

ASS. REC. BY:

Stew

REF:

A16

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

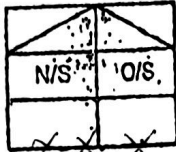
Sum Insured:

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 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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

SLF 3854J

Yr Regn:

25/8/16

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

Truck / Trailer or

Make:

KIA Forte

c.c

1591

Colour:

Blue

A/C: Insured / Std / NI / N

Sp. Reading

59045

T/Radio: Insured / Std / NI / N

Eng/No:

C/No:

KNA F2411MAH 5658347

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:

215/45R17

R:

 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or

Front

Rear

R/Bal. 4 mm

R/Bal. 4 mm

L/Bal. 4 mm

L/Bal. 4 mm

D.O.A. 27/1/21

D.O.A. 28/1/21

Survey held at

Cycle &amp; Carriage

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

The UIC / Chassis frame / Body Structure affected due to collision

Date / Time

Action / Instruction

MV-51K

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. Inve (%)

☐

: Weekend (%)

Survey Fee:

Transportation:

S + RS \$1

Provice

Others

TOTAL

Approved:

Signature / Date:

## ESTIMATE

Co Reg No : 199405410K

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 #09-16 AIG BUILDING SINGAPORE 079120 Contact No 64191000	Cust No/Name /LEOW KOK CHIEN (LIAO GUOQUAN) Reg No/Reg Date SLF3854J / 25/08/201 Date In/Mileage / 0 Chassis No KNAFZ411MH5638347 Engine No G4FGGH623508 Make/Model KIA/FORTE K3 1.6 A SX HADQ Colour/Trim D7U PLANET BLUE / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
LAX00000	Credit	28/01/2021/ 12:20	QUD	247 / DonBong	28203
Description of Goods / Services		Qty	Unit Price	Disc%	Amount
E PNT88000	RENEW ACCIDENT DAMAGED PARTS ON REAR BOOT LID, REAR BUMPER, CUT/WELD REAR END PANEL, REPAIR REAR FLOOR PANEL	490 X 2	800		2000.00
E PNT88000	REMOVE AND INSTALL PARKING ASSIST				60.00
E PNT88000	REMOVE AND INSTALL REAR SPOILER				80.00
E PNT88000	REMOVE AND INSTALL REAR CABIN TO FACILITATE REPAIR WORK				120.00
E PNT98000	PAINT WORK SPRAY REAR FLOOR PANEL, REAR END PANEL, REAR BOOT LID, REAR SPOILER, REAR BUMPER FACE AND AFFECTED PORTION	350 X 2	700		2100.00
M SUNDRY	APPLY BODY SEALANT				40 120.00
A 54900099	CHECK WIRING AND CHASSIS ELECTRICAL SYSTEM				30.00
M SUNDRY	PERFORM RUST PREVENTION				40 120.00
A 10028901	TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST USING HI-SCAN PRO TEST				120.00
M SUNDRY	SUPPLY C&C LOGO				40.00
M SUNDRY	SUPPLY REAR NUMBER PLATE WITH FRAME				50.00
M SUNDRY	SUNDRIES				20 50.00
M	PANEL ASSY-BACK	1.00	324.00	20.00	259.20
M	TRIM-TRANSVERSE RR	1.00	58.00	20.00	46.40
M	PANEL ASSY-TRUNK LID	1.00	1365.00	20.00	1092.00
M	LOGO ASSY-KIA SUB	1.00	37.00	20.00	29.60
M	EMBLEM-CERATO	1.00	35.00	20.00	28.00
M	FORTE EMBLEM	1.00	40.00	20.00	32.00

