

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.

Bal. or Market Value: 170K  
 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

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SJM8833Z Yr Regn: 208 Jue  
 Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or

Make: Audi A5 SB c.c. 1984  
 Colour: Black A/C: Insured / Std / NI / NA  
 Sp. Reading: 6148 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_  
 C/No: WAA222F58JA098322

Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: Inorder / Jammed / Leaked / Burnt or  
 Brake: Inorder / Jammed / Leaked / Burnt or  
 Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 245/40 R18  
 R: 245/40 R18

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or

Front	Rear
R/Bal. <u>3</u> mm	R/Bal. <u>06</u> mm
L/Bal. <u>06</u> mm	L/Bal. <u>06</u> mm
D.O.A. _____	D.O.I. <u>17/10/18</u>

Survey held at Premium

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
	<u>OP AIG</u>
	<u>SJM 8833Z - X</u>
<u>* Submit Prel. report due to owner Convert to TR Claim.</u>	
RECEIVED 23 OCT 2018	

Date/Time, File Pass to?

23/10/18

1) Typist

Date/Time, File Return to?

2)

Report Format: Prel

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

☒ : Preli. Report  
☐ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

S + RS: \$ \_\_\_\_\_

Photos

Others

TOTAL

<u>200</u>
<u>10</u>
<u>210</u>

## 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 Report	15/10/2018 10:50
Date Of Accident	13/10/2018 19:10
Exact Location Of Accident	JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM8833Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	DIANA OW CHOY CHEE
NRIC No	S1344527C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98182428
Alternative Phone No	OTHERS-98182428

### Vehicle Particulars

Manufacturer	AUDI
Model	A5 SB 2.0 TFS
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	1800056429
Cover Note Number	

### Driver

Name of Driver	TAN BOON LEE
NRIC No	S1394938G
Date Of Birth	13/09/1959
Occupation	INDOOR
Date Of Driving Pass	08/09/1989
Driving Experience	29 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97398726
Fax Number	
Contact Number	
EMail Address	BOONLEE_TAN@YAHOO.COM.SG

Address	136 HILLVIEW AVENUE #05-09
Postcode	669598
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	RAINING
Road Surface	WET

#### 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 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)	2
Passenger 1	NAME: : DIANA OW GENDER: : FEMALE

#### 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

ON 13/10/2018 TIME, 1908 HRS, I WAS TRAVELLING ALONG JALAN BUKIT MERAH ROAD. THE TRAFFIC WAS SLIGHTLY HEAVY. A FRONT VEHICLE STOP TO GIVE AWAY ANOTHER VEHICLE. I STOPPED MY VEHICLE (SJM8823Z), AT THE SAME TIME WITHIN SECONDS, I FELT AN IMPACT WITH A LOUD BANG AT MY REAR. INSPECTED MY CAR AND FOUND REAR DAMAGES ON BUMPER, SKIDDING AND EXHAUST PIPING SHIFTED. THE OTHER CAR THAT BANG TO MY REAR WAS AN NTUC COMFORT TAXI, (SHC2397G). DRIVEN BY CHUA BOCK HUNG. MR CHUA SUGGEST TO REPORT. AS HE SAID HE WAS UNABLE TO PAY FOR THE DAMAGES. NO ONE WAS INJURED DURING THE CAUSED OF THE ACCIDENT.

#### 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 Witness 1

Name	DIANA OW
Phone Number	98182428
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC2397G
Vehicle Make/Model/Colour	COMFORT TAXI
Details Of Properties	
Vehicle Category	TAXI

Name of Driver	CHUA BOCK HUNG
NRIC/Passport Number	S0213034C
Contact Number	96382557
Address	BLK 112 JURONG EAST ST 13
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.
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 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:
  - (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.
- (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.

