100, 1120, 211	SSIGNMENT
<u> </u>	111121120 217.11.1
rom: Date:	Veh No: <u>SLY 242R</u> . Yr Regn: <u>2017 1 No V</u>
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To inspect Vehicle No:	Make: Toyota Wish c.c 1798
et Workshop m/s	Colour Gudy A/C: Insured / Std / NI / NA
of	Sp.Reading 80/90 T/Radio: Insured / Std / NI / NA
insured;	Eng/No:
Policy No.	C/No: 3TD9920W9050026
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake; Inorder Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 195/65/215
(Policy Condition)	R:
Remark: The ven had commenced its	DIS BS I DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear R/Bal. mm
IDAC Accident Rport: Consistent? : Yes or No	THE THE TABLE TH
GIA / PR Seen:Consistent? ; Yes or No	L/Bal. 6 mm L/Bal. 6 mm D.O.A. D.O.I. 25/3/21
Est. Repairs:days Res.: Yes or No	Survey held at Borneo Uh.
Lum Sum: % 3 Val.: Yes or No	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time   Action / Instruction	
	•
Confirm final figure at \$13,	.570.20, 8days
. (red: 3075.10;18%)	
	Dave Of Banaire 8
Date/Time, File Pass to? : Preli. Report	Days Of Repair.
; Final Report	Resurvey No. of Trip: Survey Fee:

Add Fee:

Reper Format:

Lump Sum / LBA: 1%

13570.20

: Site Insp (\$

: Interview (\$

:Tech. Invs (\$

Weelend (\$

\_8 + RS.\_\_SI

Photos

Officia

TOTAL





Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9

17 UBI ROAD 4

SINGAPORE 408611, Tel no.: 6631 1188

## **ESTIMATE**

Account Details  China Taiping Insurance (S) Pte Ltd  3 Anson Road  #16-00 Springleaf Tower Singapore 079909  Attn: Motor Claims Dept		Account No.	S1000003 / ICCI1		Customer Details						
		Document N 0 Document D			Mr Alvin Chung Wing Kit (Alvin Zeng Yongjie) 767 Woodlands Circle #07-340 Singapore 730767  Mobile: 98554426						
Va		Model	Variant	Reg. Date	Reg. No.	Kilometer	s \	Nip No.	Order N	o. / Remarks	
Yea			1/41/7 (1500C USERCO)	-				20828	67/TP/	//TP/SLU0242R	
201	17	ZGE20R	HPXNP S6	21/11/2017	SLU0242R 0 200						
	(	Chassis No.	Engine No.	Terms	SA / Counter		Vehicle In Collected O			ollected On	
JT	DG	G20W90J008263	2ZR0A30979	60	60 Sam San Joi		3/03/2	021 17.00	)//	0.00	
L	Cd		Job/Parts Des	cription			Qty	Unit Price	Disc %	Amount	
1 2 3 4 5 6 7 8 9	8 B B B S B B B	BP-SUNDRY-AI SUNDRIES TP CLAIM TP-GBJ2010G ACC DATE:23/03/2021 DRIVE IN:23/03/2021 DATE-IN: DATE SURVEY: NO OF REPAIR DAYS: BY: AUTHORISED ON: BP-LAB2 DRILL HOLE & INSTALL REAR REVERSE SENSOR BP-LAB2 CHECK LIGHTING & CONDUCT WATER LEAK TEST BP-LAB2 REMOVE & INSTALL REAR COMPARTMENT CARPET ,GARNISH AND TRIMMING TO ASSIST REPAIR BP-LAB2 REPLACE & INSTALL REAR WINDSCREEN GLASS BP-SUBLET INSTALL REAR WINDSCREEN GLASS 3M SOLAR F ILM						en ng	air.	30.00 180.00 180.00 360.00 462.00 350.00 180.00 360.00 2160 180.00 3600.00	
For & on behalf of Borneo Motors (Singapore) Pte Ltd  Customer's Signate			r's Signature	e Charge Summary			Total				
			Please acknowled	dge receipt of vehicle	Parts Labour Sublet Lubrication/Fluid Others			Less	Due		





Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9

17 UBI ROAD 4 SINGAPORE 408611, Tel no.: 6631 1188

# **ESTIMATE**

Account Details			Account No	Account No.		Customer Details				
China Taiping Insurance (S) Pte Ltd 3 Anson Road #16-00 Springleaf Tower Singapore 079909				S1000003 / ICCI1  Document No.  0		Mr Alvin Chung Wing Kit (Alvin Zeng Yongjie) 767 Woodlands Circle #07-340 Singapore 730767				
Attn: Motor Claims Dept			The state of the s	Document Date 24/03/2021		426				
Yea	ır	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No. / Remarks		
201	7	ZGE20R	HPXNP S6	21/11/2017	SLU0242R	0	20828	67/TP/SLU0242R		
	С	hassis No.	Engine No.	Terms	SA / Counter	3	Vehicle In		Collected On	
JTE	OGO	G20W90J008263	2ZR0A30979	60	Sam San Jo	23/03/	/2021 17.0	0//	0.00	
L	Cd		Job/Parts De	scription		Qty	Unit Price	Disc %		
11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29	1 2 3 4 5 6 7 8	EAS T52159-68907 F T52576-68020 L T52156-68030 L T52575-68020 F T52155-68030 F S52161-0K040 C T58307-68031 F T52181-68010 F T57655-68010 F T57666-68010 L T58035-68010 F T67935-68020 B0 T67005-68041 F T67881-68030 V T68105-68071 F T67750-68020 B1 T69350-28151 L	RAY JOB ON REAR REAR BUMPER CO /R SIDE BPR RETA /RR BUMPER SUP R/R SIDE BPR RETA /RR BUMPER SUP CLIPS REAR LOWER FLR ARM,RR BUMPER REAR FLOOR MEM /R LWR BACK PAN R/RR FLOOR EXTE PLATE BACK DOO PANEL ASSY,BACK VEATHERSTRIP, B REAR BACK DOOR REAR BACK DOOR REAR BACK DOOR COCK ASSY, BACK STRIKER ASSY, BACK	VER, NINER, PORT, AINER PORT  PANEL, BER 2, IEL, NSION, DR DOOR ACK GLASS, R BOARD, DOOR	ECTED AR	1.00 1.00 1.00 1.00 10.00 1.00 1.00 1.0	0 46.00 0 97.40 0 46.00 0 97.40 0 4.10 0 536.70 0 53.80 0 110.50 0 58.80 0 93.90 0 298.00 0 1477.30 0 335.70 0 1065.90 0 412.70		2950.00  46.00  97.40  97.40  41.00  7.40	
For & on behalf of Borneo Motors (Singapore) Pte Ltd  Customer's Sign  Please acknowledge recei				Charge Si	ummary	Total				
					Parts Labour Sublet Lubrication/Fluid Others		Less	Due		





Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9

17 UBI ROAD 4 SINGAPORE 408611, Tel no.: 6631 1188

## **ESTIMATE**

Account Details  China Taiping Insurance (S) Pte Ltd  3 Anson Road  #16-00 Springleaf Tower Singapore 079909  Attn: Motor Claims Dept			Document No.  0  Document Date		Customer Details  Mr Alvin Chung Wing Kit (Alvin Zeng Yongjie) 767 Woodlands Circle #07-340 Singapore 730767  Mobile: 98554426			
		Document 0						
Year	Model	Variant	Reg. Date	Reg. No.	Kilometers \	Nip No.	Order No	o. / Remarks
2017	ZGE20R	HPXNP S6	21/11/2017	SLU0242R	0	20828	67/TP/S	SLU0242R
	Chassis No.	Engine No.	Terms	SA / Counter	Ve	ehicle In	Сс	llected On
JTD	GG20W90J008263	2ZR0A30979	60	Sam San Joi	23/03/2	021 17.00	)//	- 0.00
L C	Cd	Job/Parts Descri	iption		Qty	Unit Price	Disc %	Amount
31 32 33 34 35 36 37 38 39 40 41 42	0 T75444-68010 PLA 1 T75443-ELGAN EL 2 T76811-68130 GAF 3 T76817-50010 CLIF 4 T75819-33010 CLIF 5 T81591-68020 LEN 6 T81581-68020 LEN 7 T81271-72011 LEN 8 T89997-30070 ELE 9 SPZ061-12010 24 1G 0 T04562-12010 FRT 1 T21000-20 SIKA	DNT BONNET EMBL TE, LUGGAGE CON EGANCE EMBLEM RNISH, BACK DOOF P, BACK DOOR P, LUGGAGE IS & BODY, RR IS, LICENSE LAMP CTRICAL ANTENN G3 SENSOR W/SCREEN DAM I 182010 SIKA TACK 207. G+P ADHESIV  Tauffur  Lauffur  Lauffur	A,  KIT,  GO! (BLA E PRIMER  9749)  25/5/71  before par	8 145pm	1.00 1.00 1.00 1.00 2.00 1.00 2.00 1.00 1	72.20 41.10 40.00 290.30 2.40 3.90 294.10 31.00 192.20 151.60 121.00 108.00 200.00		72.20 41.10 40.00 290.30 7.80 7.80 294.10 × 294.10 × 62.00 × 191.60 121.00 121.00 121.00
	on behalf of o_Motors (Singapore) Pte L	Customer's	Signature	Charge Sur	mmary	Total		16,645.30
-	LKK Auto Consultants he the Repairer of the follow To resurvey before/after spra To display damaged part(s) d Parts prices are subject to co Third party survey is on a "Wi No illegal modification(s) is al	ving:  by painting  luring resurvey  onfirmation  ithout Prejudice* basis	eceipt of vehicle	Parts Labour Sublet Lubrication/Fluid Others	7,813.3 8,482.0 350.0 0.0	Less		1,165.17 0.00 17,810.47
	Supplementary item(s) must is subject to final approval fro     Acknowledged by Repairer     Signature:     Date:	be resurveyed and	Custome	er Copy				Page 3

SB0G213N0005 / Borneo Motors Pte Ltd ENTRY DATE & TIME: 23/03/2021 21:38 (SGT) SUBMITTED BY: Ashlyn Chng VERSION: 1 (23/03/2021 21:38 (SGT))



## 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 witholding of material facts may allow insurance companies to repudiate policy liability. boild have 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

23/03/2021 21:38 (SGT) 23/03/2021 14:15 (SGT) Singapore TAMPINES AVE 5 SLIP ROAD TO TAMPINES AVE 1

Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SLU242R

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner NRIC No

**Email Address** Mobile Phone No

Alternative Phone No

ALVIN CHUNG WING KIT

SXXXX154G

MORPHY1972@OUTLOOK.SG

(Phone) +65-98554426 (Home) +65-98554426

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 Transmission

CC

Toyota

Wi\$h

No - Claiming third party

Private car Auto 1800

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number Cover Note Number AIG Asia Pacific Insurance Pte. Ltd.

Comprehensive

No

1800133170

DRIVER

Name of Driver NRIC No

ALVIN CHUNG WING KIT SXXXX154G



Accident report SB0G213N0005

Page 1 of 14

Date Of Birth
Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number

Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode

Address BL K 767 WOODLANDS CIRCLE #07-340
Address complement Postcode 730767
Is the driver the policyholder? Yes

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

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

Weather Conditions

Road Surface

Collision - Head to Rear

Clear

Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

No
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

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

No

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

13/11/1972

20/07/1995

25 YEARS AND 8 MONTHS

MORPHY1972@OUTLOOK.SG

(Phone) +65-98554426

(Home) +65-98554426

Outdoor

Male

Vehicle Registration Number GBJ2010G Vehicle Manufacturer Toyota Vehicle Model Hiace Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle Name of Driver YONG YIK FU Passport No/FIN GXXXX421P Contact Number (Phone) +65-94897919

75.256.830.56730.6830

Address

Accident report SB0G213N0005

Page 2 of 14

#### 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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:

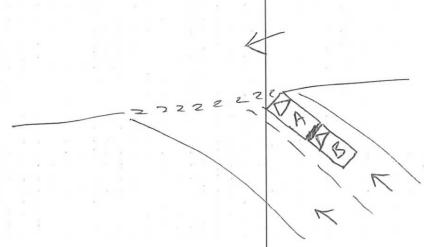
Driver's Signature
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23 MAR 2021 at about	it 2:15 pm 1 was driving along
Tampines Ave 5 and turning left on	to Tampines Ave 1. Ny vehicle
SLU 242 R came to a stop at the	e sliproad as there were on coming
traffic coming along Tampines An	e 2. While wenting for traffic
to clear, felt a loud crashing so	und from behind and the my
stationary car. Came down from	my vehicle and realise that
a white colowed van. GBJ 20	86 had crashed onto the near
of my vahicle.	
, 0	
	1
<b>DECLARATION</b> I/We declare the foregoing particulars are true in every respect.	
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 .:



### MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: ANI	N CHUNG WING KIT
VEHICLE NUMBER	: SL	u 242 R
DATE/TIME OF ACCIDENT	: 23	MAR 2021 e 1415 hrs
PLACE OF ACCIDENT	: Tampir	es Ane 5 slipwad to Tampines Are
THIRD PARTY VEHICLE (IF ANY)	: 46	2010 G
*******	*****	*********
DESTINATION BEFORE THE ACCI	DENT?	oines Hub
	E TRAF	S BEFORE YOU DRIVE ON THE DAY OF FIC POLICE CONDUCT ANY BREATHE-
No	, WHAII	STHE RESULT:
WHAT IS THE TYPE OF COLLISION TO ALL VEHICLES INVOLVED?  Another valuical hit from		HE EXTENSIVENESS OF THE DAMAGES
WERE YOU OR YOUR PASSENGE WERE YOU TAKEN TO THE TRAF		RED? IF INJURED, WHICH HOSPITAL? CE FOR INVESTIGATION?
A My Dujlet Name: ALVIN CHUNC,		
Name: ALVIN CHUNC,		
I Affirmed The Above Information Is G	iven To N	ly Best Knowledge.

AIG Asia Pacific Insurance Pte. Ltd. AIG Building 78 Shenton Way #07-16 Singapore 079120 Tel: 6419 3000