

(08/11/13) Wef

ASS. REC. BY:

REF: CS/CT124090479/Ruh3

0980

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SM2 T788Z

at Workshop m/s

of

Insured: GBC 1388K CTI

Policy No.

Claims No. SNM24D205385

Sum Insured: _____

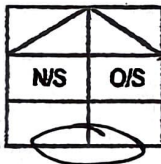
Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



BaL or Market Value: _____

IDAC Accident Rpt: _____

GIA / PR Seen: _____

Est. Repairs: _____

days

Res.: Yes or No

Lum Sum: _____

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: SM2 T788Z

Yr Regn: 2024 APR

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

Truck / Trailer or

Make: PORSCHE CAYENNE II

c.c. 2995

Colour: GREY

AC: Insured / Std / NI / NA

Sp. Reading: 226

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WP122294ZDA03046

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / SRim / STD A/Rim or

Tyre Size: F: 315/402R21

R: _____

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

TOYO / YOKO or

Front

Rear

R/Bal. 7 mm

R/Bal. 7 mm

L/Bal. 7 mm

L/Bal. 7 mm

D.O.A. 23/01/24

D.O.I. 27/09/24

Survey held at TANGKUH P

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

REPAIR LIMIT - 367K

8/11/24 Rasul confirmed final fig \$9396 (Red 10,612.20, 53%)

Date/Time, File Pass to?

☐ : Prel. Report
☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)

) S+RS \$ _____

☐ : Interview (\$ _____)

) Photos _____

☐ : Tech. Invs (\$ _____)

) Others _____

☐ : Weekend (\$ _____)

) _____

TOTAL

Report Format: _____

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

Name & Address:

Motor Claims Department

CHINA TAIPING INSURANCE P/L

3 ANSON ROAD

#16-00 SPRINGLEAF TOWER

SINGAPORE 079909

Email/Fax No:

Contact No:

Type of Claim:

THIRD PARTY

YEAR MODEL:

02/04/2024

Vehicle No:

SMZ7788Z

Brand & Model:

Cayenne

Chassis/VIN No:

WP1ZZZ9YZRDA03046

WIP#:

12644

Date:

25-Sep-24

Franchise:

PORSCHE

Contact Person (Eurokars):

FAIZ

Contact No (Eurokars):

6331 0680

PARTS / MATERIAL CHARGES							MARK = Survey Marking [Key "A" if item is approved]
NO	DESCRIPTION	PART NO.	QTY	MARK	REVISED	PRICE	
1	REAR BUMPER RH <i>repl</i>	P9Y0-807-418- -G2X	1		-	\$ 2,594.60	
2	REAR BUMPER LOWER SPOILER <i>sea</i>	P9Y0-807-543-H -OK1	1		-	\$ 1,615.50	
3	REAR BUMPER LOWER TRIM <i>sea</i>	P9Y0-807-834-AL-OK1	1		-	\$ 1,143.00	
4	EXHAUST TRIM LH <i>re</i>	P9Y0-807-837-A -OK1	1		-	\$ 183.70	
5	EXHAUST TRIM RH <i>re</i>	P9Y0-807-838-A -OK1	1		-	\$ 183.70	
6	SUPPORT SHIELD LH <i>re</i> <i>photo</i>	P9Y0-825-715- -	1		-	\$ 69.10	
7	SUPPORT SHIELD RH <i>re</i> <i>photo</i>	P9Y0-825-716- -	1		-	\$ 69.10	
8	REAR BUMPER SOUND ABSORBER RH <i>X</i>	P9Y0-807-248- -	1		-	\$ 114.20	
9	SPOILER SOUND ABSORBER LH <i>re</i> <i>photo</i>	P9Y0-807-573- -	1		-	\$ 71.60	
10	SPOILER SOUND ABSORBER RH <i>re</i> <i>photo</i>	P9Y0-807-574- -	1		-	\$ 71.60	
11	SENSOR GASKET <i>re</i>	P5Q0-919-133- -9B9	4		-	\$ 15.60	
12	CLAMP <i>m</i>	P9Y0-423-337- -	4		-	\$ 23.20	
13	EXPANSION RIVET <i>m</i>	PPAF-038-549- -	4		-	\$ 3.20	
14	BLIND RIVET <i>m</i>	PN -908-550-01-	8		-	\$ 18.40	
15	EXPANDER NUT <i>m</i>	PWHT-004-935- -	4		-	\$ 8.00	
16	REAR BUMPER CENTER BRACKET <i>?</i>	P9Y0-807-863-A -	1		-	\$ 214.50	
17	REAR BUMPER RETAINER RH <i>X</i>	P9Y0-807-406-E -	1		-	\$ 104.70	
18	REAR BUMPER BRACKET RH <i>?</i>	P9Y0-807-376-A -	1		-	\$ 150.10	
19	EXPANDER NUT <i>?</i>	PN -106-213-01-	9		-	\$ 24.30	
20	REAR BUMPER REINFORCEMENT <i>?</i>	P9Y0-807-309-D -	1		-	\$ 1,646.80	
21	CROSS MEMBER FOR REINFORCEMENT <i>?</i>	P9Y0-807-235-A -	1		-	\$ 145.10	
22	GASKET LH REINFORCEMENT <i>?</i>	P9Y0-807-669- -	1		-	\$ 15.40	
23	GASKET RH REINFORCEMENT <i>?</i>	P9Y0-807-670- -	1		-	\$ 15.40	
24	COVER LOWER END <i>X</i>	P9Y0-807-587-A -	1		-	\$ 279.10	
25	LOGO CAYENNE <i>m</i>	P9Y0-853-670- -LI0	1		-	\$ 450.90	
26	TAIL PIPE RH <i>sea</i>	P9Y0-253-824- -	1		-	\$ 929.40	
27	TRIM PANEL FOR CAMERA REAR <i>?</i>	P9Y0-807-644-B -OK1	1		-	\$ 168.00	