Policyholder's Signature  
Date & Time:



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

Reporting Centre Personnel's Signature  
Name: JAMES TAN  
NRIC/FIN No.:



## Sketch Plan #2

### SKETCH PLAN

 - SJM8833Z  
 - SHC2397G

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 13 OCT 2018 TIME 1908HRS I WAS TRAVELLING ALONG JALAN BUKIT MARAH ROAD. THE TRAFFIC WAS SLIGHTLY HEAVY. A FRONT VEHICLE STOP TO GIVE AWAY ANOTHER VEHICLE. I STOPPED MY VEHICLE (SJM8833Z) AT THE SAME TIME. WITHIN SECONDS I FELT AN IMPACT WITH A LOUD BANG AT MY REAR. INSPECTED MY CAR AND FOUND REAR DAMAGES ON BUMPER, SKIDDING AND EXHAUST PIPING SHIFTED. THE OTHER CAR THAT HIT BANG TO MY REAR WAS AN N74C COMFORT TAXI (SHC2397G) DRIVEN BY CHUA BOCK HUNY. MR. CHUA SUGGEST TO REPORT AS HE SAID HE WAS UNABLE TO PAY FOR THE DAMAGES. NO ONE <del>WAS</del> WAS INJURED DURING THE CAUSE OF ACCIDENT.

### 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:

Reporting Centre Personnel's Signature  
Name: JAMES TAN  
NRIC/FIN No.:



Accident Photo



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1394938G



Name

TAN BOON LEE



Race

CHINESE

Date of birth

13-09-1959

Sex

M

S1394938G

Country/Place of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1394938G

Name

TAN BOON LEE

Birth Date: 13 Sep 1959

Issue Date: 22 Mar 2018



6034525



NRIC No. S1394938G



Date of issue

29-09-2018

Address

136 HILLVIEW AVENUE  
#05-09  
SINGAPORE 669598

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight  $\leq 3000\text{kg}$  with  $\leq 7$  passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq 2500\text{kg}$  08 Sep 1989

NP 428A





## AUDI AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : DIANA OW CHOY CHEE,  
 Period of Insurance : 06 Jun 2018 To 05 Jun 2020  
 Engine No. : CVK061459  
 Chassis No. : WAUZZZF58JA098322

Vehicle No. : SJM8833Z  
 Policy No. : 1800056429  
 Endorsement No. :  
 Issued Date : 07 Jun 2018

## ABOUT THE COVER

Make/Model : AUDI A5 Sportback 2.0TFSI S Tronic (Design)  
 Engine Capacity/Tonnage : 1,984.00 CC Sum Insured : Market Value First Year of Registration : 2018  
 Driver Restriction : NA Off Peak Car : No Insuring with COE/PAFF : Yes

## Person or Classes of Persons Entitled to Drive\* :

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 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

## 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 1800cc - 2000cc Optional

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

## EXCESS

## Section 1

Fire - \$0 Own Damage - \$1600 Theft - \$0 Flood Cover - \$0

## Section 2

Property Damage - \$0

Windscreen : \$100

## Named Driver and Excess (where applicable)

OW CHOY CHEE, DIANA - \$1600 (Own Damage)

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

1. Audi Customer Service Center Add: 55 Ubi Road 1 Singapore 408699 63662323

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.com.sg](http://www.aig.com.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: DBS BANK LTD

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) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504125555

PREMIUM LEASING - SALESMAN CAR  
 281 ALEXANDRA ROAD AUDI CUSTOMER SERVICE CENTRE  
 SINGAPORE 159938

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Manile*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

Cheng Cheng Chee

# Premium Automobiles

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/1173/2018/GW  
Date : 16-Oct-18

Vehicle not IN workshop. Kindly assist to 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 : Ms. Diana Ow Choy Chee  
Address : 136 Hillview Avenue  
#05-09  
Singapore 669598  
Telephone : HP +65 98182428  
Type of Claim : Own Damage Claims  
Policy No. : 1800056429  
Vehicle No : **SJM 8833 Z**  
Model Code : Audi A5 SB 2.0 TFSI  
Model / Year : Jun-18  
Engine No : CVK 061459  
Chassis No : WAUZZZF58JA098322  
Mileage :  
Date In :  
Liability : -  
Excess Cost : -  
Estimated By : Johnny Boo / Allan Wu  
Accident Date : 13-Oct-18  
Place of Accident : Jalan Bukit Merah

