ASS. REC. BY: Adman Ling

REF:

CC3/ALh18009366/Atbn2
ASSIGNMENT

From: Date:	Veh No: SKN2350Y Yr Regn: 2014 May.
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Andi Q3 c.c 1984
at Workshop m/s	Colour Black A/C: Insured / Std / NI / NA
of	Sp.Reading 86614 . T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: WAUZZZSUXERO34116
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess: 1000-	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
V	Tyre Size: F: 235 /55 R 17.
(Policy Condition)	R: 035/55/217.
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA (MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value: 100k	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 66 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. al mm L/Bal. al mm
Est. Repairs: (0 days Res.: Yes or No	D.O.A. D.O.I. 25/05/18
Lum Sum: % 3 Val.: Yes or No	Survey held at Premium.
	Des. of Damages Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time   Action / Instruction	1
OD ALG.	
SKN 1350Y - X	
Dort in David Makin 62 180	d: 4179.48! 30%)
9001 By 9001 \$4 91010.52 CREA	
RECEIVED 2.7	SEP 2018
Date/Time, File Pass to? Preli Report	Davis Of Popular
and Total Helin Report	Days Of Repair.
1) 319 1915 : Final Report Date/Time, File Return to?	Resurvey No. of Trip: \ Survey Fee: 200
AddEs	
2) Add Fee	: Interview (\$ ) Photos
Report Format : 00	: Tech. Invs (\$ ) Others
Lump Sum / I.B.I: (\$ 9010 -52	: Weekend (\$ · · )
Lump Sum / Long (s - [V] V - 1/L	110
	TOTAL 210

#### 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 witholding of material facts may allow insurance companies to repudiate policy ability.
- 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.

ACCI	DENIT	STA	T = M	1-135	ì
ACC	DEN	DIA	-11		

 Date Of Report
 22/05/2018 17:51

 Date Of Accident
 21/05/2018 16:35

Exact Location Of Accident FARRER RD TOWARDS LORNIE RD

Country/State of Loss SINGAPORE

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SKN2350Y

Insured/Policyholder

Name Of Registered Owner ZHOU ZHAOCHENG

NRIC No S7380762Z Email Address NOEMAIL

 Mobile Phone No
 (LOCAL) +65-88687006

 Alternative Phone No
 OFFICE-88687006

**Vehicle Particulars** 

Manufacturer AUDI

Model Q3 2.0 TFSI QU

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

If No, Please state action to be taken

Vehicle Category PRIVATE CAR

**Insurance Company** 

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 2100373844-03000

Cover Note Number

Driver

Name of Driver TAN LAI HENG, JEFFREY(CHEN LAIXING, JEFFREY)

 NRIC No
 \$8040073Z

 Date Of Birth
 16/12/1980

 Occupation
 INDOOR

 Date Of Driving Pass
 25/01/2010

Driving Experience 8 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-88687006

Fax Number

Contact Number

Address JEFF1216SG@YAHOO.COM.SG

Address

APT NLK 319B ANCHORVALE DRIVE #03-94

Postcode

542319

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

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 this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

## Circumstances of Accident

AT BOUT 1635 HRS, I WAS ALONG FARRER RD AND I STOPPED MY VEHICLE AT THE JUNCTION AS THE TRAFFIC LIGHT WAS RED. WHEN THE GREEN LIGHT APPEAR, THE VEHICLE INFRONT OF ME (SKK 2056 M) MOVED OFF, I MOVED OFF ALSO. SUDDENLY THE VEHICLE (SKK2056M) STOPPED ABRUPTLY, I DO NOT HAVE ENOUGH REACTION TIME TO STOP IN TIME AND RAMMED INTO THE REAR OF (SKK2056M). PARTICULARS WAS EXCHANGED AND NO INJURIES.

## Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SKK2056M

Vehicle Make/Model/Colour

BMW/BLACK

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

BELINDA JAYNE MARSHALL

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### 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
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- By the lodgment 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 :
  - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

12

Policyholder's Signature Date & Time: Oriver's Signature (If driver is not the policyholder) Date & Time:

22/05/200

Reporting Centre Personnel's Signature

NAME LING HATCH SENGE, GANY ( NAICHIN NO.: 62957 143x

### Sketch Plan #2

SKETCH PLAN			
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DESCRIBE CIRCUMSTANCES		ALCOHOLOGICA C	D. Adr. F
	BOUT I BUSTARS, I WO		
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	MOVED OF ALSO		
	DENLY THE VEHICUE SKE	DOSEM STOPRO AF	SURPRY, I
	1044 REACTION TIME T		
	of skik dasten PA		
NO INDURES			
DECLARATION I/We declare the foregoing parti	iculars are true in every respect.		60210
	iculars are true in every respect.	5_	0020