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 &amp; 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 #09-16 AIG BUILDING SINGAPORE 079120 Contact No 64191000	Cust No/Name /LEOW KOK CHIEN (LIAO GUOQUAN) Reg No/Reg Date SLF3854J / 25/08/201 Date In/Mileage / 0 Chassis No KNAFZ411MH5638347 Engine No G4FGGH623508 Make/Model KIA/FORTE K3 1.6 A SX HADO Colour/Trim D7U PLANET BLUE / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
LAX00000	Credit	28/01/2021/ 12:20	QUD	247 / DonBong	28203			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
M EMBLEM K3	RC				1.00	15.00	20.00	12.00
M LATCH ASSY-TRUNK LID	X				1.00	23.00	20.00	18.40
M STRIKER ASSY-TRUNK LID	X				1.00	18.00	20.00	14.40
M W/STRIP-TRUNK LID OPNG	TN?				1.00	100.00	20.00	80.00
M BRACKET-RR BUMPER SIDE MTG,LH	?				1.00	29.00	20.00	23.20
M BRACKET-RR BUMPER SIDE MTG,RH	?				1.00	29.00	20.00	23.20
M GUARD-BUMPER REAR,RH	?				1.00	17.00	20.00	13.60
M STAY-RR BUMPER LH	?				1.00	120.00	20.00	96.00
M STAY-RR BUMPER RH	?				1.00	120.00	20.00	96.00
M BRACKET-RR BEAM UPR MTG	?				1.00	3.00	20.00	2.40
M BRACKET-RR BEAM UPR MTG,RH	?				1.00	3.00	20.00	2.40
M ANTENNA ASSY-SMARTKEY	?				1.00	69.00	20.00	55.20
M BEAM-RR BUMPER	BR (Photo)				1.00	318.00	20.00	254.40
M BRACKET-RR BEAM LWR MTG	?				2.00	5.00	20.00	8.00
M BRACKET-RR BEAM LWR,CTR	?				1.00	5.00	20.00	4.00
M RETAINER	?				4.00	2.00	20.00	6.40
M RETAINER-BUMPER SIDE MTG	?				2.00	1.00	20.00	1.60
M CLIP	RC				10.00	2.00	20.00	16.00
M COVER-RR BUMPER	OD				1.00	688.00	20.00	550.40
M COVER-RR BUMPER,CTR	CUT				1.00	315.00	20.00	252.00
M COVER-RR BPR UNDER	?				1.00	42.00	20.00	33.60
M WIRING HARNESS-BWS EXT	?				1.00	216.00	20.00	172.80
M ULTRASONIC SENSOR ASSY-P.A.S	?				1.00	177.00	20.00	141.60
M ULTRASONIC SENSOR ASSY-P.A.S	?				1.00	177.00	20.00	141.60
M ULTRASONIC SENSOR ASSY-P.A.S	?				1.00	177.00	20.00	141.60
M ULTRASONIC SENSOR ASSY-P.A.S	?				1.00	177.00	20.00	141.60
M SPOILER-RR	X				1.00	590.00	20.00	472.00

SURVEYOR NAME: Steve (LKK)

SURVEYOR SIGNATURE: 28/1/21, 12:30pm

DATE: 00-NM Ant

EXCESS - 7

SURVEYOR NAME: Steve (LKK)

SURVEYOR SIGNATURE: 28/1/21, 12:39pm

DATE: 00-AM AUL

EXCESS - ?

REMARKS: P/P

Confirm &amp; accepted by 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

Authorized signatory and company stamp

My Bel sp  
4 days

Nett	9,151.60
7% GST on	9151.60
Total Payable	9,792.21

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.



## 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 ..... 28/01/2021 11:03 (SGT)  
Date of Accident ..... 27/01/2021 19:20 (SGT)  
Exact Location of Accident ..... Alexandra Rd & Lower Delta Rd, Singapore  
Additional Location Information ..... JUNCTION AT ALEXANDRA RD & LOWER DELTA RD  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLF3854J

#### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LEOW KOK CHIEN  
NRIC No ..... SXXXX473D  
Email Address ..... TONY\_LEOW@YAHOO.COM  
Mobile Phone No ..... (Phone) +65-98195393  
Alternative Phone No ..... +65-98195393

#### VEHICLE PARTICULARS

Manufacturer ..... Kia  
Model ..... Forte  
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 ..... 2100479160  
Cover Note Number ..... -

#### DRIVER

Name of Driver ..... ENG TIEN LIN  
NRIC No ..... SXXXX396A  
Date Of Birth ..... 24/09/1976  
Occupation ..... Indoor

Valid Of Driving Pass	10/04/1995
Driving experience	25 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96190789
Alt. Phone Number	-
Email Address	YVONNEETL@YAHOO.CO.UK
Address	BLK 22 JALAN MEMBINA #26-70
Address complement	-
Postcode	166022
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Collision - Head to Rear
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)	1
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

Vehicle Registration Number	SMG3671C
Vehicle Manufacturer	Honda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Private car
Name of Driver	LINUS CHING
Contact Number	(Phone) +65-98219525
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Liberty Insurance

Amount Of Damage ..... -  
Details of property damaged in accident ..... -  
Cost 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.
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### 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")

