

ASS. REC. BY:

Steve

REF:

CS/AIG: 21208514/ERF3

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

At Workshop m/s

of

Insured:

Policy No.

Claims No.

4651048366SG

Sum Insured:

Excess:

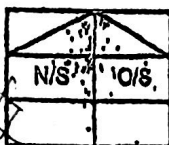
0/-

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

105K

IDAC Accident Report:

Consistent? : Yes or No

SIA / PR Seat:

Consistent? : Yes or No

Est. Repairs:

10 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:

SMW 6487P

Yr Regn:

32/11/20

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

Truck / Trailer or

Make:

Citroen Grand-C4

C.C.

1999

Colour:

White

A/C:

Insured / Std / NI / N

Sp. Reading

4595

T/Radio: Insured / Std / NI / N

Eng/No:

C/No:

VF 73/14 N.5 RKT 762209

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:

205/68R16

R:

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

TOYO / YOKO or \$

Front

Rear

R/Bal.

4

mm

R/Bal.

4

mm

L/Bal.

4

mm

L/Bal.

4

mm

D.O.A.

13/8/21

O.O.I.

13/8/21

Survey held at

Cycle / Car / Van

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

Rear LH

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

Date / Time

Action / Instruction

MV- 105K

16/08/21 @ 3.08pm revert to AIG via Merimen.

16/08/21 @ 4.34pm Lois Chang informed C/A via Merimen.

16/08/21 @ 5.25pm Informed wksp C/A & ex: \$0/- by email.

19/10/21 @ 5.48pm confirmed with Ms Loi final fig \$9961.80, 10 days. (Red \$2420.40, 20%)

Date/Time, File, Rows to A.



: Prel. Report



: Final Report

Date/Time, File Return to?

Days Of Repair:

10

Resurvey No. of Trip:

2

Survey Fee:

Transportation

Add Fee:



: Site Insp (\$

\$ + RS \$



: Interview (\$

Photo



: Tech. Inve (\$

Others



: Weekend (\$

TOTAL

Date/Time, File, Rows to A.

MER-OD

Date/Time, File, Rows to A.

9961.80



CYCLE & CARRIAGE

CYCLE & CARRIAGE FRANCE PTE. LIMITED

PANDAN GARDENS CUSTOMER SERVICE CENTRE


209 Pandan Gardens, Singapore 609339 Tel: (65) 6568 4501 Fax: (65) 6565 1240



CITROËN

QUOTATION

Company Reg No. 200609327M
GST Reg No. MR-8500111-X

Invoice Name & Address				Owner Name & Vehicle Info			
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPARTMENT 78 SHENTON WAY #09-16 AIG BUILDING SINGAPORE 079120 Contact No 6419 1000				Cust No/Name	FCV02063/WONG SHAW PING		
				Reg No/Reg Date	SMW6487P / 30/11/2020		
				Date In/Mileage	/ 0		
				Chassis/Package	VF73AHNSRKJ762009 /#		
				Engine No	10XVAY1500442		
				Make/Model	CIT/GRAND C4 SPACETOURER 1.2 EURO 6.2		
				Colour/Trim	POW POLAR WHITE / 26F TERPA BLEU		
							
Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No	
FAX00001	Credit	13/08/2021/ 14:19		282 / Kevin Leong	16817	0	
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000 REPLACE REAR BUMPER, REAR LH FENDER, REAR LH DOOR & AFFECTED AREA				5 X 500			2500 3000.00
E PNT98000 PAINT WORK ON REAR BUMPER, REAR LH FENDER & REAR LH DOOR				3 X 380			1140.00
E PNT88000 REMOVE & INSTALL REAR PARKING ASSIST FOR FACILITATE REPAIR							80 120.00
E PNT88000 TO TRANSFER REAR LH DOOR ATTACHMENTS TO NEW PANEL							120 150.00
E PNT88000 REMOVE & INSTALL REAR BOOT COMPARTMENT FOR FACILITATE REPAIR				(p hts)			120 150.00
E PNT88000 REMOVE & INSTALL REAR SEAT FOR FACILITATE REPAIR				(p hts)			120 150.00
E PNT88000 REMOVE & REPLACE REAR LH QUATER GLASS							180 200.00
M SUNDRY TO APPLY QUATER GLASS SEALANT							80.00
M SUNDRY TO SUPPLY QUATER GLASS SOLAR FILM							160.00
M SUNDRY TO APPLY BODT SEALANT							80.00
M SUNDRY PERFORM RUST PREVENTION							40 80.00
B WHEELALIGNMENT To Conduct Computerize Full Wheel Alignment							120.00
M SUNDRY TO TRANSFER REAR LH RIM INCLUDING BALANCING							30.00
A 54900099 CHECK WIRING & CHASSIS ELECTRICAL SYSTEM							50 60.00
A 10028901 TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM							225.00
M SUNDRY SUNDRIES							20 30.00
RR QUARTR GLASS LH				X	1.00	168.00 20.00	134.40

Payment should be made strictly by cash, NETS or credit cards. Thank you.
Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required



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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No
FAX00001	Credit	13/08/2021/ 14:19		282 / Kevin Leong	16817	0

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M RR QTR MOULDING LH	1.00	381.00	20.00	304.80
M REAR WING LH	1.00	2057.00	20.00	1645.60
M REAR BUMPER	1.00	1130.00	20.00	904.00
M REAR DOOR LH ASS	1.00	1556.00	20.00	1244.80
M DOOR HINGE LH INF	1.00	86.00	20.00	68.80
M DOOR HINGE LH SUP	1.00	86.00	20.00	68.80
M DOOR STOP	1.00	93.00	20.00	74.40
M REAR DOOR SEAL LH INFERIEUR	1.00	112.00	20.00	89.60
M REAR DOOR SEAL LH	1.00	239.00	20.00	191.20
M DECOR STRIP LH	1.00	200.00	20.00	160.00
M DOOR FIXINGS	1.00	222.00	20.00	177.60
M ALLOY WHEEL 6.5 J16 CH5-47 (Rear LH) - CUT	1.00	593.00	20.00	474.40

Date: _____
 Signature: _____
 Acknowledged by Reparer
 is subject to final approval from Insurance Company
 • Supplementary item(s) must be resurveyed and
 • No illegal modification(s) is allowed
 • Third party survey to on a "Without Prejudice" basis
 • Parts prices are subject to confirmation
 • To display damaged part(s) during resurvey
 • To resurvey before/after spray painting
 the Reparer of the following:
 LKK Auto Consultants hence notify

Guarantee Your Warranty, Maintain with Cycle & Carriage!

Steve (LKK)
 13/8/21, 4.00pm
 OD- M AL
 Excess -?
 10 days
 P/P
 My Bel Ly

Parts	5,538.40		Nett	11,313.40
Labour	5,315.00	7% GST on	11313.40	791.94
Standard Menu	0.00			
Specialist Job	0.00		Total Payable	12,105.34
Diagnostics Job	0.00		Paid	0.00
Sundry/Others	460.00		Total Due	12,105.34
Total(w/o GST)	11,313.40			

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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	13/08/2021 14:20 (SGT)
Date of Accident	13/08/2021 10:30 (SGT)
Exact Location of Accident	Mount Elizabeth Link & Mount Elizabeth, Singapore
Additional Location Information	JUNCTION OF MOUNT ELIZABETH ROAD & MOUNT E LINK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMW6487P
INSURED/POLICY HOLDER	
Is company?	No
Name Of Registered Owner	WONG SHAW PING
NRIC No	SXXXX098J
Email Address	WSP0430@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-81336697
Alternative Phone No	+65-96937376

VEHICLE PARTICULARS

Manufacturer	Citroen
Model	C4 spacetourer
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	1199

