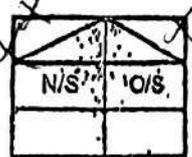


ASS. REC. BY: Steve 7 / 1997 AIG

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OP / 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.



Rel. or Market Value: _____
IDAC Accident Report: _____ Consistent? : Yes or No
SIA / PR Seat: _____ Consistent? : Yes or No
Est. Repairs: _____ 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: SLX 729M Yr Regn: 15/3/18
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: Mitsubishi Outlander c.c. 1998
Colour: Blue A/C: Insured / Std / NI / N
Sp. Reading: 40761 T/Radio: Insured / Std / NI / N
Eng/No: _____
C/No: GFTW0491364
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Locked / Burnt or
Brakes: In order / Jammed / Leaked / Burnt or
Mod: Nil / S/Rim / STD AIRim or
Tyre Size: F: 225/55R18
R: 11
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or _____
Front Rear
R/Bal. 5 mm R/Bal. 5 mm
L/Bal. 5 mm L/Bal. 5 mm
D.O.A. 18/5/21 D.O.I. 19/5/21
Survey held at cycle & collage
Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or
The U/C / Chassis frame / Body Structure affected due to collision

Date / Time	Action / Instruction
	<u>MIV-87K</u>

Prell. Report Final Report
Days Of Repair: _____
Resurvey No. of Trip: _____
Survey Fee: _____
Transportation: _____
Add Fee: Site Insp (\$ _____) S + RS \$ _____
 Interview (\$ _____) Photos
 Tech. Inve (\$ _____) Others
 Weekend (\$ _____) TOTAL



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE
 209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



ESTIMATE

Co Reg No : 1977014696

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPT 78 SHENTON WAY #09-16 AIG BUILDING SINGAPORE 079120 Contact No 6419 1892	Cust No/Name /Ng Chin Hung Reg No/Reg Date SLX729M / 15/03/201 Date In/Mileage 18/05/2021/ 40761 Chassis No GF7W0401264 Engine No 4J11XP1912 Make/Model MIT/OUTLANDER 2.0 2WD CVT ELEGANCE Colour/Trim D01 COSMIC BLUE / BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
KAX00008	Credit	18/05/2021/ 19:01	QUE	261 / Edwin Caina	11119

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
E PNT88000 REPLACE FRT BUMPER, BONNET, FRT LH FENDER & BODY KIT REPAIR FRT RH FENDER, FRT RH DOOR & AFFECTED AREAS	2.5 X 450			1125 3150.00
E PNT98000 SPRAY PAINT WORK ON FRT BUMPER, BONNET, LHF FENDER, RHF FENDER, RHF DOOR, LHF DOOR, FRT SUPPORT, BODYKIT & AFFECTED AREAS	6 X 350			2100 3150.00
A 25000001 REMOVE & INSTALL RADIATOR & CONDENSER TO FACILITATE REPAIR				? 100.00
A 97000001 TO TOP UP A/C GAS & CHECK A/C SYSTEM CONDITION				? 80.00
M SUNDRY TO APPLY BODY SEALANT ON AFFECTED AREAS				40 80.00
M SUNDRY TO PERFORM RUST PREVENTION ON AFFECTED AREAS				40 120.00
A 54900099 CHECK ON WIRING & CHASSIS ELECTRICAL SYSTEM				30.00
A 10028901 TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST USING HI-SCAN PRO TEST				120.00
M SUNDRY TO SUPPLY FRT NUMBER PLATE WITH FRAME				50.00
M SUNDRY SUNDRIES				20 50.00
M SUNDRY TO RE-APPLY ZERTONA ON AFFECTED AREAS				? 240.00
M INSULATOR, FR FENDER, LH	1.00	65.00	23.00	50.05
M FENDER, FR LH	1.00	622.00	23.00	478.94
M SHIELD, FR WHEELHOUSE, LH	1.00	164.00	23.00	126.28
M MOULDING, FR BUMPER, LH	1.00	116.00	23.00	89.32
M MOULDING, FR BUMPER, RH	1.00	116.00	23.00	89.32
M MOULDING, FR WHEEL ARCH, LH	1.00	199.00	23.00	153.23
M HOOD	1.00	980.00	23.00	754.60
M HINGE, HOOD, LH	1.00	68.00	23.00	52.36

Estimate

(provide sales agent)

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 & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel 65684555 Fax 65691056



ESTIMATE

GST Reg No : MR-8500111-X

Co Reg No : 197701469G

Table with 2 main columns: Invoice Name & Address, Owner Name & Vehicle Info. Includes details for AIG Asia Pacific Insurance Pte. Ltd. and vehicle specifications for a Mitsubishi Outlander 2.0 2WD CVT Elegance.

Main table with columns: Account No, Terms, Date/Time Printed, CSE, Operator, WIP No, Description of Goods / Services, Qty, Unit Price, Disc%, Amount. Lists various car parts and their estimated costs.

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.



CYCLE & CARRIAGE

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PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



ESTIMATE

Co Reg No : 197701469G

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPT 78 SHENTON WAY #09-16 ATG BUILDING SINGAPORE 079120 Contact No 6419 1892	Cust No/Name /Ng Chin Hung Reg No/Reg Date SLX729M / 15/03/201 Date In/Mileage 18/05/2021/ 40761 Chassis No GF7W0401264 Engine No 4J11XP1912 Make/Model MIT/OUTLANDER 2.0 2WD CVT ELEGANCE Colour/Trim D01 COSMIC BLUE / BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
KAX00008	Credit	18/05/2021/ 19:01	QUE	261 / Edwin Caina	11119

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M PANEL, HEADLAMP SUPPORT, UPR	1.00	230.00	23.00	177.10
M PANEL, HEADLAMP SUPPORT, LWR	1.00	107.00	23.00	82.39
M TANK ASSY, RADIATOR COND	1.00	103.00	23.00	79.31
M AERO KIT - OUTLANDER	1.00	1554.00	00.00	1554.00
M LLC 4L	1.00	26.00	23.00	20.02

Estimate

SURVEYOR NAME: Steve CLKK 19/5/21, 5:00pm
 SURVEYOR SIGNATURE: DD-ML AL
 DATE: _____
 REMARKS: Expri -?
PIP
My ReL Sry
6 days

Confirm & accepted by CLKK Auto Consultants hence notify
 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 items must be resurveyed and
 Insurance Company

Authorized signatory and company stamp

Nett	17,327.98
7% GST on	17327.98
Total Payable	18,540.94

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 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. 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	18/05/2021 12:28 (SGT)
Date of Accident	18/05/2021 06:40 (SGT)
Exact Location of Accident	SLE, Singapore
Additional Location Information	SLE TO TPE VIADUCT (AROUND THE BEND)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX729M
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	NG CHIN HUNG
NRIC No	SXXXX130I
Email Address	MARCUSCHNG88@GMAIL.COM
Mobile Phone No	(Phone) +65-96366122
Alternative Phone No	+65-96366122

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
Variants	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800026270-02
Cover Note Number	-

DRIVER

Name of Driver	NG CHIN HUNG
NRIC No	SXXXX130I

Date of Birth
 Occupation
 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

29/03/1968
 Indoor
 07/04/1999
 22 YEARS AND 1 MONTH
 Male
 (Phone) +65-96366122
 +65-96366122
 MARCUSCHNG88@GMAIL.COM
 23 MAYFLOWER CRESCENT
 -
 568832
 Yes
 -
 No
 -
 -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Side Swipe
 Clear
 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
 2
 No
 -
 Yes
 2
 No

PASSENGER 1

Name
 Gender

NAMIE NG YUE WEN
 Female

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

Vehicle Registration Number
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category

PD1710S
 Isuzu
 -
 -
 -
 Bus

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)

JEFFRI BIN OSMAN
(Phone) +65-83569966

-
-
-
AXA Insurance Pte Ltd
-
-
-

SKETCH PLAN

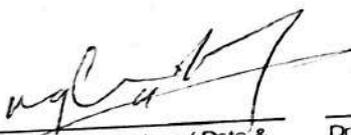
IMPORTANT NOTICE

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 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 :