Sub-Total (Parts Price) \$ - \$ 10,328.20

LABOUR / SERVICES CHARGES			
NO	DESCRIPTION	REVISED	PRICE
1	TO REMOVE /REPLACE REAR BUMPER RH, REAR BUMPER LOWER SPOILER & TRIM, REINFORCEMENT & ALL ACCIDENT DAMAGED BODY PARTS. TO REPAIR TAILGATE & ALL AREAS AFFECTED BY THE ACCIDENT.	1720	\$ 5,160.00

REPAIR ESTIMATE

2	TO RESPRAY REAR BUMPER RH, TAILGATE	1800	\$ 2,800.00
3	TO CARRY-OUT BODY CAVITY PRESERVATION.	X	\$ 250.00
4	TO SUPPLY REAR LICENCE PLATE WITH CASING	nett	\$ X 70.00
5	TO TRANSFER THE REVERSE SENSORS.	nett	\$ 250 500.00
6	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.	150	\$ 250.00
7	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.	nett	\$ 600.00
8	SUNDRIES.	nett	\$ 20 50.00

Survey Date & Time: 27/09/24	Repair Days: 4 days	Excess:
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Surveyor Remarks:

*Pass
Res after repair*

Remarks:

- This is only an estimate based on visual inspection. Should there be more damages found during repair, it will be informed and quoted additionally.
- An administrative fee of 20% of the quotation value will be chargeable for damage assessment and preparation of this estimate, if you choose not to proceed with repair.

Sub-Total (Labour Price) \$ - \$ 9,680.00

	REVISED	PRICE
Parts Price	\$ -	\$ 10,328.20
Labour Price	\$ -	\$ 9,680.00
Total (Initial Estimate)	\$ -	\$ 20,008.20
Supp 1	\$ -	\$ -
Supp 2	\$ -	\$ -
Supp 3	\$ -	\$ -
Total (Before Excess)	\$ -	\$ 20,008.20
Less Excess	\$ -	\$ -
TOTAL (After Excess)	\$ -	\$ 20,008.20
GST 9%	\$ -	\$ 1,800.74
GRAND TOTAL	\$ -	\$ 21,808.94

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

Acknowledged by Repairer

Signature:

Date:

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 Actual 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 First Submission	23/09/2024 17:50 (SGT)
Reported by	Owner
Date of Accident	23/09/2024 11:48 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	HOLLAND ROAD NEAR TRAFFIC LIGHT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ7788Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TYE BENG KWANG
NRIC No	SXXXX098D
Email Address	THOMASTYE88@GMAIL.COM
Mobile Phone No	(Phone) +65-90618361
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Porsche
Model	Cayenne
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2995
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	-

