involving motor car Reg. No: SL150738, in which I was the driver are true and accurate to the best of my knowledge, information and belief.

I acknowledge that my insurers are not liable under the contract of insurance if there is a breach of policy terms and conditions.

In the event that an unrelated/unreported third party property or injury claim arises or there is evidence emerges that there is a breach of policy terms and conditions, I irrevocably undertake to absolve my insurer from all liability under the contract of insurance and I undertake to re-pay any sums paid by my insurers pursuant to the contract of insurance upon receipt of written demand by my insurers.

Signature

:



Name of Insured / Driver

:

LEE WEI JIE IVAN

Nric No.

:

S9234603E

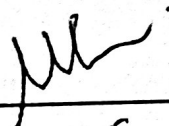
Date

:

11 JAN 2021

Signature

:



Name of Policyholder

:

Lee Fook Leong

Nric No.

:

S1527457D

Date

:

11 / 1 / 21