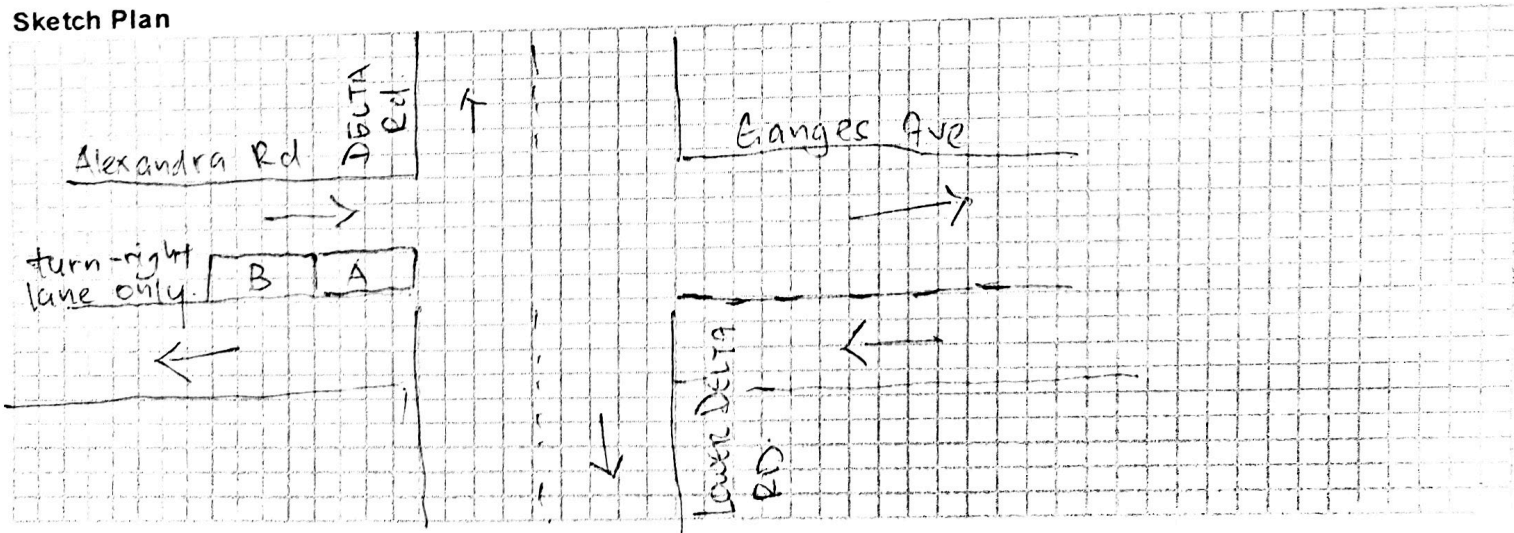
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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

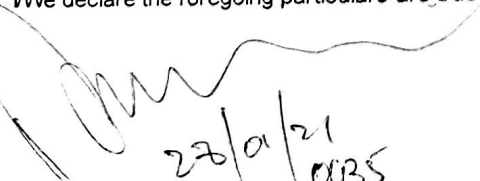
ON 27/01/21 ABOUT 1920HRS, VEHICLE A (SLE3254J) WAS FIRST-IN-LINE ON THE RIGHT-TURN ONLY LANE ON ALEXANDRA RD AWAITING TO TURN RIGHT INTO LOWER DELTA RD. (TRAFFIC LIGHTS WERE GREEN AT THAT TIME, AND THERE WERE STILL TRAFFIC ON THE OPPOSITE LANES).

- VEHICLE B (SMG3671C) COLLIDED INTO VEHICLE A'S REAR WHILE A WAS STILL WAITING FOR TRAFFIC ON THE OPPOSITE LANES TO ABATE.


- DRIVERS OF BOTH VEHICLES THEN MOVED TO LOWER DELTA RD (NEAR BLK 48) TO EXCHANGE DETAILS. THIS WAS WHEN IT STARTED TO RAIN.

Declaration

We declare the foregoing particulars are true in every respect.

  
28/01/21  
0835  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel



# CERTIFICATE OF INSURANCE

## KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Leow Kok Chien (Liao GuoQuan)  
 Period of Insurance : 25 Aug 2020 To 24 Aug 2021  
 Engine No. : G4FGGH623508  
 Chassis No. : KNAFZ411MH5638347

Vehicle No. : SLF3854J  
 Policy No. : 2100479160-04  
 Endorsement No. :  
 Issued Date : 24 Jul 2020

### ABOUT THE COVER

Make/Model : KIA FORTE K3 1.6 A SX  
 Engine Capacity/Tonnage : 1,591.00 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

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\* :  
 Mileage Condition : Unlimited Mileage  
 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)  
 Leow Kok Chien (Liao GuoQuan) - \$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: 241 Alexandra Road Singapore 159331 64278800
  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: 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.

0500709912  
 CYCLE & CARRIAGE - GARYQ(KIA)

239 ALEXANDRA ROAD  
 SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIGSGMOBILEAPP