

ASS. REC. BY:

Steve

REF

AIG

CS/AIG21006327/Eqf3

## ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

Insured:

Policy No. 1900017566

Claims No. 2954383795SG

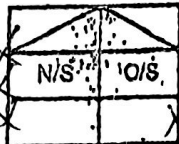
Sum Insured: Excess: 800

(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

Cum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brakes: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

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

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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 - 95K

new car price \$ 136K

02/06/21 @ 3.27pm revert to AIG via Merimen. (T/L)

03/06/21 Submit Extensive Total Loss Report.

File/Time, File, Poss. to?

03/06 Typist

File/Time, File Return to?

: Prel. Report

: Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

: Site Insp (\$

: Interview (\$

: Tech. Inve (\$

: Weekend (\$

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performed:

MER-OD/TL-E

sup. turn / 1.2.1.1

TOTAL

**Cycle & Carriage Automotive Pte Ltd**

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

02 June, 2021

AIG Asia Pacific Insurance Pte Ltd  
78 Shenton Way #08-16  
#08-16 AIG Building  
Singapore 079120

Attention: Motor Claim Department

**Re: Regn. SMJ 7687R Mit Eclipse – Own Damage Claim**

We regret to inform you that the extent of the damage is not economical to carry out the repair. In review to the extent of the damaged, the degree of structure is difficult to restore to its original condition as manufactured by factory.

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

Your early reply is much appreciated.

Yours faithfully

  
Edwin Caina  
Adviser-Customer Service  
Cycle & Carriage Automotive Pte Ltd

For enquiry, please contact: 65684501

*Steve (CLKK)  
21/6/21, 11.00 am*



## 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	01/06/2021 16:01 (SGT)
Date of Accident	31/05/2021 12:30 (SGT)
Exact Location of Accident	Cantonment Rd, Singapore
Additional Location Information	JUNCTION OF CANTONMENT ROAD & SPOTTISWOODE PARK RD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ7687R
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	SRABANI BHARADWAJ
NRIC No	SXXXX253A
Email Address	SRABANI_SAMANTA@YAHOO.COM
Mobile Phone No	(Phone) +65-94575446
Alternative Phone No	+65-94575446

### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Eclipse cross
Variant	-
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	1499

### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900017566-01
Cover Note Number	-

### DRIVER

Name of Driver	SRABANI BHARADWAJ
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IC No	SXXXX253A
Date Of Birth	08/08/1970
Occupation	Outdoor
Date Of Driving Pass	24/02/2016
Driving experience	5 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-94575446
Alt. Phone Number	+65-94575446
Email Address	SRABANI_SAMANTA@YAHOO.COM
Address	5 RHU CROSS #07-19
Address complement	-
Postcode	437434
Is the driver the policyholder?	Yes
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	Collision - Major/Minor Rd
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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?	Yes

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
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?	Yes
Reasons for not uploading a video of the accident	WITH TRAFFIC POLICE
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	SHC2953B
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)

-  
Taxi  
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-  
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## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person  
Address  
Address Complement  
Post Code  
Approximate Age Years Old  
Injuries Sustained  
Injured person in which vehicle?  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance?