# Premium Automobiles

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

## Telefax

### Estimated Labour Charges for Accident Vehicle SJM 8833 Z

S/N	Nature of Jobs	Estimated Charges
1	To remove and transfer rear parking aid and rear lid kick sensor . Check function.	S/N \$ 360.00 ✓
2	To dismantle and renew rear bumper. Re-organize rear crash management components. Inspect for further damages. Reinstall all parts removed.	\$ <del>1,050.00</del> 500
3	To respray rear bumper.	\$ <del>900.00</del> 550
4	To remove and renew rhs exhaust silencer and centre silencer align to position.	S/N \$ 480.00 ?
5	To carry out diagnostic check.	S/N \$ 192.00 ✓
TOTAL LABOUR CHARGES		: \$ <u>2,982.00</u>

# Premium Automobiles

55 Ubi Road 1, Singapore 408699

Tel : 6366 2323 Fax : 6841 1183

## Telefax

### Material List for Accident Vehicle Regn No. SJM 8833 Z.

S/N	Parts Description	Damage Parts & Prices	
		S/NETT	REMARKS
1	REAR BUMPER <i>del d</i>	\$ 2,190.00	✓
2	REAR BUMPER FIXING PARTS <i>3 new</i>	\$ 142.00	+
3	REAR BUMPER SECURING STRIP	\$ 191.00	+
4	REAR BUMPER CHROME TRIM <i>cut</i>	\$ 878.00	✓
5	REAR BUMPER CLIP <i>new</i>	11 \$ 407.00	+
6	REAR LIGHT REFELCTOR-LH/RH <i>RH cut</i>	2 \$ <del>70.00</del> 35	
7	REAR BUMPER CARRIER ?	\$ 786.00	?
8	REAR BUMPER SEAL ?	2 \$ 24.00	?
9	REAR BUMPER GUIDE SECTION-RH <i>new</i>	\$ 37.00	✓
10	REAR BUMPER UPPER GUIDE SECTION-RH <i>new</i>	\$ 19.00	+
11	REAR SENSOR <i>new</i>	2 \$ 421.00	+
12	REAR SENSOR SEAL RING <i>new new</i>	4 \$ 14.00	+
13	REAR SILENCER ?	\$ 789.00	?
14	REAR SILENCER DUAL CLIP ?	3 \$ 128.00	?
15	REAR SILENCER-CENTRE ?	\$ 801.00	?
16	REAR SILENCER DUAL CLIP ?	\$ 43.00	?
17	SUNDRIES ?	\$ 300.00	
<b>TOTAL SPARE PARTS</b>		<b>\$ 7,240.00</b>	
<b>TOTAL LABOUR CHARGES</b>		<b>\$ 2,982.00</b>	
<b>GRAND TOTAL</b>		<b>\$ 10,222.00</b>	

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

## Telefax

Name : Adrian Ling  
Surveyed Date : 17/10/18  
Authorised Date :  
Excess Cost :  
Liability :  
Remarks : Authorised Repairs, 03 Days.

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:

**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

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	20 Oct 2018		17 Oct 2018 13:57 <a href="#">Edit Adj Rpt</a>	<b>S\$4,705.00</b> <a href="#">Edit Estimates</a>	<b>S\$4,705.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by insurer]</span>									
Insured: <b>DIANA OW CHOY CHEE</b> , ID: S1344527C									
Vehicle Reg. No.: <b>SJM8833Z</b>		Date of Loss: 13/10/2018 19:00 - :59 [4 Months and 7 Days From LTA Reg Date (Man Yr)]							
Claim Type: <b>OD / 4645601025SG</b>		Policy/Cover Note No.: 1800056429 (Comprehensive)							
Excess:									
Repairer: <b>Premium Automobiles Pte Ltd (UBI)</b> 55 Ubi Road 1, 408699 Ubi - Tel: 67689828/9827/9911									
Handling Insurer: <b>AIG Asia Pacific Insurance Pte. Ltd. (SG)</b> - Tel: 65-6419-3000 ... [Handled by <b>Loo, Tong Shing</b> ] TongShing.Loo@aig.com									
Adjuster: <b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>ADRIAN LING</b> ] ... [Final Rpt due 26/10/2018]									
Driver/Custodian: <b>TAN BOON LEE</b> (59 / Male), NRIC: S1394938G, Tel: +6597398726									
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

