

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 (C) TP / NS / PR / RR / OD / RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop no: _____
 Insured: _____
 Policy No. 2070035429
 Claims No. 2645774240SG
 Sum Insured: _____ Excise: \$600.00
 (Client's Record)
 Make of Veh: _____

Veh No: SMS8413K Yr Regn: 17/3/20
 Type: (M) Car / M. Cycle / Bus / Van / Lorry / Truck / Prime Mover /
 Truck / Trailer or _____
 Make: Citroen CS
 Colour: Grey A/C: Insured / St / NI / N
 Sp. Reading: 50478 Y/R. No: Insured / St / NI / N
 Eng. No: _____
 Ch. No: VRJA45GFRK L095839
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Order / Jammed / Locked / Burnt or
 Brake: Order / Jammed / Locked / Burnt or
 Mod: III / S / R / M / STD A / R / M or
 Tyre Size: P1 235/60R17
 RI _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Falken
 Front R/Wal: 5 mm Rear R/Wal: 5 mm
 U/Wal: 5 mm U/Wal: 5 mm
 D.O.A. 26/11/21 Cycle & Carriage
 Survey hold at _____
 Dist. of Damages: FR / Rear / O/S / H/S / VIC / Roof/Top of
 The W/O / CHASSIS frame / Body structure affected due to collision

(Policy Condition)
 Remarks: The veh had commenced its
 repair at the time of inspection.
 Date of Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 SIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repair: _____ days Res.: Yes or No
 Cum Sum: _____ % 3 Vol.: Yes or No
 GA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT



Date / Time: _____ Action / Instruction
MV-120K
 confirm \$8660.20, before gst and excess \$600
 RED: 2124.80; 19%

date/Time, Fds. Received: Prel. Report
 Final Report

Days of Repair: 6
 Resurvey No. of Trips: _____

Add Fee: Site Insp (\$ _____)
 Interview (\$ _____)
 Tech. Inve (\$ _____)
 Workshop (\$ _____)

Survey Fee	_____
Transportation	_____
8.9.25.21	_____
Fuel	_____
Other	_____
TOTAL	_____

date/Time, Fds. Returned: _____
 date/Time, Fds. Retained: _____

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 /Mr LOH WAI KIT (LUO WEIJIE) Reg No/Reg Date SMS8413K / 17/03/2020 Date In/Mileage 29/11/2021/ 0 Chassis/Package VR7A45GFRKL095839 /# Engine No 10FKBA2585408 Make/Model CIT/C5 AIRCROSS 1.6 PURETECH 180 S&S EAT Colour/Trim MOF CUMULUS GREY/WH/ OXF CUIR CLAUDIA/TI



Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No
FAX00001	Credit	27/11/2021/ 10:35	BLK	282 / Kevin Leong	17184	0

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
E PNT88000 REPLACE FRT BUMPER & AFFECTED AREA 500 x 1				500 1000.00
E PNT98000 PAINT WORK ON FRT BUMPER PANEL 380 x 1				380.00 ✓
M SUNDRY TO APPLY SEALANT ON AFFECTED AREA				? 50.00
A 54900099 CHECK WIRING & CHASSIS ELECTRICAL SYSTEM				50.00 ✓
A 10028901 TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM				225.00 ✓
M SUNDRY TO SUPPLY FRT NUMBER PLATE WITH FRAME CUT				50.00 ✓
M SUNDRY SUNDRIES				20 50.00
M FRONT BUMPER ✓ DR	1.00	1502.00	20.00	1201.60
M FRT SKIRT-PANEL ✓ BR	1.00	829.00	20.00	663.20
M FR BMPR GRILLE ?	1.00	993.00	20.00	794.40
M BRACKET SET ?	1.00	109.00	20.00	87.20
M FINISHER BUMPER ?	1.00	93.00	20.00	74.40
M FR BMPR GRILLE CENT ?	1.00	132.00	20.00	105.60
M FR BMPR GRILLE LAT ?	1.00	148.00	20.00	118.40
M FINISHER BUMPER LAT ✓ CUT	1.00	224.00	20.00	179.20
M FINISHER BUMPER ?	1.00	116.00	20.00	92.80
M FR BMPR GRILLE INF ?	1.00	231.00	20.00	184.80
M BUMPER ABSORBER ?	1.00	156.00	20.00	124.80
M REAR DUCT ?	1.00	167.00	20.00	133.60
M BUMPER BRACKET ?	1.00	342.00	20.00	273.60
M BUMPER ABSORBER ?	1.00	370.00	20.00	296.00
M BUMPER ABSORBER ?	1.00	499.00	20.00	399.20
M FIXING STUD ✓ NEC	1.00	36.00	20.00	28.80
M FACE CROSSMEMBR SUP ✓ DR (Top panel garnish)	1.00	201.00	20.00	160.80
M FACE CROSSMEMBR INF ASS ?	1.00	80.00	20.00	64.00
M AIR BULKHEAD RH ?	1.00	138.00	20.00	110.40

Payment should be made strictly by NETS, credit cards or PayNow (via QR code or UEN) only. Thank you.
 Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.



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



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

QUOTATION

Table with 2 main columns: Invoice Name & Address, Owner Name & Vehicle Info. Includes details for AIG Asia Pacific Insurance Pte. Ltd. and vehicle information for Mr. LOH WAI KIT (LUO WEIJIE).

Summary table with columns: Account No, Terms, Date/Time Printed, CSE, Operator, WIP No, Invoice/Credit Note No. Values include FAX00001, Credit, 27/11/2021/ 10:35, BLK, 282 / Kevin Leong, 17184, 0.

Main items table with columns: Description of Goods / Services, Qty, Unit Price, Disc%, Amount. Lists items like FRONT LIGHT RH, HDLIGHT SUPPORT RH, etc.

Handwritten notes: Steve (LKK) 29/11/21, 12.00; OD- MM AL EXCESS - ? P/P My BL by 3 days

LYC Auto Consultants hence notify the 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 item(s) must be resurveyed and is subject to final approval from Insurance Company
Acknowledged by Repairer
Signature:
Date:

Guarantee Your Warranty, Maintain with Cycle & Carriage!

Summary table with columns: Parts, Labour, Standard Menu, Specialist Job, Diagnostics Job, Sundry/Others, Total (w/o GST), 7% GST on, Net, Total Payable, Paid, Total Due. Values include 6,656.80, 1,655.00, 0.00, 0.00, 0.00, 150.00, 8,461.80, 7% GST on, 8461.80, 9,054.13, 0.00, 9,054.13.

Payment should be made strictly by NETS, credit cards or PayNow (via QR code or UEN) only. Thank you. Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.

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	26/11/2021 16:00 (SGT)
Date of Accident	26/11/2021 11:30 (SGT)
Exact Location of Accident	Tiong Poh Rd, Singapore
Additional Location Information	TIONG POH RD CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMS8413K

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LOH WAI KIT (LUO WEIJIE)
NRIC No	SXXXX605E
Email Address	JEFFREY.LOHWK@GMAIL.COM
Mobile Phone No	(Phone) +65-97601655
Alternative Phone No	+65-97601655

VEHICLE PARTICULARS

Manufacturer	Citroen
Model	C5
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	1500

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2070035429
Cover Note Number	-

DRIVER

Name of Driver	LOH WAI KIT (LUO WEIJIE)
NRIC No	SXXXX605E

Date Of Birth	18/06/1974
Occupation	Indoor
Date Of Driving Pass	17/08/1996
Driving experience	25 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97601655
Alt. Phone Number	+65-97601655
Email Address	JEFFREY.LOHWK@GMAIL.COM
Address	420D NORTHSHORE DRIVE #15-649
Address complement	-
Postcode	824420
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	Collided into Property
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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

ATTACHMENT(S)

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

SKETCH PLAN

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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.
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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;

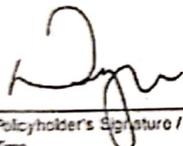
(iv) administering my claims (including the making of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages), and/or