SRABANI BHARADWAJ  
-  
-  
-  
-

BRUISES, NECK MUSCLE PAIN, VOMITTING, BREATHLESS &  
CHEST DISCOMFORT

SMJ7687R

Yes

Yes



## 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")

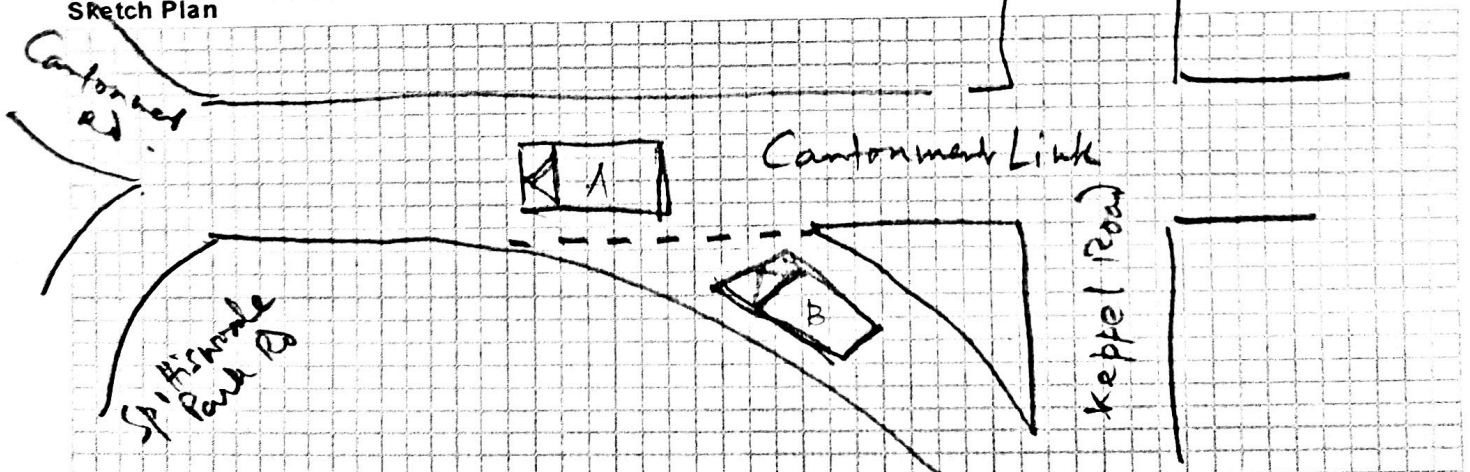
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the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

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

I was driving to work (SGIT) from home. At approx 12:30pm, I had crossed the traffic light from Cantonment Link & Hepper Road Junction.

I was turning left to Spottiswood Park Road. I suddenly heard a big noise & all air bags opened up → my car spinned & stopped. There was smoke coming out.

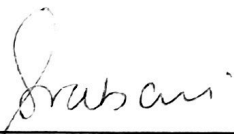
There were people around and one person pushed me out of the car.

I was shocked, nauseous & giddy.

There was a Taxi which was involved in the accident & it was also at the site.

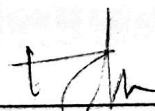
### Declaration

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





# SINGAPORE POLICE FORCE



T/20210601/7011

1 of 4

Report No. T/20210601/7011

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made:  
01/06/2021 15:03

Vide Report No.:

Station Diary No.:

**Informant's Particulars**

Name of Informant:  
SRABANI BHARADWAJ

Address:  
5 RHU CROSS #07-19 SINGAPORE 437434

ID Type / ID No.:  
NRIC NO / S7088253A

Contact No.:  
Home/Office: Mobile: 94575446

Nationality:  
BRITISH

Email:  
SRABANI\_SAMANTA@YAHOO.COM

Sex: Age: Date of Birth:  
Female 50 08/08/1970

Type of Informant:  
Driver

Race:  
Indian

Language:  
English

Institution / School Name:

Occupation:  
Paediatrician

Driving Licence Information:  
Class: 3 Date of Expiry:

**General Information of the Accident**

Type of Accident:

Injury  
Attended by Police

Drink  
Drive:  
No

Date/Time of  
Accident:  
31/05/2021 12:30

Type of Location:  
Y-Junction

Location:

CANTONMENT LINK

Weather:  
Clear

Road Surface:  
Dry

Road Speed Limit:

Traffic Flow:  
One Way

Traffic Control:  
Traffic Light - Working

Traffic Volume:  
Moderate

Type of Collision:  
Between Moving Vehicles - Head To Side

Anyone conveyed by  
ambulance:  
Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHC2953B	Car			Blue		2
SMJ7687R	Car	MITSUBISHI	ECLIPSE CROSS 1.5 CVT SUNROOF	Red		0





# SINGAPORE POLICE FORCE



T/20210601/7011

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Report No. T/20210601/7011

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

## CONTINUATION OF REPORT

Details of Vehicle Insurance		Insurance No	Effective	Expiry Date
Vehicle No.	Insurance Company	1900017566-01	20/03/2021	19/03/2022
SMJ7687R	AIG ASIA PACIFIC INSURANCE PTE. LTD.			

