

REF:

ASSIGNMENT

From: _____ Date: _____

Estimate No: _____

OD / ~~TP~~ RES / OD RES / EVA / INV / MVTo in ~~Vehicle~~ No: _____at ~~Work~~ / ~~Shop~~ / ~~Home~~ / ~~Other~~ _____

of _____

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Vehicle: _____

(Policy Condition)

Remarks: Vehicle had commenced its repair at the time of inspection.

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent?: Yes or No

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

Est. Repair: _____ 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: SLJ136Y Yr Regn: 2016, Oct.Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Audi A4 C.O. 1395Colour: Grey A/C: Insured / Std / NI / NASp. Reading: 91695 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WAUZZZF49HA026658Gen. 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: 225/50R17R: 225/50R17

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

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 22/10/24Survey held at Premium

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

Front n/s, Rear

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

Date / Time	Action / Instruction
	<u>OD A16 (Total Loss)</u>
	<u>COE Expiry</u>
	<u>Estimate given during : Yes ()</u>
	<u>1st Survey : No ()</u>
	<u>MV : 41K</u>
	<u>PV : 27.6K</u>
	<u>Nett. 16.4K</u>

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

1) _____
Date/Time, File Return to?☐ : Final Report

Transportation: _____

2) _____

Add Fee: ☐ : Site Insp (\$)

S + R.S. \$1

☐ : Interview (\$)

Photos

☐ : Tech. Insp (\$)

Others

Report Format: _____

Reported by: _____

AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way
#07-16 The AIG Building
Singapore 079120
Attn: Motor Claims Dept
Tel: 6419 1993
Your Ref: SLJ 136 Y

Norah Khai
6768 9828
6841 1183
Nora.khai@premiumauto.com.sg

Body & Paint Dept
PA/OD/TL10/2024

22 Oct 2024

Dear Sir/Mdm,

RE: ACCIDENT INVOLVING VEHICLE NO: SLJ 136 Y
VEHICLE MODEL: A4 1.4
LOCATION: BLK 53 JURONG EAST AVE 1 (PARC OASIS)
DOA: 18/10/2024

We refer to the vehicle mentioned above.

We have visually inspected the vehicle and would like to inform you that we have come to a conclusion that this vehicle is beyond economical repair.

The accident has caused intensive damages on the frontal, undercarriage, whole rear portion and Rear LH Fender of the vehicle which including unconfirmed damages. The damages incurred onto the frontier area, undercarriage, airbag, rear area, spare wheel housing, rear LH fender, rear end panel which estimated to be S\$76,562 for parts.

We also estimated labour cost to be S\$45,274 before any supplementary. Kindly be informed that there will be possible additional damages not visible during inspection.

Thank you,



Norah Khai
Claims Manager

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