(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

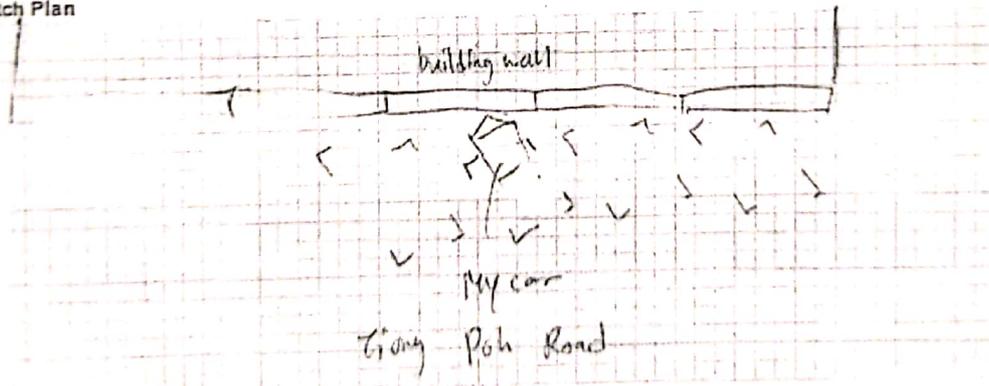
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



SKETCH PLAN

IMPORTANT NOTICE

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(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

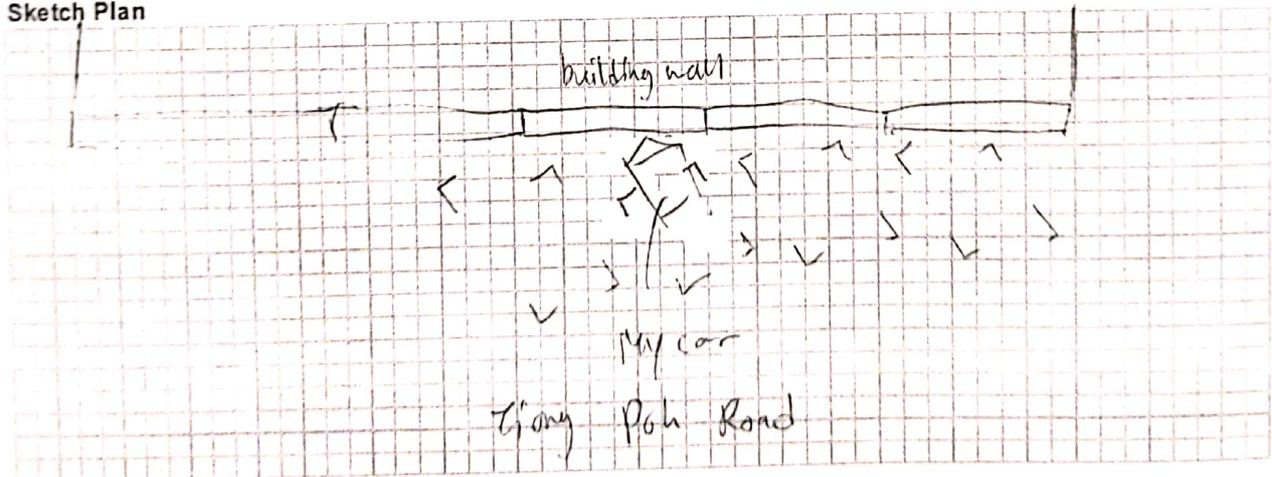
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

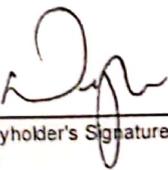


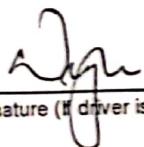
Describe Circumstances of the Accident

Partly with head in, accidentally put on gas instead of Brake.

Declaration

We declare the foregoing particulars are true in every respect.

 26/11/21
Policyholder's Signature / Date & Time

 26/11/21
Driver's Signature (If driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel

CITROEN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : LOH WAI KIT (LUO WEIJIE)
Period of Insurance : 17 Mar 2020 To 16 Mar 2022
Engine No. : 10FKBA2585408
Chassis No. : VR7A45GFRKL095839

Vehicle No. : SMS8413K
Policy No. : 2070035429
Endorsement No. : 00000000335662
Issued Date : 23 Mar 2020

ABOUT THE COVER

Make/Model : CITROEN C5 Aircross 1.6
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2020
Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

- 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

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 - \$800

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

LOH WAI KIT (LUO WEIJIE) - \$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: HL Bank