DRIVER

Name of Driver	CHRISTINA WONG CHAN CHAN
NRIC No	SXXXX434E
Date Of Birth	29/03/1972
Occupation	Indoor
Driving Pass Date	07/05/2003
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	21 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90618361
Alt. Phone Number	-
Email Address	THOMASTYE88@GMAIL.COM
Address	83C NAMLY DRIVE
Address complement	-
Postcode	267488
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

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 SKETCH PLAN.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBC1388K
Vehicle Manufacturer	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Goods vehicle
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.
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. 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

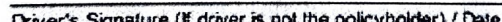
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

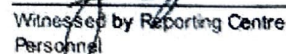
(collectively the "Purposes")

(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

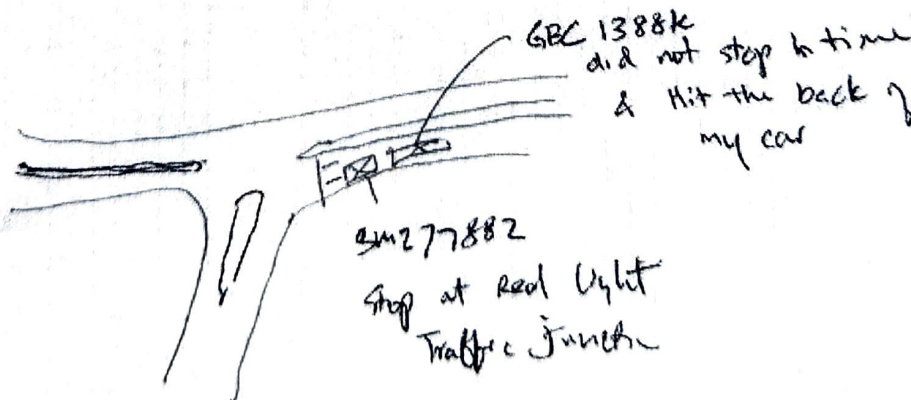
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date &
Time


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


Witnessed by Reporting Centre
Personnel

Sketch Plan



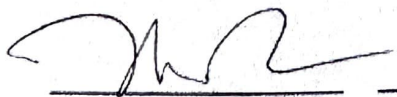
Describe Circumstances of the Accident

on 23/Sept 2024

At 11.48am, my car driven by my wife, Ms Christine Wong SC
stop at traffic light along Holland Road. Yellow van ABC 1388K
could not stop at traffic junction along Holland Road & hit my
car.

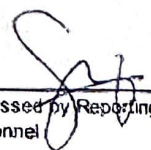
Declaration

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

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	098D
Vehicle Details	
Vehicle No.:	SMZ7788Z
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Sep 2024
Vehicle Make:	PORSCHE
Vehicle Model:	CAYENNE II (9YA)
Primary Colour:	Silver
Manufacturing Year:	2023
Engine No.:	DCB963665
Chassis No.:	WP1ZZZ9YZRDA03046
Maximum Power Output:	260.0 kW (348 bhp)
Open Market Value:	\$88,369.00
Original Registration Date:	02 Apr 2024
First Registration Date:	02 Apr 2024
Transfer Count:	0
Actual ARF Paid:	\$162,781.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 Apr 2034
PARF Rebate Amount:	\$60,000.00
Intended COE Rebate Details	
COE Expiry Date:	01 Apr 2034
COE Category:	B - Car-Details at OneMotoring
COE Period(Years):	10
QP Paid:	\$85,010.00
COE Rebate Amount:	\$80,828.00
Total Rebate Amount:	\$140,828.00
Message	
You will not be eligible for any COE rebate from the current COE (including unused COE from any lay-up period/s), if you renew your COE.	

The information contained herein is correct as at 29 Sep 2024

OK



Porsche Cayenne 3.0A Platinum Edition

\$469,800 Instalment \$3,938/mth

PREMIUM AD

Apply for 2.48% loan

Shortlist

Loan Calculator



Overview Financial Photo Research

Depreciation	\$46,860 / year
Reg. Date	27-Jun-2023 (8yrs 8mths 28days COE left)
Manufactured	2023
Mileage	9,600 km (7.6k / year)
Transmission	Auto
Engine Cap	2,995 cc
Road Tax	\$2,380 / year
Power	250.0 kW (335 bhp) View specs of the Porsche Cayenne (2018)
Curb Weight	2,060 kg
COE	\$95,856