

ASS. REC. BY:

REF:

CS/ A/G/ 210038001KV f3

C

Kenneth

## 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. 0999993598

Claims No. 6015570429SG

Sum Insured: \_\_\_\_\_ Excess: 2000

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection.

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: \$101K

IDAC Accident Rpt: \_\_\_\_\_ Consistent?: Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No

Est. Repairs: 02 days Res.: Yes or No

Lum Sum: 1.31 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SCL 1400S Yr Regn: 02, 17

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

Truck / Trailer or Wagon

Make: Toy Previa c.c. 2362

Colour: M.P. White A/C: Insured / Std / NI / NA

Sp. Reading: 136837 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JTEG054N00714538

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rlm / STD A/Rlm or

Tyre Size: F: 215/55R17

R: \_\_\_\_\_

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

TOYO / OKO or

Front

Rear

R/Bal. 9 mm

R/Bal. 8 mm

L/Bal. 9 mm

L/Bal. 8 mm

D.O.A. 5/5/21

D.O.I. 14/5/2021

Survey held at

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

FR N/S

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

Date / Time Action / Instruction

24/6 @ 2594.10 Confm (Red 2433.80, 48%)

Data/Time, File Pass to?

☐ : Prell. Report

Days Of Repair: 2

1)

☐ : Final Report

Resurvey No. of Trip: 1

Data/Time, File Return to?

2) 5/7/21-Typist

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

Survey Fee:

Transportation:

S - RS, SI

Photos

Others

TOTAL

Report Format: Merimen

Lump Sum / I.B.I: (\$ 2594.10)



HOTLINE TEL: (65) 6419-3000

**CERTIFICATE OF INSURANCE**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

COMPREHENSIVE COMMERCIAL MOTOR  
CERTIFICATE NO. 999993598/100788076-00000

**OWN DAMAGE EXCESS**      \$2,000.00 (1)  
**WINDSCREEN EXCESS**      \$100.00  
(for policies with effect from 1st November 2002)  
**SUM INSURED**      S\$1.00  
**INSURING WITH COE/PARF**      YES

- 1) **VEHICLE REGISTRATION NO.**      SLL1400S  
2) **NAME OF INSURED**      Daimler Fleet Management Singapore Pte Ltd  
3) **EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT**      1 Jan 2021  
4) **DATE OF EXPIRY OF INSURANCE**      31 Dec 2021  
5) **PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE \***

- 1) Any drivers who is driving on the Insured's order or with their permission.  
2) Excess \$2,500 applies to drivers age 21 to 26 years old unless otherwise specified  
3) Additional Excess \$3,500 applies to drivers age below 21 or above 65 years old and or less than years driving experience unless otherwise specified

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

**6) LIMITATION AS TO USE \***

- 1) Use for social, domestic, pleasure purposes and business purposes of the Insured and or hirer whom the vehicle is hired to.  
The Policy does not cover:  
1) Use for the carriage of passengers for hire or reward  
2) Use for driving tuition, driving test, racing, pace-making, reliability trial or speed-testing. 3) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.  
4) Use for any purpose in connection with the Motor Trade.

In the event of accident claim, the repairs to the Vehicle must be carried out by either one of our AIG Authorized Repairers or a particular Repairer approved by AIG

**LOSS OF USE**      NOT INCLUDED

\* **NAMED DRIVER**      N/A

**HIRE PURCHASE COMPANY**      NA

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore      20 Apr 2021

**AIG ASIA PACIFIC INSURANCE PTE. LTD.**

030023-000  
JLT MANAGEMENT PTE LTD  
#09-02, 8 MARINA VIEW  
ASIA SQUARE TOWER 1  
SINGAPORE 018960

  
Authorized Representative

ORIGINAL

SSCNFY



REPUBLIC OF SINGAPORE **DRIVER'S**

License No. **S93383071**

Name **CHAN YONG KANG**

Birth Date **12 Oct 1993**

Issue Date **31 Oct 2017**

 002739246D



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S93383071**



Name **CHAN YONG KANG**

**陈永康**

Race **CHINESE**

Date of birth **12-10-1993** Sex **M**

Country of birth **SINGAPORE**





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CL

EFFECTIVE DATE

Class 3 Motor cars with unladen weight  $\leq 3000\text{kg}$  with  $\leq 7$  passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq 2500\text{kg}$  31 Dec 20



Licence No: S93383071

NP 428A

4297106



NRIC No. S93383071

Date of issue  
23-10-2008

Address

APT BLK 842G TAMPINES STREET 82  
#13-98  
SINGAPORE 527842





## 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	06/05/2021 20:13 (SGT)
Date of Accident	05/05/2021 11:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	AYE (Tuas) at exit 8
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL1400S
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD.
Company Reg No	1XXXXX778Z
Email Address	eugene.koh@daimler.com
Mobile Phone No	(Phone) +65-68498118
Alternative Phone No	(Office) +65-68498118