22/15/2016





Accident Photo



Details of Accident
DATE: 21 /05/2018 TIME: (6:35 Hrs
Exact Location of Accident: FARRER RD TWDS LORNIE RD JUNCTICAL OF EM PRELS RE
Details of own Vehicle
Vehicle Registration Number: SKN 2350Y
Name of Registered Owner: ZHOU ZHOOCHENG
Nric: Pink/Blue 57380762Z Fin / Passport No.:
Date of Birth (DD/MM/YYYY): 12/02/1973
Address: 222 Ocean Drive * 03-27 Sc098619)
Contact: (Hm) (Off) (Hp)
Email:
Vehicle Particulars (Own Vehicle)
Vehicle make & model : AUDI
Type of vehicle : Q3 &-O TPS1 Q0
Exact purpose for which vehicle was
Being used at time of accident Private commercial / Hire & Reward
Are you claiming under your own : Yes No
Insurance policy for repair to your vehicle? :If no, please indicate intention:
Vehicle Category: : Private / Commercial / Motorcycle
Insurance (Own Vehicle)
Name of Insurance Company : AG
Type of Policy : ACT / Comprehensive /3 <sup>rd</sup> Party / 3 <sup>rd</sup> party Fire & Theft
Fleet Policy : Yes / No
Policy Number : 2100373844 - 03000
Motor CI :
Driver Particulars
Name of Driver: TAN LAI HEND OFFEEY
Nric: Pink / Blue S&04 co 73 Z Fin / Passport No.:
Date of Birth (DD/MM/YYYY): 16/12//980
Occupation : Jedoor / Outdoor Class 3 Pass date: 25/01/20/0
Gender : Male / Female
Address : BLK 319B ANCHUKVALE PRIVE #03-94 542319
Contact :(Hm)(Off) 8868700((Hp)
Email: jetf12165g@xahoo rom.sg
Was driver an employee of the insured's co.? : Yes / No
If no, relationship of driver with the insured : NIC
Vehicle registration no. of driver's own vehicle : N(C
(If Applicable)  Insurance company of driver's own vehicle : N(L)
(If Applicable)
No. of Pax inside your vehicle: Any Video Footage: Yes No
1)Name: Gender: Male / Female 2)Name: Gender: Male / Female
2)Name: Gender: Male / Female 3)Name: Gender: Male / Female
4)Name: Gender: Male / Female

Accident Statement : Part 2				.5%					
General Information of Ac	cident								
Type of Collision (eg. Chain collision, side swipe,	: FRONT	70	REAR			5.)			
Weather Conditions Road Surface	Clear :Dry	/	Raining Wet	g	Others Others				
Other Information	TW I			m (1)					
a) Was anybody injured in the acc b) Was any other vehicle or proper (including witness)		Yes Yes	,	No If Y	es : An	yone (	Convey by A	mbula	nce Yes / No
Details of Police Action  Was the accident reported to the p  Was notice of intended prosecution		Yes Yes	1.	<b>1</b>					
Details of Other Vehicle Pr	operty								
Vehicle Registration No. Vehicle Make / Model / Colour Details of Property	: SKK 20 : BMW		ACK.		¥				
Details of Other Vehicle's	and the Landson	-0.0 W (W)	THE REAL	MALL STATE					
Name of Driver NRIC Pink / Blue Contact Address	BELINDA		<u> </u>	Fin / Pass	port No :		·		
Insurance Company									
Name of Insurance Company Nature of Damage	:				_ '				
Details of Witness									
Name Contact Email Address	<u></u>				=		8		

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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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- 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.
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- (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 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:
  - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

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

22/05/2018

Reporting Centre Personnel's Signature
Name: World INHONG SENG, Gray

NRIC/FIN No .: 42987 143X

Along

	[ Jk 205
1 1	FSKN235

#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

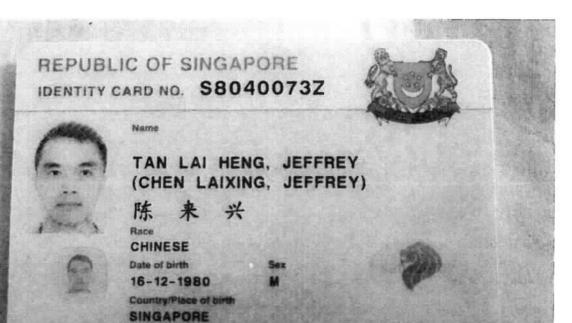
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AT ABOUT 1635 HRS, I WAS ALCO	NH FARKER RD AND I	
copped My LIGHICLE AT THE DINCTION AS THE	TRAFFIC LIGHT WAS RED.	
ADN THE GREEN LIGHT APPEAR, THE VEHICLE	INFRONT OF ME SKK 20	3
VED OFF I MOVED OFF ALSO.		
SUDDENLY THE VEHICLE SKE 2056M	STOPPED ABURPTLY, I	
NOT HAVE ENLIGHT REACTION TIME TO STUP	IN TIME AND RAWNED	
TO THE REAR OF SICK 2056M. PARTICULARS	WAS EXCHANGED AND	
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#### DECLARATION

I/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:

