

Steve

AIG

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. 1800041040

Claims No. 7972905383SG

Sum Insured: _____ Excess: 300

(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 Report: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

 Veh No: SL23378L Yr Reg: 18/4/18
 Type: ☒ M. Car / ☐ M. Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /
☐ Truck / ☐ Trailer or

Make: Mitsubishi Attrage c.c. 1198

Colour: White A/C: Insured / Std / Nil / NA

Sp. Reading: 56859 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: MMBSTA13AJH 001872

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/55R15

R: 1

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. 23/3/22 Cycle & Carriage P.O.I. 24/3/22

Survey held at

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

Front RH

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

Date / Time	Action / Instruction
	MV-53K
12/4/22	Final fig \$5440.24 confirmed by email (red 1497.76, 21%)

Date/Time, File Pass to?

☐ : Preli. Report☐ : Final Report

Date/Time, File Return to?

3) 13/4/22-typist

Report Form: Merimen

Lump Sum / U.C. : \$5440.24

Days Of Repair: 4

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

\$ + RG. \$

Photos

Others

TOTAL

ESTIMATE

Co Reg No : 197701469G

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Leong Kin Yip (Liang Jianye) Blk 183B Boon Lay Avenue #12-718 Singapore 642183 Contact No Mobile: 94307215	Cust No/Name /Leong Kin Yip (Liang Jianye) Reg No/Reg Date SLZ3378L / 18/04/201 Date In/Mileage / 0 Chassis No MMBSTA13AJH001872 Engine No 3A92UGS5752 Make/Model MIT/18MY ATTRAGE 1.2 CVT Colour/Trim W05 WHITE PEARL / BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00041	Cash	24/03/2022/ 10:25	BLC	442 / CocoLu	21851
Description of Goods / Services		Qty	Unit Price	Disc%	Amount
E PNT88000	RENEW FRT AIRDAM, FRT BUMPER, FRT FENDER RH, REPAIR BONNET	1.5			1350.00
E PNT98000	SPRAY PAINT FOR FRT BUMPER, AIRDAM, FRT FENDER RH, BONNET	450 X 1.5			1400.00
E PNT88000	REMOVE & INSTALL FRT AIRDAM	4 X 350			100.00
A 54900099	CHECK WIRING & ELECTRICAL SYSTEM				30.00
A 10028901	TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM				120.00
B WHEELALIGNMENT120L	To Conduct Computerize Full Wheel Alignment				120.00
M SUNDRY	Sundry				20.00
M UNPAINTED BODYKITS		1.00	1643.00	00.00	1643.00
M FACE,FR BUMPER		1.00	706.00	00.00	706.00
M BRACKET,FR BUMPER,RH		1.00	13.00	00.00	13.00
M AIR DAM,SIDE,FR RH		1.00	18.00	00.00	18.00
M GARNISH,FR BUMPER,RH		1.00	127.00	00.00	127.00
M HEADLAMP ASSY,RH		1.00	663.00	00.00	663.00
M FENDER,FR RH		1.00	500.00	00.00	500.00
M SHIELD,FR WHEELHOUSE,RH		1.00	98.00	00.00	98.00
Steve (LKK) 24/3/22, 1.30pm DD-M AG EXCII-7 PIP M BL 1 4 dy					
Confirm & accepted by 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 Authorized signatory and company stamp					
7% GST on Nett 6908.00 Total Payable					6,908.00 483.56 7,391.56

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	24/03/2022 11:18 (SGT)
Date of Accident	23/03/2022 14:09 (SGT)
Exact Location of Accident	201 Bukit Batok Street 23, Singapore
Additional Location Information	201G BUKIT BATOK ST 23
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ3378L

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEONG KIN YIP (LIANG JIANYE)
NRIC No	SXXXX081J
Email Address	KOH.CAILING@GMAIL.COM
Mobile Phone No	(Phone) +65-94307215
Alternative Phone No	+65-96912509

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Attrage
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	1193

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800041040-02
Cover Note Number	-

DRIVER

Name of Driver	KOH CAILING
NRIC No	SXXXX978E

Birth
 Date of Driving Pass
 Driving experience
 Gender
 Mobile Number
 Alt. Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

07/06/1985
 Indoor
 09/11/2012
 9 YEARS AND 4 MONTHS
 Female
 (Phone) +65-96912509
 -
 KOH.CAILING@GMAIL.COM
 BLK 183B BOON LAY AVENUE #12-726
 -
 642183
 No
 Spouse
 No
 -
 -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Collision - Head to Rear
 Raining
 Wet

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 LIM GEOK CHIEW
 Gender Female

PASSENGER 2

Name LEONG XINYI
 Gender Female

PASSENGER 3

Name JING XUAN
 Gender Female

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

Registration Number	GBF8007Z
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Commercial vehicle
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)	-

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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

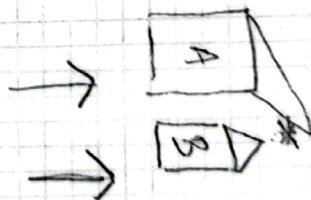
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

On 22nd March 2022, at around 2:00pm, I wanted to reverse into a parking lot on my left.
Upon checking the side mirror, there was no vehicle. I turned on the hazard light and moved to my right slightly in order to reverse into the desired parking lot.
Vehicle 6 came from behind me and hit the right headlight area of my vehicle.

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

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : LEONG KIN YIP (LIANG JIANYE)
Period of Insurance : 18 Apr 2021 To 17 Apr 2022
Engine No. : 3A92UGS5752
Chassis No. : MMBSTA13AJH001872

Vehicle No. : SLZ3378L
Policy No. : 1800041040-02
Endorsement No. :
Issued Date : 01 Mar 2021

ABOUT THE COVER

Make/Model : MITSUBISHI ATTRAGE 1.2 CVT
Engine Capacity/Tonnage : 1,193.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :

Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
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.

Mileage Condition : Unlimited Mileage

Age Condition : 30 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 - \$600

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

LEONG KIN YIP (LIANG JIANYE) - \$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: 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 159094 64708688
4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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

I/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).

0504620212
 C&CMICP2 - WW

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.