Details of Person Involved				
Any Pedestrian Involved: No			Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL				
Driver			ID No.	NIL
Name	Unknown Driver		Contact No.	NIL
Related Vehicle	SHC2953B (Car)			
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	31/05/2021	Date	NIL	
No. of Days granted Medical Leave	NIL	Degree of	Slight	
Passenger			ID No.	NIL
Name	Unknown Passenger		Contact No.	NIL
Related Vehicle	SHC2953B (Car)			
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	31/05/2021	Date	NIL	
No. of Days granted Medical Leave	NIL	Degree of	Slight	
Driver			ID No.	S7088253A
Name	SRABANI BHARADWAJ		Contact No.	94575446
Related Vehicle	SMJ7687R (Car)			
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	31/05/2021	Date	31/05/2021	
No. of Days granted Medical Leave	03	Degree of	Slight	



**SINGAPORE  
POLICE FORCE**



T/20210601/7011

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Report No. T/20210601/7011

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

**CONTINUATION OF REPORT**

Brief Details.

I had crossed Cantonment link and Keppel junction and going to turn to left towards Spottiswoode Park Road when I heard a loud noise and then noticed my air bag blowing off and car spinning. Then my car stopped. Smoke was coming out. I saw people running around taking photos. I was assisted out of my car. I noticed a blue taxi which was the other vehicle involved in the accident at the site.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20210601/7011

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Report No. T/20210601/7011

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
RASHIDAH BINTE AZMAN  
Contact No.: 65476216

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
01/06/2021 15:03

Classification Of Case:

# MITSUBISHI PRICE LIST



With effect from 20 May to 9 June 2021, 12pm

## CATEGORY A

Car Models	Fuel Consumption (l /100km)	CO <sub>2</sub> Value (g/km)	VES Banding	List Price	Finance & Insurance Bonus	Used Car Bonus	Standard Package	Exclusive Package
ALL-NEW Space Star 1.2L (Style)	4.7	110	A2	\$86,999	\$5,000	\$5,000	\$76,999	\$75,999
ALL-NEW Attrage 1.2L (Style)	4.9	113	A2	\$86,999	\$5,000	\$5,000	\$76,999	\$75,999

## CATEGORY B

Car Models	Fuel Consumption (l /100km)	CO <sub>2</sub> Value (g/km)	VES Banding	List Price	Finance & Insurance Bonus	Used Car Bonus	Standard Package	Exclusive Package
Outlander 2.0L (Classic)	6.6	151	B	\$141,999	\$5,000	\$7,000	\$129,999	\$124,999
Outlander 2.0L (Style)	6.6	151	B	\$148,999	\$5,000	\$7,000	\$136,999	\$126,999
Eclipse Cross 1.5T (Style)	6.7	154	B	\$143,999	\$5,000	\$7,000	\$131,999	\$129,999
Eclipse Cross 1.5T (Style) Pano Roof	6.7	154	B	\$150,999	\$5,000	\$7,000	\$138,999	\$136,999

Category A COE Charged / Rebate Level - \$38,000

Category B COE Charged / Rebate Level - \$54,000

Cycle and Carriage Engine Warranty Coverage - 10 years with 200,000 km mileage

Warranty Coverage - 5 years with unlimited mileage

Top up for 6-bid guaranteed COE: \$4,000



CYCLE & CARRIAGE

Exceptional Journeys