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2070160416
Cover Note Number	-

DRIVER

Name of Driver	TAN BOON LEONG
NRIC No	SXXXX438J

Date Of Birth	06/04/1977
Occupation	Indoor
Date Of Driving Pass	25/01/1995
Driving experience	26 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96937376
Alt. Phone Number	-
Email Address	BOON5332@YAHOO.COM.SG
Address	102 YUK TONG AVENUE
Address complement	-
Postcode	596409
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Head to Rear
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	TAN YI XUN
Gender	Male

PASSENGER 2

Name	TAN SHAO QI
Gender	Male

PASSENGER 3

Name	TAN YI ZU
Gender	Male

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

REFER TO ATTACHMENT
COLLISION-HEAD TO SIDE

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GZ2128H
Vehicle Manufacturer	Mitsubishi
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Commercial vehicle
Name of Driver	CHAN AK KONG
Contact Number	(Phone) +65-92349936
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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1. Please report correctly the details of the accident to speed up the claims process.
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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

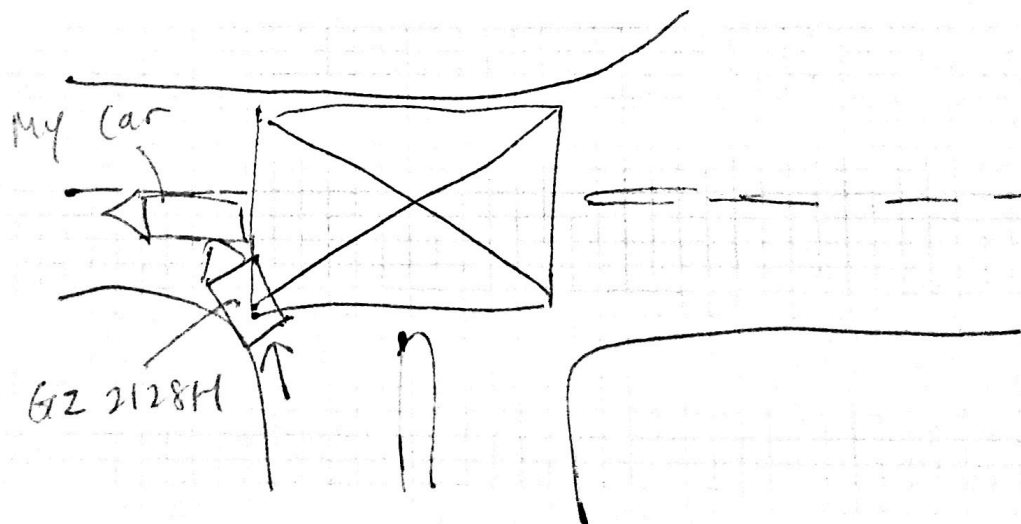
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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

On 13 Aug 2021, I was travelling along Mount Elizabeth Road, in the direction towards Orchard Road. After passing the junction of Mount Elizabeth Link, I felt a huge impact on the left side of the car and I saw a van coming out from the junction without seeing my car. My rear left section of the car is badly damaged.

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

Witnessed by Reporting Centre Personnel

CITROEN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : WONG SHAW PING
Period of Insurance : 30 Nov 2020 To 29 Nov 2021
Engine No. : 10XVAY1500442
Chassis No. : VF73AHNSRKJ762009

Vehicle No. : SMW6487P
Policy No. : 2070160416
Endorsement No. :
Issued Date : 11 Dec 2020

ABOUT THE COVER

Make/Model : CITROEN Grand C4 SpaceTourer
Engine Capacity/Tonnage : 1,199.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2020
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)

WONG SHAW PING - \$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: 20 Leng Kee Rd Singapore 159094 64708600

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: United Overseas Bank Limited

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).

0502847633
CYCLE & CARRIAGE - JESSIE

239 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.