

ASSIGNMENTSurveyor: **KENNETH**DOI: **21/06/2021**Date / Time : **21/06/2021**Registered in Merimen: **21/06/2021****Pre-assign / CCU / FTE**Insured Vehicle No. : **SMD 3242Z**

Claim No. : _____

Name of Insured : **SIMON ONG ENG HOCK**Policy No. : **1800097216**

Insured Tel No. : _____ HP: _____

Make / Model : **Audi A4**Excess Sec II :S\$ _____ D.O.A : **16/06/2021 20:15**Place of Accident : **MARINE PARADE ROAD TOWARDS AMBER ROAD**

Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : **CAO XIXI**

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % **Final ? Yes / No****SLZ 1612Z**INSRS:
WSP: **K.Kim Hin**
Tel : **Auto Pte Ltd.**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SLZ 1612Z - X	SMD 3342Z - X	STAGE	DATE / PIC
			Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI:	
			Documentation Check List:	Handler Typist
			Notification ltr (if non-pickup)	<input type="checkbox"/> <input type="checkbox"/>
			After call ltr to OI:	<input type="checkbox"/> <input type="checkbox"/>
			Authorisation To Act:	<input type="checkbox"/> <input type="checkbox"/>
			Release Voucher:	<input type="checkbox"/> <input type="checkbox"/>
			Final Repair Bill:	<input type="checkbox"/> <input type="checkbox"/>
			Car Rental Invoice:	<input type="checkbox"/> <input type="checkbox"/>
			Towing Invoice	<input type="checkbox"/> <input type="checkbox"/>
			LTA / GIA :	<input type="checkbox"/> <input type="checkbox"/>
			Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
			PIR:	<input type="checkbox"/> <input type="checkbox"/>
			Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
			LOD	<input type="checkbox"/> <input type="checkbox"/>
			Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
			Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
			Others:	<input type="checkbox"/> <input type="checkbox"/>
PRELIMINARY ADVICE	Date/Time:	Sent By:		
FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost: L/Sum	S\$ 4,000.00	(4 days) Reduction: 46 %	(exclude check items) Email <input type="checkbox"/> Call <input type="checkbox"/>	
FINAL SETTLEMENT	Date/Time:	Confirm with	Email <input type="checkbox"/> Call <input type="checkbox"/>	
Final Liability:	%	(Agreed / Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$			
Loss of Rental (LOR):	S\$	(days)		
Loss of Use (LOU):	S\$	(\$ x days)		
Loss of Income (LOI):	S\$	(\$ x days)		
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/>	[Tick only one]			
GIA/LTA Search	S\$			
Medical:	S\$		1) Claim status: Normal/Reject/Dispute W/P	
Disbursement:	S\$	(e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$		3) Survey fee: \$290	
Total:	S\$	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>	
Payee 1:	S\$	Name 1:		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		

EzLyna (LKKAUTO)

From: Cecilia Chong (LKK Auto)
Sent: Wednesday, 30 November 2022 12:02 PM
To: EzLyna (LKKAUTO)
Subject: Fw: <STANDARD NOTIFICATION LETTER> OUR REF: CC4/AIG21006847/Kga3 ***
ACCIDENT INVOLVING SMD 3342Z & SLZ 1612Z ON 16/06/2021 ***

From: Cecilia Chong (LKK Auto)
Sent: Wednesday, 9 February 2022 4:49 pm
To: SIMONONGENGHOCK@YAHOO.COM.SG <SIMONONGENGHOCK@YAHOO.COM.SG>
Cc: NATAKEONG@YAHOO.COM.SG <NATAKEONG@YAHOO.COM.SG>
Subject: <STANDARD NOTIFICATION LETTER> OUR REF: CC4/AIG21006847/Kga3 *** ACCIDENT INVOLVING SMD 3342Z & SLZ 1612Z ON 16/06/2021 ***



Our Ref: CC4/AIG21006847/Kga3

09 FEBRUARY 2022

SIMON ONG ENG HOCK
DRIVER: CAO XIXI

Dear Sir/Madam,

ACCIDENT INVOLVING SMD 3342Z & SLZ 1612Z ON 16/06/2021

We refer to the above accident. We are the Appointed Surveyor and Loss Adjuster Company by your Motor Insurer (AIG Asia Pacific Insurance Pte Ltd.) to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

This is to inform you that we received a Third Party Claim from **SLZ 1612Z**.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us **within 3 days** from the date of this letter.

PLEASE PROVIDE US A COPY OF VIDEO FOOTAGE.

Please note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

c.c. AIG Asia Pacific Insurance Pte Ltd
(Motor Claims Dept)

Note: We are on work from home arrangement. All correspondence should be made via email. Submission of claim related documents will be in softcopy. Any inconvenience caused is much regretted.

"Wishing You Happiness & Prosperity Chinese New Year 2022"



Best Regards,

Cecilia Chong | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6749-4274 | MAIN: 6256 3561 | EMAIL: CeciliaChong@lkkauto.com | FAX: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

EzLyna (LKKAUTO)

From: Tam, Ivan-WK <Ivan-WK.Tam@aig.com>
Sent: Wednesday, 11 January 2023 11:03 AM
To: Admin A; Mei Kwan (LKKAUTO); CS A Team
Subject: 0113089844SG Accident involving SMD3242Z & SLZ1612Z on 16/6/21 *** LKK REF: CC4/AIG21006847/Kga3

Dear Team,

Doing a file review for the above captioned.

Kindly refer to email sent by Joanne dated 28 November 2022.

If there's no reply by TP WS on this case, please close the file and update me as I have taken over this case from her.

Thank you.

Ivan Tam
AIG

Complex Claims Examiner – Auto Property Damage Claims
AIG Asia Pacific Insurance Pte. Ltd

AIG Building
78 Shenton Way, Level 10
Singapore 079120
Tel +(65) 6419 1959

Ivan-WK.Tam@aig.com | www.aig.sg

Advanced Leave Notification:

If you have received this message outside of your usual work hours, I do not expect that you will read, respond to or action it until appropriate for you.

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