22/05/2018 (80) Name: Work Letton SENIG Gay









Licence Number S8040073Z

TAN LAI HENG, JEFFREY (CHEN LAIXING, JEFFREY)

Birth Date: 16 Dec 1980 tasse Date: 17 Jan 2018



# YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

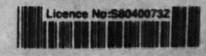
EFFECTIVE DATE

Class 3

Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

25 Jan 2010

NP 428A



# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7380762Z





Namo

## ZHOU ZHAOCHENG

用业里 Race CHINESE Date of birth Se 12-02-1973 M

Country of birth

87 2000 22

4075395



NRIC No. S7380762Z

Date of issue 20-07-2007

222 OCEAN DRIVE #03-27 SINGAPORE 098619 NRIC No: S7380762Z

Date: 24/08/2015 (R)



# CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

AUDI AUTO PROTECTOR

OWN DAMAGE EXCESS WINDSCREEN EXCESS S\$1000.00(I)

CERTIFICATE NO. 2100373844-03000

(for policies with effect from 1st November 2002)

Market Value

SUM INSURED INSURING WITH COE/PARF

Yes

\$\$100.00

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

ZHOU ZHAOCHENG

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 26 May 2017

SKN2350Y

4 ) DATE OF EXPIRY OF INSURANCE

25 May 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE \* SUBJECT TO AGE CONDITION :All Age Condition

a) The Insured.

b) Any other person who is driving on the Insured's order or with his permission.

This policy will indemnify the insured or any authorised driver only if he/she meets the age conditions.

A Young and/or Inexperienced Driver Excess ("YIDR") of \$\$3,000.00, in additional to the

Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said

Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle

6) LIMITATION AS TO USE \*

Use only for social, domestic and pleasure purposes and for the Insured's business.

The Policy does not cover use for hire or rewards, tuition, driving test, racing, pace-making, reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade

APPROVED REPORTING CENTRES / AUDI AUTHORISED REPAIRERS

1. Audi Customer Service Center - 55 Ubi Road I (Tel: 63662323)

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

APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRES)

2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501)

4. Ethoz - 30 Bukit Batok Cres(Tel:66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only

6. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 7. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)

8. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)

10. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)

LOSS OF USE Loss Of Use 15 days Replacement Car only for repairs at Audi Customer Service Centre

NAMED DRIVER

/ EMPLOYER'S LOAN

HIRE PURCHASE COMPANY United Overseas Bank Limited

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 18 May 2017

AIG Asia Pacific Insurance Pte. Ltd.

504125-217 PREMIUM LEASING - EF 281 ALEXANDRA ROAD AUDI CUSTOMER SERVICE CENTRE SINGAPORE 159938

**AUTHORISED REPRESENTATIVE** 

ORIGINAL

SSPVKK

ZERESARIA

2 77

# 24-hours AIG Auto Hotline: (65) 6338 6200

Important: Keep this document in your car

What to do in the event of an accident?

Report the accident to us with your accident vehicle (whether

approved workshops within 24 hours or the next working day

Submit Writ/Summons/Correspondences from third party to

damaged or not) via our approved reporting centres of

Keep calm and move to a safe place

of the accident.

AIG immediately.

Do not admit or discuss fault or blame

#### What can the 24-hour AIG Auto Hotline do for you?

- Immediate assistance after an accident
- Emergency breakdown service
- Towing service (accident or non-accident related)
- Advice on Motor Claims procedures
- Medical Referral Assistance

#### If no one is injured:

- You are not required to make any police report.
- Record vehicle number, name and address, insurance company and policy number of the other vehicle(s).
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or approved workshops within 24 hours or the next working day of the accident.

# If the accident involves injuries or damage to government property & vehicles, foreign registered vehicles or

- non-injury hit & run case:

  Report the accident to the Police, providing full details of the circumstances of the accident.
- Record vehicle number, name and address, insurance company and policy number of the other vehicle(s) if applicable.
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or approved workshops within 24 hours or the next working day of the accident.

#### 15 DAYS LOSS OF USE / CAR REPLACEMENT BENEFIT

Applicable only if this benefit is included in your motor insurance. Please refer to your Policy Schedule for details.

Policy terms and conditions apply. Please call our customer service hotline number (65) 6419-3000 for assistance.

The Certification of Insurance (CI) should be produced without demand when collecting the Rental Car and Premium Automobiles. Pte Ltd reserves the right to verify the identity of the holder. The Cl is the property of AIG and its use is subject to the terms and conditions contained in the Loss of Use Endorsement under the Policy issued to the policyholder. The validity of this benefit is conditional upon the Motor Policy insured herein being in force.

