

ASS. REC. BY: Steve

REF: CS/A1671212552/EVF3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / 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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SMN5700C Yr Regn: 19/8/19

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 / NA

Sp. Reading: 27191 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: GF7W0601876

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm or

Tyre Size: F: 225/55R18

R: 11

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

TOYO / YOKO or

Toyo

Front

Rear

R/Bal. 5 mm

R/Bal. 5 mm

L/Bal. 5 mm

L/Bal. 5 mm

D.O.A. 10/12/21

D.O.I. 14/12/21

Survey held at Cycle & Carriage

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-98K

Date/Time, File Pass to?

☐ : Prell. Report
☐ : Final Report

1)

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.B.I: (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)
☐ : Interview (\$ _____)
☐ : Tech. Invs (\$ _____)
☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS. \$ _____

Photos

Others

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	/LAM SZE JIA (LAN SIJIA)
	Reg No/Reg Date	SMN5700C / 19/08/201
	Date In/Mileage	14/12/2021/ 0
	Chassis No	GF7W0601876
	Engine No	4J11BH4181
	Make/Model	MIT/19MY OUTLANDER 2.0 STYLE(994)
	Colour/Trim	D01 COSMIC BLUE MET/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
KAX00008	Credit	13/12/2021/ 11:23	BLK	282 / Kevin Leong	18622		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000							450 900.00
REPLACE FRT BUMPER PANEL, REINFORCEMENT & AFFECTED AREA				450			
E PNT98000							350.00
PAINT WORK ON FRT BUMPER PANEL				350			
E PNT88000							80 120.00
REMOVE & INSTALL FRT PARKING ASSISST FOR FACILITATE REPAIR							
M SUNDRY							1 40.00
PERFORM RUST PREVENTION							
A 54900099							30.00
CHECK WIRING & CHASSIS ELECTRICAL SYSTEM							
A 10028901							120.00
TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM							
M SUNDRY							50.00
TO SUPPLY FRONT NUMBER PLATE WITH FRAME				cut			
M SUNDRY							20 50.00
SUNDRIES							
M LAMP ASSY,FOG,FR RH				1.00	348.00	23.00	267.96
M GARNISH,FR BUMPER,RH				1.00	48.00	23.00	36.96
M BRACKET,FR BUMPER SIDE,RH				1.00	18.00	23.00	13.86
M GARNISH,FR BUMPER SIDE				1.00	220.00	23.00	169.40
M GARNISH,FR BUMPER SIDE				1.00	112.00	23.00	86.24
M MOULDING,FR BUMPER,RH				1.00	116.00	23.00	89.32
M FACE,FR BUMPER				1.00	851.00	23.00	655.27
M COVER,FR BUMPER				1.00	361.00	23.00	277.97
M GARNISH,FR BUMPER SIDE				1.00	48.00	23.00	36.96
M RIVET,FR BUMPER				10.00	5.00	23.00	38.50
M TANK,WINDSHIELD WASHER				1.00	87.00	23.00	66.99
M SENSOR,W/SHLD WASHER TANK				1.00	114.00	23.00	87.78
M EXTENSION,FR BUMPER				1.00	517.00	23.00	398.09
M BODY KIT, OUTLANDER				1.00	1554.00	20.00	1243.20
M REINFORCEMENT,FR BUMPER				1.00	493.00	23.00	379.61
M BAR,FR BUMPER GUARD				1.00	130.00	23.00	100.10
M REINFORCEMENT,FR BMPR SIDE				1.00	22.00	23.00	16.94

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



MITSUBISHI
MOTORS

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 AIG BUILDING SINGAPORE 079120 Contact No 6419 1892	Cust No/Name	/LAM SZE JIA (LAN SIJIA)
	Reg No/Reg Date	SMN5700C / 19/08/201
	Date In/Mileage	14/12/2021/ 0
	Chassis No	GF7W0601876
	Engine No	4J11BH4181
	Make/Model	MIT/19MY OUTLANDER 2.0 STYLE(994)
	Colour/Trim	D01 COSMIC BLUE MET/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
KAX00008	Credit	13/12/2021/ 11:23	BLK	282 / Kevin Leong	18622			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
M REINF,FR BUMPER SIDE,LH					1.00	60.00	23.00	46.20
M REINF,FR BUMPER SIDE,RH					1.00	69.00	23.00	53.13
P GRILLE ASSY,RADIATOR					1.00	550.00	23.00	423.50

Estimate

Steve (LKK)
 14/12/21, 11:30p

00-MAL
 EXCISE?
 PFF
 by BEL sy
 3 djs

LKK 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

Confirm & accepted by

Acknowledged by Repairer

Signature:

Date:

	Nett	6,147.98
7% GST on	6147.98	430.36
Total Payable		6,578.34

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.