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	PREVIA 2.4 CVT 7 SEATER
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	2362

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995580
Cover Note Number	NA

#### DRIVER

Name of Driver	CHAN YONG KANG
NRIC No	SXXXX307I



Date Of Birth	12/10/1993
Occupation	Indoor
Date Of Driving Pass	31/10/2017
Driving experience	3 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92288162
Alt. Phone Number	-
Email Address	Louischanyk@hotmail.com
Address	842G Tampines street 82
Address complement	#13-98
Postcode	527842
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Side Swipe
Weather Conditions	Clear
Road Surface	Wet

#### 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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	Tan lay dee
Gender	Female

#### 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

I exited exit 8 of aye(Tuas) and was driving along the minor road it was a 4 lane traffic and my vehicle was positioned in the 3rd lane as I checked my mirror and lane change to my left my vehicle front left area scrapped onto third party right side. No injuries involved.

#### 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 1

Vehicle Registration Number	SHD2674B
Vehicle Manufacturer	Toyota
Vehicle Model	Alphard
Vehicle Variant	-
Vehicle Colour	Black

Vehicle Category	Taxi
Name of Driver	Zabir Khan
NRIC No	SXXXX367G
Contact Number	(Phone) +65-92293737
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature 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 **regudiate 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 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:

6 May 2021

VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER

MOHAMED SAIFULLAH S/O SYED MASOOD

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



ACCIDENT DIAGRAM

Ver. 30042021

South Buona Vista Road.



Vehicle A: SLL14005

Vehicle B: SHD2674B

*[Signature]*

VERIFIED BY AJAX MARS (ARC)  
REPORTING OFFICER  
MOHAMED SAIFULLAH S/O SYED MASOOD

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.:

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I exited exit 8 of aye(Tuas) and was driving along the minor road it was a 4 lane traffic and my vehicle was positioned in the 3rd lane as I checked my mirror and lane change to my left my vehicle front left area scrapped onto third party right side. No injuries involved.

DECLARATION

I/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:

6 May 2021

VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER

MOHAMED SAIFULLAH S/O SYED MASOOD

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:





# TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

PAGE: 1

M/S : AIG ASIA PACIFIC INSURANCE PTE. LTD.

78 SHENTON WAY #07-16  
AIG BUILDING  
SINGAPORE 079120

ATTN : MOTOR CLAIM DEPT

TEL : 6419 3000

FAX : 6415 3723

YOUR REF NO :

CLAIM TYPE : OWN DAMAGE

ACCIDENT DATE : 05/05/2021

## ESTIMATE

NO : QUOT202105-000029(00)

DATE : 14/05/2021

POLICY NO : 999995580

VEH REG NO : SLL1400S

MAKE/MODEL : TOYOTA PREVIA 2.4 CVT 7  
SEATER

CHASSIS NO : JTEGD54M007145538

ENGINE NO : 2AZ4A73881

REG. DATE : 2017

## Estimate Repair Cost to Vehicle No : SLL1400S

Description	Quantity	Unit Price	Amount
		S\$	S\$
<b>PARTS</b>			
1 Headlamp assy - LH	1	750.00	750.00
2 Headlamp nozzle - LH	1	285.00	285.00
3 Headlamp nozzle cover - LH	1	38.00	38.00
4 Front bumper	1	480.00	480.00
5 Front bumper side retainer - LH	1	55.00	55.00
6 Front bumper reinforcement	1	255.00	255.00
7 Front bumper centre grille	1	120.00	120.00
8 Front bumper lower garnish	1	115.00	115.00
9 Front bumper fog lamp - LH	1	168.00	168.00
10 Front bumper sensor	1	198.00	198.00
11 Washer tank	1	125.00	125.00
			2,589.00
		Add 10%	258.90
			2,847.90
<b>LABOUR</b>			
12 To remove and refit front bumper sensor	1	100.00	100.00
13 To check and rectify wiring system	1	80.00	80.00
14 To panel beat & repair LH front fender, LH front chassis frame, including replacement of parts & align where necessary, to refit and adjust the same	1	1,000.00	1,000.00
15 To putty and spray paint on affected areas	1	1,000.00	1,000.00
			2,180.00

TOTAL S\$ 5,027.90

ADD GST @ 7% 351.95

GRAND TOTAL S\$ 5,379.85

SINGAPORE DOLLAR FIVE THOUSAND THREE HUNDRED SEVENTY-NINE AND CENTS EIGHTY-FIVE ONLY

**LKK Auto Consultants** hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To resurvey before/after parts 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: \_\_\_\_\_

FOR TONG LUCK AUTO PTE LTD  
AUTHORISED SIGNATURE