### Steps to activate Loss of Use / Car Replacement Benefit and Important Information

- To activate your loss of use car replacement, please call Premium Automobiles Re Ltd at 64741223 after filing/reporting your accident claim.
- Your rental car will be made available within 3 hours of activation with Premium Automobiles Pte Ltd, subject to availability
- 3. At the time of collection of the Rental Car, the original insurance policy and scheduled issued by AlG, a copy of the Accident Report from the Authorised Workshop must be produced.
- The number of days of loss of use entitlement is based on the period your vehicle is in the repair workshop subject to a maximum of 15 days.
- A refundable security deposit of S\$350 is required by the rental company during each rental period.
- The rental car will be picked up and returned at Premium Automobiles Pte Ltd upon activation of the benefit.
- Rental cars are strictly for use in Singapore only. Additional premium of S\$35/- per day is applicable if the rental car is to be driven to
- Extension of rental beyond repair period approved by AIG surveyor will be chargeable to customer by the rental company on per day basis.
- Upgrade of Rental Car is available upon request subject to additional charges by the rental company.
   Excess liability for all Rental Cars is \$\$3,000. Customers may choose to reduce the liability to \$\$1,600 per day and by paying the Collision Damage Waiver of S\$25 per day.

For use of Rental Car in Malaysia, additional excess liability of \$2,000 applies.

if owner fails to inform Premium Automobiles Pte Ltd that he is travelling into Malaysia using the Rental Car and if any accident happens, the entire cost of repair will be the owner's sole responsibility. Premium Automobiles Pte Ltd reserves the right to pursue the full repair cost against the owner

Additional age requirement

Minimum 23 years old to maximum 65 years old with at least 2 years of driving experience

#### Premium Automobiles Pte Ltd Operations Hours

Monday to Friday: 0900hrs - 1800hrs

Saturday: 0900hrs to 1300hrs except Sundays and Public Holidays

Customer Service Line: 64741223 Facsimile: 67457823

55 Ubi Road 1 Singapore 408699

\*Premium Automobiles' Terms & Conditions apply

#### IMPORTANT NOTICE

If you sell your motor vehicle, this Notice is IMPORTANT and MUST be complied with. Policyholders are hereby warned that under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.99), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

The Insured is further warned that on the sale of a motor vehicle, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.88).

The Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agree to cover the new owner, they will issue a new Certificate of Insurance in the new owner's name. The premium chargeable may vary according to the new owner's profile.

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

Email: Nora.khai@premiumauto.com.sg / claims@premiumauto.com.sg

## **Telefax**

Estimate : Accident Repairs Workshop : Ubi Road 1 Contact No : 6366 2323 Fax No : 6841 1183

Reference : PA/OD/0609/2018/GW

Date 25-May-18

Vehicle NOT IN workshop. Kindly arrange for survey.

#### AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16 AIG Building Singapore 079120

Attn: Mr. Adrian Ling - Motor Claims Dept

Tel: 6841 0055 - Fax: 6256 4315

Owner's Name Mr. Zhou ZhaoCheng Address 222 Ocean Drive

#03-27

Singapore 098619

Audi Q3 2.0 TFSI Qu

Telephone HP +65 96981509 Type of Claim Own Damage Claim Policy No. 2100373844-03000 : Vehicle No SKN 2350 Y Model Code

Model / Year May-14 **Engine No** CCZ 402948

Chassis No WAUZZZ8UXER034116

Mileage : Date In

Liability Excess Cost

Estimated By : Johnny Boo / Allan Wu

Accident Date : 21-May-18

Place of Accident : Farrer Rd Towards Lornie Rd

# Premium Automobiles 55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

# Telefax

# Estimated Labour Charges for Accident Vehicle SKN 2350 Y

S/N	Nature of Jobs		Estimated Charges	Surveyor's Recommendation
1	To remove and transfer front wire harness for headlights, horns, fog lamps, outside temperature sensor and headlight washer assy.	S/N	\$ 360.00	
2	To disamantle and renew front bumper assy.re- organise front crash management components. Reinstall all parts removed.		\$ 1,050.00	500.
3	To respray front bumper and bonnet.		\$ 1,600.00	1100
5	To carry out diagnostic check.	S/N	\$ 192.00	//
	TOTAL LABOUR CHARGES	:	\$ 3,202.00	

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

# Telefax

# Material List for Accident Vehicle Regn No.SKN 2350 Y.

-			Damage Parts & Prices
S/N	Parts Description		 S/NETT REMARKS
1	FRONT BUMPER Jehad		\$ 1,664.00 1330.80
2	FRONT BUMPER FIXING PARTS Notes		TBC 🗡
3	FRONT BUMPER SPOILER Cut		\$ 333.00 266
4	FRONT BUMPER TRIM-LH/RH	2	\$ 42.00
5	FRONT BUMPER AIR GUIDE GRILLE-LH/RH	2	\$ 206.00
6	RADIATOR GRILLE Good		\$ 972.00 - 777 20
7	STRIKER PLATE		\$ 107.00 ? 85 20
8	FRONT BUMPER COVER		\$ 105.00 - 84
9	SIGN "CAUTION" NEL A		\$ 12.00 9 28
10	FOAM FILLER PIECE Detond.		\$ 88.00 ? 69-84
11	FRONT BUMPER SIDE REINFORCEMENT Best		\$ 739.00 > 591.20
12	COVER Debend		\$ 56.00 > 44.24
13	FRONT BUMPER SUPPORT-LH/RH	2	\$ 44.00
15	HEADLIGHT MOUNTING-LH/RH Lt Denged	2	\$ 206.00 7 82 90
16	FRONT WHEEL COVER-LH/RH AL-	2	\$ 454.00 - 3 63 76
17	SUNDRIES NOC		\$ 200.00 ? 672
	TOTAL SPARE PARTS	:	\$ 5,228.00
	TOTAL LABOUR CHARGES	:	\$ 3,202.00
	GRAND TOTAL	:	\$ 8,430.00

All charges are not inclusive of GST.