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	11/12/2021 12:31 (SGT)
Date of Accident	10/12/2021 10:50 (SGT)
Exact Location of Accident	ECP, Singapore
Additional Location Information	Towards Changi
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMN5700C

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LAM SZE JIA (LAN SIJIA)
NRIC No	SXXXX946H
Email Address	LSZEJIA@GMAIL.COM
Mobile Phone No	(Phone) +65-84281427
Alternative Phone No	(Home) +65-84281427

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900150108-01
Cover Note Number	-

DRIVER

Name of Driver	LAM SZE JIA (LAN SIJIA)
NRIC No	SXXXX946H



Accident report SC0N21CB0001

Date Of Birth	06/02/1987
Occupation	Indoor
Date Of Driving Pass	11/05/2006
Driving experience	15 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-84281427
Alt. Phone Number	(Home) +65-84281427
Email Address	LSZEJIA@GMAIL.COM
Address	8 Bedok Rise #07-26 Singapore
Address complement	-
Postcode	469600
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 - Head to Rear
Weather Conditions	Raining
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)	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 THE ATTACHMENT

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	SMH9095X
Vehicle Manufacturer	Audi
Vehicle Model	A3
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	KELLYN KEAY
NRIC No	-1
Contact Number	(Phone) +65-96162723
Address	-

Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

SKETCH PLAN

IMPORTANT NOTICE

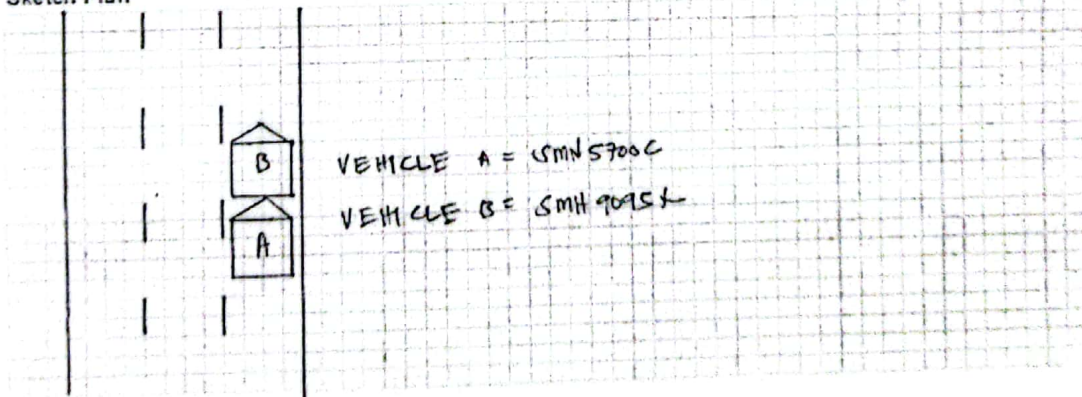
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to reputate 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

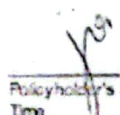


Describe Circumstances of the Accident

While driving on ECP (towards Changi Airport) on 10 December 2021 around 1040pm, I drove into the back of the white Audi SUV 90958, near Exit 14. The car in front of the Audi jam braked, resulting in the Audi braking suddenly and I followed behind. Did not managed to come to a complete stop in time and hit the white Audi. No other impact. It was raining and the road was slippery at time of accident.

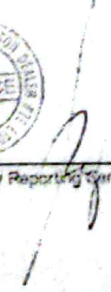
Declaration

(We declare the foregoing particulars are true in every respect.

 11/12/2021 1145H
Policyholder's Signature / Date & Time

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




Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Lam See Jia (Lan Sija)
 Period of Insurance : 19 Aug 2021 To 18 Aug 2022
 Engine No. : 4J11BH4181
 Chassis No. : GF7WC801876

Vehicle No. : SMN5700C
 Policy No. : 1000150108-01
 Endorsement No. :
 Issued Date : 23 Jul 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 : 2019
 Insuring with COE/PAF : 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 "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 25 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

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 - 1500cc

* Limitations modified inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 169), Section 55 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2018, are not to be included under these headings.

EXCESS

Section 1
 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Lam See Jia (Lan Sija) - \$800 (Own Damage), \$800 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 600330 65664201
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 159054 64708888
4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575723 69320000

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. 169), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2018 and Motor Vehicles (Third-Party Risks) Rules, 1989 (Malaysia).

0504623050
 FULCOMCP2 - CORPORATE

22 UBI ROAD 4 FULCOO BUILDING
 SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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

50171A

AIG Asia Pacific Insurance Pte. Ltd.

1000150108-01