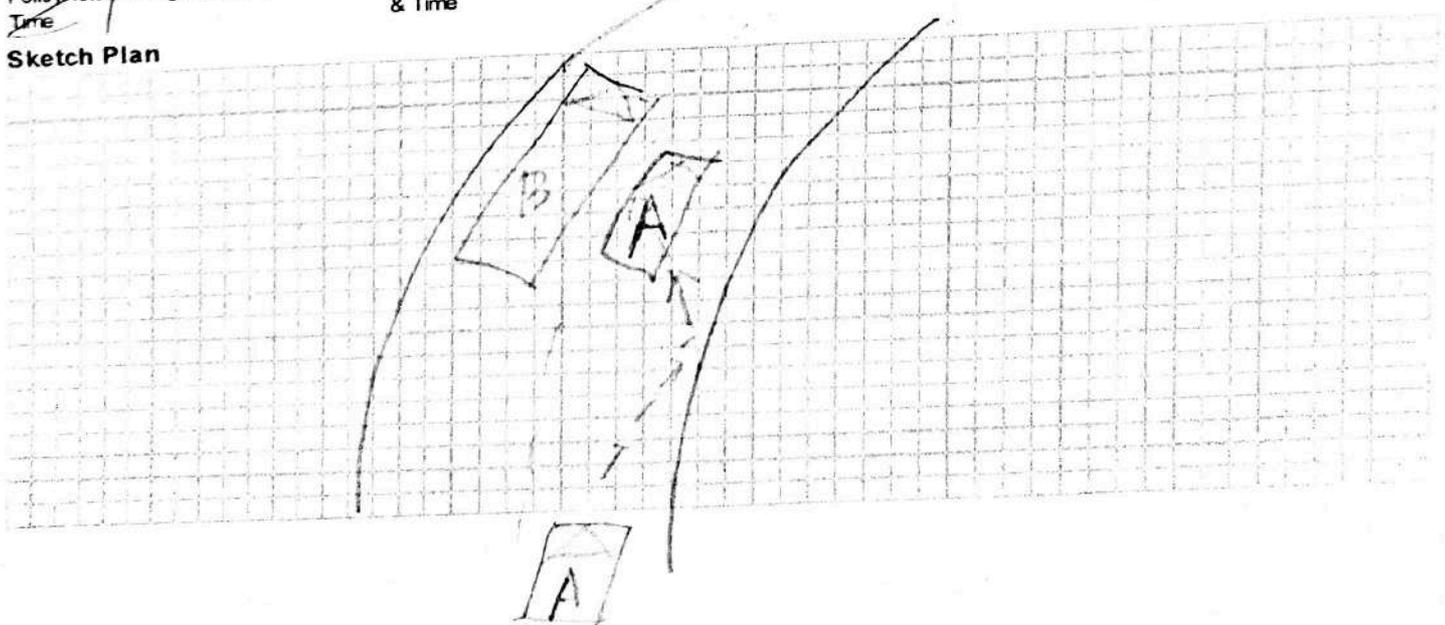
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (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

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


Witnessed by Reporting Centre Personnel

Sketch Plan

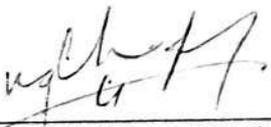


Describe Circumstances of the Accident

Both my car and the bus were travelling in our respective lanes around the bend at the exit from SLE to TPE. My car suddenly skidded and swerve right to hit the highway bumper. After impact, my car rebounded from impact and swerve left to side swipe the bus on my left. The road conditions were wet from the steady rain in the morning.

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

Name of Policyholder : NG CHIN HUNG
Period of Insurance : 15 Mar 2021 To 14 Mar 2022
Engine No. : 4J11XP1912
Chassis No. : GF7W0401264

Vehicle No. : SLX729M
Policy No. : 1800026270-02
Endorsement No. :
Issued Date : 25 Feb 2021

ABOUT THE COVER

Make/Model : MITSUBISHI Outlander 2.0 Elegance/Sports
Engine Capacity/Tonnage : 1,998.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 years old and above
Mileage Condition : Unlimited Mileage

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)
NG CHIN HUNG - \$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 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), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

504620211
CMICP2 - SHERNI
39 ALEXANDRA ROAD
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
This computer generated document does not require a signature.

SSPTLA

1004200272/ACX