Legend:

Remarks (OK) = Approved, Remarks (X) = Not approved

Spare parts are Special Nett.

13478,44

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

# Telefax

Name

: Adrian hi

Surveyed Date

Authorised Date

**Excess Cost** 

Liability :

Remarks

Not Authorised Pegins, Of Py

Please Note

: This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges and spare parts in the progress of repair, we shall inform you accordingly. For inspection of vehicle, please refer to Ms Norah Khai at

Tel:6768 9828 for appointment.

Yours faithfully, Premium Automobiles Pte Ltd

Johnny Boo Body Repair Manager Allan Wu Claims Consultant

# Premium Automobiles 55 Ubi Road 1, Singapore 408699 Tel: 8368 2323 Fax: 6841 1183 Email: Nora.khai@premiumauto.com.sg / claims@premiumauto.com.sg

# Supplementary Estimate

Estimate No.		9	
Estimate No.			
Estimate No.		PA/OD/0609/2018/GW	
Date		10-Jul-18	
Service Advisor		CHANG	
Pages		1 of 1	
Regn No		SKN 2350 Y	
Model No		Audi Q3 2.0 TFSI QU	
ription		Unit Price Amount	
denser, radiator, charged ol unit. To carry out ng system.	S/N		
carrier . Align to position.		\$ 2,800.00 1250 - 150	9
TOTAL LABOURS	:	\$ 3,900.00	
	1		
ou coulet		147,20	
- KH UMOV			
,		\$ 23.00	
		1,110.00	
	S/N	\$ 25.00	
	57,752 H	and markets and	
TOTAL PARTS	:	\$ 1,460.00	
GRAND TOTAL	:	\$ 5,360.00	
1	Service Advisor Pages Regn No Model No  Iniption  Idenser, radiator, charged of unit. To carry out ig system.  TOTAL LABOURS  - RH Crubul.  I. TOTAL PARTS	Service Advisor Pages Regn No Model No  Idenser, radiator, charged of unit. To carry out g system.  TOTAL LABOURS:  - RH Credick d.  S/N  TOTAL PARTS:	Service Advisor

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

Email: Nora.khai@premiumauto.com.sg / claims@premiumauto.com.sg

## Telefax

**Estimate** 

Accident Repairs

Workshop

Ubi Road 1

**Contact No** 

6366 2323

Fax No

6841 1183

Reference

PA/OD/0609/2018/GW

Date

: 25-May-18

Vehicle NOT IN workshop. Kindly arrange for survey.

#### AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16 AIG Building Singapore 079120

10 days exclude 1 Sunday with

added jobs. - jb - 26 Jul 18

li Adrian

Attn: Mr. Adrian Ling - Motor Claims Dept

Tel: 6841 0055 - Fax: 6256 4315

Owner's Name

Mr. Zhou ZhaoCheng

Address

222 Ocean Drive

#03-27

Singapore 098619

Telephone

HP +65 96981509

Type of Claim

Own Damage Claim

Policy No.

2100373844-03000

Vehicle No

SKN 2350 Y

Model Code

: Audi Q3 2.0 TFSI Qu

Model / Year

: May-14

Engine No

: CCZ 402948

Chassis No

: WAUZZZ8UXER034116

Mileage

.

Date In

•

Liability

:

**Excess Cost** 

...

Estimated By

: Johnny Boo / Allan Wu

**Accident Date** 

21-May-18

Place of Accident

Farrer Rd Towards Lornie Rd

# Premium Automobiles 55 Ubi Road 1, Singapore 408699

Tel: 6366 2323 Fax: 6841 1183

## Telefax

# Estimated Labour Charges for Accident Vehicle SKN 2350 Y

S/N	Nature of Jobs		Estimated Charges	urveyor's ommendation	
1	To remove and transfer front wire harness for headlights, horns, fog lamps, outside temperature sensor and headlight washer assy.	S/N	\$ 360.00	\$ 360.00	
2	To disamantle and renew front bumper assy.re- organise front crash management components. Reinstall all parts removed.		\$ 1,050.00	\$ 500.00	
3	To respray front bumper and bonnet.		\$ 1,600.00	\$ 1,100.00	
3a	Added labour charges - see attached		\$ 3,900.00	\$ 3,100.60	2600  -
5	To carry out diagnostic check.	S/N	\$ 192.00	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 7,102.00	\$ 5,252.00	4752

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

# Telefax

# Material List for Accident Vehicle Regn No.SKN 2350 Y.

			Damage Pa	& Prices			
S/N	Parts Description		S	S/NETT		REMARKS	
1	FRONT BUMPER		\$	1,664.00	\$	1,330.80	
2	FRONT BUMPER FIXING PARTS			TBC			
3	FRONT BUMPER SPOILER		\$	333.00	\$	266.00	
4	FRONT BUMPER TRIM-LH/RH	2	\$	42.00			
5	FRONT BUMPER AIR GUIDE GRILLE-LH/RH	2	\$	206.00			
6	RADIATOR GRILLE		\$	972.00	\$	777.20	
7	STRIKER PLATE		\$	107.00	\$	85.20	
8	FRONT BUMPER COVER		\$	105.00	\$	84.00	
9	SIGN "CAUTION"		\$	12.00	\$	9.28	
10	FOAM FILLER PIECE		\$	88.00	\$	69.84	
11	FRONT BUMPER SIDE REINFORCEMENT		\$	739.00	\$	591.20	
12	COVER		\$	56.00	\$	44.24	
13	FRONT BUMPER SUPPORT-LH/RH	2	\$	44.00			
15	HEADLIGHT MOUNTING-LH/RH	2	\$	206.00	\$	82.40	
16	FRONT WHEEL COVER-LH/RH	2	\$	454.00	\$	363.20	
17	SUPPLEMENTARY		\$	1,460.00	\$	1,148.44	
19	SUNDRIES		\$	200.00	\$	6.72	
	TOTAL SPARE PARTS	:	\$	6,688.00	\$	4,858.52	
	TOTAL LABOUR CHARGES		\$	7,102.00	\$	5,252.00	4752
	GRAND TOTAL	:	\$	13,790.00	\$	10,110.52	9610.5

All charges are not inclusive of GST.

Legend: Remarks (OK) = Approved, Remarks (X) = Not approved

Spare parts are Special Nett.

# Premium Automobiles 55 Ubi Road 1, Singapore 408699

Tel: 6366 2323 Fax: 6841 1183

Email: Nora.khai@premiumauto.com.sg / claims@premiumauto.com.sg

# **Supplementary Estimate**

GST Reg No. 19-9902271-W

78 Shento #07-16 Al Singapore Attn: Mr.	Pacific Insurance Pte Ltd on Way G Building e 079120 Adrian Ling - Motor Claims Dept 0055 / Fax: 6256 4315	Estimate No. Date Service Advisor Pages Regn No Model No		PA/OD/0609/2018/GW 10-Jul-18 CHANG 1 of 1 SKN 2350 Y Audi Q3 2.0 TFSI QU			
Quantity	Desc	ription	Serge C	Unit Price Amoun			Amount
1 2	To remove and transfer aircon condair cooler, electrical fans and controvacuum / regas to pressurise cooling To dismantle and renew front lock of	ol unit. To carry out ng system.	S/N	\$	1,100.00 2,800.00	\$ \$	2,000.00
		TOTAL LABOURS	:	\$	3,900.00	\$	3,100.00
<u>Parts</u>							
1 2 3 4 5	HEADLIGHT WASHER CYLINDER INNER AIR GUIDE - RH FRONT LOCK CARRIER COOLANT FRONT NO. PLATE	R-RH	S/N	\$ \$ \$ \$ \$	184.00 23.00 1,116.00 112.00 25.00	\$	147.20 18.16 892.80 65.28 25.00
		TOTAL PARTS	:	\$	5,360.00	\$	4,248.44

For Premium Automobiles Pte Ltd

Authorised	Signature

55 Ubi Road 1, Singapore 408699 Tel: 6366 2323 Fax: 6841 1183

## Telefax

Name :
Surveyed Date :
Authorised Date :
Excess Cost :
Liability :
Remarks :

Please Note

This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges and spare parts in the progress of repair, we shall inform you accordingly. For inspection of vehicle, please refer to Ms Norah Khai at

Tel:6768 9828 for appointment.

Yours faithfully, Premium Automobiles Pte Ltd

Johnny Boo Body Repair Manager Allan Wu Claims Consultant

AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16 AIG Building Singapore 079120

Attn: Motor Claims Dept Yr Ref: SKN 2350 Y 6768 9911 6841 1183 Nora.khai@premiumauto.com.sg Body & Paint Dept PA/OD/0609/2018/MAS

22 Sept 2018

Norah Khai

from

Telephone +65-Telefax +65-

**EMail** 

Our department

Our Ref Your Ref

Date

Dear Sir.

RE: INSURANCE CLAIM FOR SKN 2350 Y, Audi Q3 2.0 TFSI Qu

With reference to the above-mentioned vehicle, no SKN 2350 Y, claimant, Mr. Zhou Zhaocheng, please find the related document per attached.

- 1. A copy of the Original invoice no. 85012946 S\$9,213.26
- 2. A copy of the Discharge Voucher duly signed by client.

Based on the above document, we would appreciate you could expedite the payment soonest possible.

If you require any further clarification, please do not hesitate to contact me at 6768 9911.

Regards

This is a computer-generated document. No signature is required.

Norah Khai Claims Dept

Encls

AIG - SKN 2350 Y

total pages

Premium Automobiles Pte Ltc Showroom 9 Leng Kee Road Singapore 159090 Telephone (65) 6566 1111 Telefax (65) 6471 3733

Service & Parts Centres 55 Ubi Rd 1 Singapore 408699 Telephone (65) 6336 2323 Telefax (65) 684 11183

# ...CLAIM SUBFOLDER...(Pending for Survey Report)

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	
Main	28 May 2018		25 May 2018 17:25 Edit Adj Rpt	S\$9,610.52 Edit Estimates	S\$9,610.52 View Rpt		Pending for Survey Report Cancel Case	
	Main	Refe	erence	Claim Deta	ails	Documents	Show All	
CLAIM S	UBFOLDER DET	AILS				[Create	d by insurer]	
Insured:		ZHOU Z	HAOCHENG, ID	: S7380762Z				
Vehicle Reg. No.:		SKN23	350Y	Date of Lo	oss:	[47 Mont	21/05/2018 16:00 - :59 [ <b>47</b> Months and <b>25</b> Days From LTA Reg Date (Man Yr)]	
Claim Typ	e:	<b>OD</b> / 9	715407994SG	Policy/Cov	ver Note No.:	2100373	844 (Comprehensive)	
			Excess:		S\$1,000	.00		
Repairer:	epairer: Premium Automobiles Pte Ltd (UBI) 55 Ubi Road 1, 408699 Ubi - Tel: 67689828/9827/9911			28/9827/9911				
Handling	Insurer:		a Pacific Insurar ng.Loo@aig.com	nce Pte. Ltd. (SG)	Tel: 65-6419-300	0 [Handled by	Loo, Tong Shing]	
Adjuster:			to Consultants P /06/2018]	te Ltd (HQ) - Tel: 6	256-3561 [Hand	iled by ADRIAN	LING] [Final Rpt	
Driver/Cu	stodian:	TAN LAI	HENG, JEFFREY(C	HEN LAIXING, JEFFF	REY) (37 / Male),	NRIC: S8040073	Z, Tel: +6588687006	
ASSOCI	ATED MAIL REC	EIVED				View All	Compose Case Mail	
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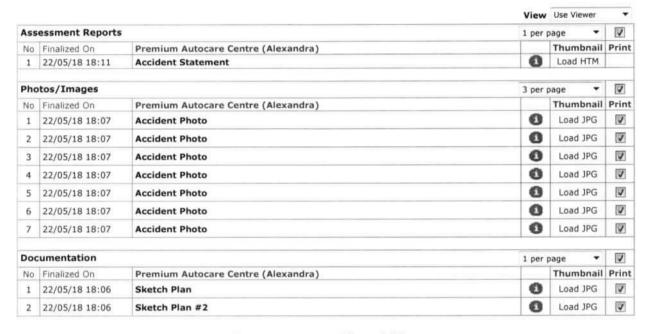
## Claim Documents

# \*SKN2350Y (9715407994SG) OD May 21 2018 4:00PM [ZHOU ZHAOCHENG] Premium Automobiles Pte Ltd

	Upload Documents	Upload Photos	Compose New Letter	Upload Video	Upload Audio	View	Use Viewer	•
Ass	essment Reports					1 per p		V
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42	30/08/18 13:39	Reinspection Photo	0	Load JPG	V
43	30/08/18 13:39	Reinspection Photo	0	Load JPG	V
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No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	28/05/18 14:04	ESTIMATE	63	Load PDF	
2	28/05/18 14:04	Singapore Accident Statement	0	Load PDF	
3	30/08/18 13:27	SUPPLEMANTARY	0	Load PDF	
4	30/08/18 13:33	ESTIMATE	0	Load PDF	
	03/10/18 09:31	WORKSHOP INVOICE	0	Load PDF	
5	03/10/10 03.31				

# **Linked Accident Report Documents**



### **Documents Checklist**

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	[x]
Show Remarks To: Handling Insurer  Note: Remarks are private unless you show it to other parties.	4-0

# LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

AIG Asia Pacific Insurance Pte. Ltd. AIG Building, 78 Shenton Way #07-16

Our File No:

CC3/AIG18009566/ATBN2

Singapore 079120

Date:

03/10/2018

REFERENCE

Insured/Claimant:

ZHOU ZHAOCHENG

Policy No:

2100373844

Date of Loss:

21/05/2018

Nature of Claim:

OD

Claim No:

9715407994SG

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

SKN2350Y

Make & Model:

AUDI Q3, 2.0 TFSI QU (A) 26/05/2014 (Man. Year: 2013) Engine No:

CCZ402948

Reg. Date: Colour:

Black

Chassis No: Odometer:

WAUZZZ8UXER034116 86614 km

**Engine Capacity:** 

Market Value/New Car

1984 cc

Price:

S\$100.000.00

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable):

CONDITION OF TYRES

Front Tyre Size:

235/55R17

Rear Tyre Size:

Yes Engine Modification:

235/55R17

Front Left Side: Front Right Side: Michelin 6 mm Michelin 6 mm Rear Left Side: Rear Right Side:

Michelin 6 mm Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIM	S	Repairer's	Adjuster's	Difference	Diff %
Parts		6,376.44	4,858.52	1,517.92	23.81
Miscellaneous Item	ns	0.00	0.00	0.00	
Labour		7,102.00	4,752.00	2,350.00	33.09
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Calculated Gross Total (S\$)	13,478.44	9,610.52	3,867.92	28.70
	- Excess (S\$)	1,000.00	1,000.00	0.00	0.00
	(S\$)	12,478.44	8,610.52	3,867.92	31.00
	+ GST 7.00/7.00% (S\$)	873.49	602.74	270.75	31.00
	Nett Amount (S\$)	13,351.93	9,213.26	4,138.67	31.00

INSPECTION

Date of Assignment:

25/05/2018

Date Inspected:

25/05/2018 Inspected At:

Premium Automobiles Pte Ltd (UBI)

55 Ubi Road 1 Singapore 408699

**Estimated Period of Repair:** 

10.0 days

Adjuster: ADRIAN LING

Manager: DENISE TAY KWEE CHENG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

Adjuster Report Page 2 of 3

# REPAIR DETAILS

R	ലാ	mn	nen	der	1 P	arts
	こしし	11111	161	ueu	<i>a</i> г	arto

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1 2	1		*FRONT BUMPER *FRONT BUMPER FIXING PARTS (NPA)	Deformed Not Necessary	1,664.00 FS 0.00 FS	*1,330.80 FS *- FS
3 4	1 2		*FRONT BUMPER SPOILER *FRONT BUMPER TRIM-LH/RH	Cut Not Necessary	333.00 FS 42.00 FS	*266.00 FS *- FS
5 6	2		*FRONT BUMPER AIR GUIDE GRILLE-LH/RH *RADIATOR GRILLE	Not Necessary Cracked	206.00 FS 972.00 FS	
7 8	1		*STRIKER PLATE *FRONT BUMPER COVER	Damaged Deformed	107.00 FS 105.00 FS	*85.20 FS *84.00 FS
9	1		*SIGN CAUTION *FOAM FILLER PIECE	Necessary Deformed	12.00 FS 88.00 FS	*9.28 FS *69.84 FS
11 12	1		*FRONT BUMPER SIDE REINFORCEMENT *COVER	Bent Deformed	739.00 FS 56.00 FS	*591.20 FS *44.24 FS
13 14	2		*FRONT BUMPER SUPPORT-LH/RH *HEADLIGHT MOUNTING-LH/RH	Not Necessary N/s Damaged	44.00 FS 206.00 FS	*- FS *82.40 FS
15 16	2		*FRONT WHEEL COVER-LH/RH *SUNDRIES	Necessary Necessary	454.00 FS 200.00 FS	*363.20 FS *6.72 FS
17 18	1		*HEADLIGHT WASHER CYLINDER-RH *INNER AIR GUIDE-RH	Cracked Deformed	147.20 FS 18.16 FS	
19 20	1		*FRONT LOCK CARRIER *COOLANT	Cracked Necessary	892.80 FS 65.28 FS	*892.80 FS *65.28 FS
21	1 anchise	part. S=SpcN	*FRONT NO PLATE	Bent	25.00 FS	*25.00 FS
				Total Parts (S\$)	6,376.44	4,858.52

# Recommended Miscellaneous Items There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labo	our Items			
1	TO REMOVE AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, FOG LAMPS, OUTSIDE TEMPERATURE SENSOR AND HEADLIGHT WASHER ASSY	New	360.00	360.00
2	TO DISMANTLE AND RENEW FRONT BUMPER ASSY.RE- ORGANISE FRONT CRASH MANAGEMENT COMPONENTS.REINSTALL ALL PARTS REMOVED	New	1,050.00	500.00
3	TO RESPRAY FRONT BUMPER AND BONNET	New	1,600.00	1,100.00
4	TO CARRY OUT DIAGNOSTIC CHECK	New	192.00	192.00
5	TO REMOVE AND TRANSFER AIRCON CONDENSER,RADIATOR,CHARGED AIR COOLER,ELECTRICAL FANS AND CONTROL UNIT.TO CARRY OUT VACUUM/REGAS TO PRESSURISE COOLING SYSTEM	New	1,100.00	1,100.00
6	TO DISMANTLE AND RENEW FRONT LOCK CARRIER.ALIGN TO POSITION	New	2,800.00	1,500.00
	Gross Labour	Cost (S\$)	7,102.00	4,752.00
	Report was unsubmitted durin	g this print-out.		

< END OF ESTIMATES >