**\*SJM8833Z (4645601025SG)**  
**OD**  
**Oct 13 2018 7:10PM**  
**[DIANA OW CHOY CHEE]**  
**Premium Automobiles Pte Ltd**

Upload Documents			Upload Photos			Compose New Letter			Upload Video			Upload Audio			View		View in Browser	
Video															1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	Premium Automobiles Pte Ltd (UBI)													Thumbnail	Print		
1	15/10/18 11:21	Video - Accident [Linked Accident Report Documents]													Load AVI			
2	15/10/18 11:21	Video - Accident [Linked Accident Report Documents]													Load AVI			
Photos/Images															3 per page		<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)													Thumbnail	Print		
1	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
2	17/10/18 16:48	Chassis Number													Load JPG	<input checked="" type="checkbox"/>		
3	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
4	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
5	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
6	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
7	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
8	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
9	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
10	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
11	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
12	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
13	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
14	17/10/18 16:48	General View													Load JPG	<input checked="" type="checkbox"/>		
Documentation															1 per page		<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)													Thumbnail	Print		
1	17/10/18 16:47	DRIVING & CERT DOC.pdf													Load PDF			
2	17/10/18 16:47	ESTIMATE.pdf													Load PDF			

## Linked Accident Report Documents

															View		View in Browser	
Video															1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	Premium Automobiles Pte Ltd (UBI)											Thumbnail	Print				
1	15/10/18 11:21	Video - Accident											Load AVI					
2	15/10/18 11:21	Video - Accident											Load AVI					
Assessment Reports															1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	Premium Automobiles Pte Ltd (UBI)											Thumbnail	Print				
1	15/10/18 11:34	Accident Statement											Load HTM					
2	18/10/18 12:50	Addendum Sheet											Load JPG	<input checked="" type="checkbox"/>				
3	18/10/18 12:51	Accident Statement Addm. #1											Load HTM					
Photos/Images															3 per page		<input checked="" type="checkbox"/>	

Video				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Premium Automobiles Pte Ltd (UBI)		Thumbnail	Print
No	Finalized On	Premium Automobiles Pte Ltd (UBI)		Thumbnail	Print
1	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
2	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
3	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
4	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
5	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
6	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
7	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
8	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
9	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
10	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
11	15/10/18 11:25	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
12	15/10/18 11:28	ACCIDENT SCENE PHOTOS		Load JPG	<input checked="" type="checkbox"/>
13	15/10/18 11:28	ACCIDENT SCENE PHOTOS		Load JPG	<input checked="" type="checkbox"/>
14	15/10/18 11:28	ACCIDENT SCENE PHOTOS		Load JPG	<input checked="" type="checkbox"/>
Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Premium Automobiles Pte Ltd (UBI)		Thumbnail	Print
1	15/10/18 11:16	Sketch Plan		Load JPG	<input checked="" type="checkbox"/>
2	15/10/18 11:16	Sketch Plan #2		Load JPG	<input checked="" type="checkbox"/>

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			



# 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  
Singapore 079120

Our File No: CC3/AIG18018850/ASBE2

Date: 06/12/2018

### REFERENCE

Insured/Claimant: DIANA OW CHOY CHEE Policy No: 1800056429  
Date of Loss: 13/10/2018 Nature of Claim: OD Claim No: 4645601025SG

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SJM8833Z**  
Make & Model: AUDI A5, 2.0 SPORTBACK (A) Engine No: CVK061459  
Reg. Date: 06/06/2018 (Man. Year: 2018) Chassis No: WAUZZZF58JA098322  
Colour: Black Odometer: 6148 km  
Engine Capacity: 1984 cc  
Market Value/New Car Price: S\$170,000.00  
Sum Insured (S\$): **Market Value/New Car Price**

### CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes  
Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

### CONDITION OF TYRES

Front Tyre Size: 245/40 R18 Rear Tyre Size: 245/40 R18  
Front Left Side: Pirelli 6 mm Rear Left Side: Pirelli 6 mm  
Front Right Side: Pirelli 6 mm Rear Right Side: Pirelli 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	7,240.00	3,103.00	4,137.00	57.14
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,982.00	1,602.00	1,380.00	46.28
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>10,222.00</b>	<b>4,705.00</b>	<b>5,517.00</b>	<b>53.97</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>715.54</b>	<b>329.35</b>	<b>386.19</b>	<b>53.97</b>
<b>Nett Amount (S\$)</b>	<b>10,937.54</b>	<b>5,034.35</b>	<b>5,903.19</b>	<b>53.97</b>

### INSPECTION

Date of Assignment: 17/10/2018  
Date Inspected: 17/10/2018 Inspected At: Premium Automobiles Pte Ltd (UBI)  
55 Ubi Road 1  
Singapore 408699  
Estimated Period of Repair: 3.0 days

Adjuster: ADRIAN LING

Manager: Hiew May Fung

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.



(REPAIR COST NOT CONCLUDE)  
(EXCLUDE CHECK ITEMS S\$3,351.00 NETT)

## REPAIR DETAILS

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Deformed	2,190.00 FS	*2,190.00 FS
2	1		*REAR BUMPER FIXING PARTS	Not Necessary	142.00 FS	*- FS
3	1		*REAR BUMPER SECURING STRIP	Not Necessary	191.00 FS	*- FS
4	1		*REAR BUMPER CHROME TRIM	Cut	878.00 FS	*878.00 FS
5	11		*REAR BUMPER CLIP	Not Necessary	407.00 FS	*- FS
6	1		*REAR LIGHT REFLECTOR - LH/RH	O/S Cut	70.00 FS	*35.00 FS
7	1		*REAR BUMPER CARRIER	* Check	786.00 FS	*- FS
8	2		*REAR BUMPER SEAL	* Check	24.00 FS	*- FS
9	1		*REAR BUMPER GUIDE SECTION - RH	Not Necessary	37.00 FS	*- FS
10	1		*REAR BUMPER UPPER GUIDE SECTION - RH	Not Necessary	19.00 FS	*- FS
11	2		*REAR SENSOR	Not Necessary	421.00 FS	*- FS
12	4		*REAR SENSOR SEAL RING	Not Necessary	14.00 FS	*- FS
13	1		*REAR SILENCER	* Check	789.00 FS	*- FS
14	3		*REAR SILENCER DUAL CLIP	* Check	128.00 FS	*- FS
15	1		*REAR SILENCER - CENTRE	* Check	801.00 FS	*- FS
16	1		*REAR SILENCER DUAL CLIP	* Check	43.00 FS	*- FS
17	1		*SUNDRIES	* Check	300.00 FS	*- FS
Total Parts (S\$)					7,240.00	3,103.00

F=Franchise part. S=SpcNett.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<b>Labour Items</b>				
1	TO REMOVE AND TRANSFER REAR PARKING AID AND REAR LID KICK SENSOR. CHECK FUNCTION	New	360.00	360.00
2	TO DISMANTLE AND RENEW REAR BUMPER. RE-ORGANIZE REAR CRASH MANAGEMENT COMPONENTS. INSPECT FOR FURTHER DAMAGES. REINSTALL ALL PARTS REMOVED	New	1,050.00	500.00
3	TO RESPRAY REAR BUMPER	New	900.00	550.00
4	TO REMOVE AND RENEW RHS EXHAUST SILENCER AND CENTRE SILENCER ALIGN TO POSITION (* Check)	New	480.00	0.00
5	TO CARRY OUT DIAGNOSTIC CHECK	New	192.00	192.00
Gross Labour Cost (S\$)			<b>2,982.00</b>	<b>1,602.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >