From (Person):	May chua	of	FCI	Date	Time: 13/11/1804-44P0
Estimated Cost:	TP RES / OD RES / I				
To Inspect Vehic at Workshop m/s of		N-51 Auto			344, 39704
Policy No:		-1 /1.02	Claim No:	D18008	2046MPSH
Sum Insured:			Excess:		
Make of Veh:			Excess: _	D.O.	A 10/11 2018
Make of Veh: Client's Record)	EP. / REV 24 HRS	(up			A. 10/11 2018 14/11 2018 D.D. Endorsement:
Make of Veh: Client's Record)	ep. / rev 24 hrs 5 ept 0 3/11 10	(up) Person Contacted:		н.е	14/11/2018
Make of Veh: Client's Record) CA / REV / R Date/Time: 4	sepmo13/11/11	Person Contacted:	Salbrir	н.е	14/11/2018 O.D. Endorsement:
Make of Veh: Client's Record) CA / REV / R Date/Time: 4	Septro 13/11/11	Person Contacted	Salbrir	н.е	14/11/2018 O.D. Endorsement:
Make of Veh: Client's Record) CA / REV / R Date/Time: 4*	sepmo13/11/11	Person Contacted: X) Estimat - X CCA / A XA	Sabrir	H.e Vehicl	14/11/2018 O.D. Endorsement:

ASSIGNMENT

From:	Date: 14/11/18	Veh No: SkT 3259R	Yr Regn: 29 May 2015
Estimated Cost:		Type: M.Car / M.Cycle / Bus / Van / Lo	
1	OD RES / EVA / INV / MV	Truck / Trailer or	
To Inspect Vehicle No:	SKT 3259R	Make: Audi Q5	c.c 1984
	N-51 Automotive	colour white	A/C: Insured / Std / NI / NA
	Bukit Ave 2 # 01-18	Sp.Reading 71190	T/Radio: Insured / Std / NI / NA
Insured:		Eng/No:	(P)
Policy No.		CINO: WAUZZZER	17EA 125757
Claims No.		Gen. Cond: 6600 / Fair / Poor / Burnt	
Sum Insured:	Excess:	Steering: I orde / Jammed / Leaked /	Burnt or
(Client's Record)		Brake: Ihorder / Jammed / Leaked /	Burnt or
Make of Veh:		Modi: Nil S/Rip / STD A/Rim or	
		Tyre Size: F: 235 55 21	9
(Policy Condition)		R: -	11 M
Remark: The veh had o	commenced its N/S O/S time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / TOYO / YOKO or	MIC OHTSU / PIR / SUMI /
William States	X	Front	Rear
Bal. or Market Value:	Consistent? : Yes or No	R/Bal. 6 mm	R/Bal. 6 mm
IDAC Accident Rport:	Consistent? : Yes or No	L/Bal. 6 mm	L/Bal. (mm
GIA / PR Seen:	20 99 2	D.O.A.10 /11/2018	D.O.I. 14/11/18 10-482
Est. Repairs:	44,5		@ 1055
Lum Sum:	TO THE RESIDENCE SHARE SHARE SHEET	Survey held at	Those are the second of the se
CA / REV / REP.	/ 24 HRS (W) Vehicle: IN / OUT	Des. of Damages : Frt / Rear / O/S	T(N/S) / U/C / Roontop or
Date:	Person Contacted:	The U/C / Chassis frame / Body	Structure affected due to collision.
Date / Time Action	on / Instruction		
MN	-\$120,000 mm		
PV	- 890, 190 / 1a	111/2018	
NV	- \$ 29,810 [/	1.1, .	
	<u> </u>		
Date/Time, File Pass to?	: Preli. Report	Days Of Repair:	· -
1)	: Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?		. C	Transportation:
2)	Add Fee)S+RSSI
		: Interview (\$) Photos
Company of the Control of the Contro	200		
Report Format :	PRR.	Tech. Invs (\$) Others
Lump Sum / I.B.I:		Tech. Invs (\$) Others



MS First Capital Insurance Limited to Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

12-11-2018

Our Ref No. D18008046MFSH

Accident Date

10-11-2018

Claim Type. Third Party

Insured Vehicle

SHC3970U

Third Party Vehicle. SKT3259R

Survey Location

2 KAKI BUKIT AVENUE 2 #01-18 KAKI BUKIT AUTOHUB

Contact Person.

ELYNN

Contact No.

68420051/67410510

Fax No. 67410510

Survey Type

WITHOUT PREJUDICE:

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

N-51 AUTOMOTIVE PTE

Attention, NIL

Cc : TP Solicitor

LTD NA

TP Solicitor Fax No. NA

Officer Incharge

MAY CHUA

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

MSME18145637-01 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 10/11/2018 13:54 SUBMITTED BY: Chia Pei Ying

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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 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.

- This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurence 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.

aloresalo.	
· · · · · · · · · · · · · · · · · · ·	ACCIDENT STATEMENT
Date Of Report	10/11/2018 13:54
Date Of Accident	10/11/2018 10:20
Exact Location Of Accident	SAM LEONG RD DOUBLE YELLOW LINE BEFORE PARKING LO
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKT3259R
Insured/Policyholder	
Name Of Registered Owner	LIN HANWEI
NRIC No	S8218694H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96941642
Alternative Phone No	OFFICE-96941642
Vehicle Particulars	
Manufacturer	AUDI
Model	Q5
Exact Purpose for which vehicle was being u time of accident	used at
Are you claiming under your own insurance p for repair to your vehicle?	policy NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPC17S017050
Cover Note Number	
Driver	
Name of Driver	LIN HANWEI
NRIC No	S8218694H
Date Of Birth	16/06/1982
Occupation	INDOOR
Date Of Driving Pass	27/07/2005
Driving Experience	13 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	+65-96941642
Fax Number	

OFFICE-96941642

NOEMAIL

Address

31 JURONG WEST ST 41 #06-30

Postcode

649412

Was driver an employee of the Insured's Company NO

OWNER If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - OPENING DOOR OF VEHICLE

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?

YES

Was any other material or property damaged? 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

I WAS DRIVING STRAIGHT ALONG SAM LEONG ROAD. SINGLE WAY WITH PARKING LOTS AT BOTH LEFT AND RIGHT. WHILE TRAVELLING STRAIGHT AHEAD, WHILE APPROACHING LOT 14, SUDDENLY A VEHICLE ON THE LEFT DOOR SWING OUT AND HIT ONTO THE LEFT SIDE OF MY VEHICLE WHILE I AM MOVING FORWARD. I ALIGHTED FROM MY VEHICLE AND REALISED IT WAS A VEHICLE WITH LICENCE PLATE (SHC3970U) PASSENGER AT THE BACK OPEN THE DOOR ON THE RIGHT REAR PASSENGER DOOR WITHOUT CHECKING ONGOING VEHICLE THAT CAUSES THIS COLLISION. THE WHOLE ACCIDENT FOOTAGE WAS CAPTURED BY MY IN-CAR CAMERA.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH TP WORKSHOP

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC3970U

Vehicle Make/Model/Colour

Details Of Properties

VEHICLE B

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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)

Lunderstand, 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 discinsure 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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

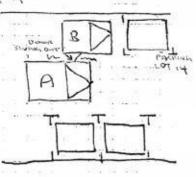
N51

Sketch Plan #2 Pg. 1

24	ΕI	CH	211	4.7%

ALONG SAM GEONG ROAD BEHND LOT 14

VEHICUS B - SKT 3250R



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

L way	a Delvin Straight Acoust SAM LEONE ROAD, STNELS WAY
milh	PARIUNA LOTS AT BOTH LEFT AND MIGHT.
WHILE	TRANSCLUS STRAIGHT ALLEAD, WHILE APPROACHING COT 14
5000	ENLY A VALUE ON THE CEFT, THE DOOR SWININ ON
and	WIT ONLD THE PETS DE DE WY ASTRON MINE I'M
movi	NL FORWARD.
94161	BUTTED FROM MY JAMES COME BANGER EM MOSTI COSTILLE
WITH	LICENCE PLATE NUMBER (SHC 39704), PASSENGER AT
TI-Vic	BACK OPEN THE DOOR ON THE RIGHT PAPE PRESENCER
DOOR	WITHOUT CHECKING ON GUING VEHICLE THAT COMES THE
ou	No.
THE	WHOLE Aceban poolsels was carried by my in-con
CAMA	LR A .
Utobal	WE A - SKT 3259R
USHA	cur B- SHC 3970 U

DECLARATION

I/We declare the foregoing particulars are true in every respect,

Policyholder's Signature

Date & Time:

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	8694H
Vehicle No.:	SKT3259R
Vehicle to be Exported:	No
ntended Deregistration Date:	14 Nov 2018
Vehicle Make:	AUDI
Vehicle Model:	Q5 2.0 TFSI QUATTRO (EU6)
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	CNC057305
Chassis No.:	WAUZZZ8R7EA125757
Maximum Power Output:	165.0 kW (221 bhp)
Open Market Value:	\$44,911.00
Original Registration Date:	29 May 2015
First Registration Date:	29 May 2015
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$54,876.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 May 2025
PARF Rebate Amount: Intended COE Rebate Details	\$41,157.00
COE Expiry Date:	28 May 2025
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$78,001.00
COE Rebate Amount:	\$49,033.00
Total Rebate Amount:	\$90,190.00

The information contained herein is correct as at 14 Nov 2018

ОК

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Selling This Head Turning, Well Serviced Convertible For A New Family Car.

Direct Owner StarAd



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Audi Q5 2.0

Model

Price

Depreciation

Reg Date

Eng Cap

Advanced Search Mileage

Search Selection

Audi Q5 2.0

Any

Any

2015

Any

Any

Audi Q5 2.0A TFSI Quattro

\$123,800

\$14,920 /yr

30-Apr-2015

1,984 cc

53,300 km

\$0 Drive Away! Bank Interest Rate From 1.98%! Fully Maintained By Audi, Free 1 Year Warranty With Certified 120 Points Test Reg. Chassis Inspection. Package With Free 1st Year Insuranc...

Dynamic Motoring

Posted: 12-Nov-2018 Tags: 2015 Audi Q5, 2015 audi q5, Audi Q5, audi q5, Audi, Q5, q5, Used Audi



Audi Q5 2.0A TFSI Quattro

\$129,800

\$15,380 /yr

30-Jun-2015

1,984 cc

47,000 km

In House Finance Or Bank Loan Available, Last Service In April 2018. Full Agent Service Record! High ARF And COE Value! Current \$92000. Very Worth Buying. Low Mileage And Very Well Main...

Speedo Motorina

Posted: 13-Nov-2018 Tags: 2015 Audi Q5, 2015 audi q5, Audi Q5, audi q5, Audi, Q5, q5, Used Audi



Audi Q5 2.0A TFSI Quattro

\$135,800

\$15,760 /yr

29-Sep-2015

1.984 cc

36,000 km

Up To 90% Loan Or 30% Down Payment \$40k. Monthly \$1399 x 82 Months. 1 Owner. Road Tax Until Mar/2019, Low Mileage Done Premium Auto Maintained. Previous Owner Top Up \$10k For Higher Spe...

In-Carz Credit Pte Ltd

Posted: 12-Nov-2018 Tags: 2015 Audi Q5, 2015 audi q5, Audi Q5, audi q5, Audi, Q5, q5, Used Audi

Save this search criteria, to get email alerts whenever a match is found.

Make

Model

Eng Cap

Mileage

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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

MS	FIRST CAPITAL IN	SURANCE LTD	Ref. CS3/FCI1802053	9/Jcd3s2
	ROBINSON ROAD -01 CITY HOUSES	INGAPORE 068877	Date: 22-11-2018	
			Code: FCI2	
1.	THE REST	Policy Particul	ars :- (THIRD PARTY CLAIN	A)
	Insured Veh.	SHC 3970U	Veh. Inspected	SKT 3259R
	Policy No.		Coverage (\$)	0.00
	Claim No.	D18008046MFSH	Excess (\$)	0.00
	Assign From	MAY CHUA	Assign Date	13/11/2018
2.		Vehicle F	Particulars & Condition	
	Make & Model	AUDI Q5	c.c	1984
	Engine No.	HIDDEN	Year of Reg.	2015
	Chassis No.	WAUZZZ8R7EA125757	Colour	WHITE
	Odometer	71190 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Co	nditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	235/55R19	MICHELIN	6 mm
	L/H Front Tyre	235/55R19	MICHELIN	6 mm
	R/H Rear Tyre	235/55R19	MICHELIN	6 mm
	L/H Rear Tyre	235/55R19	MICHELIN	6 mm
4.	P. Michael	Desc	ription of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE	N/S BODY.	
5.		Ger	neral Information	SWEET SECTION
	Accident Date	10/11/2018	Inspect Date / Time	14/11/2018 (10:44 AM)
	Survey held at N-51 AUTOMOTIVE PL			
		2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT AUTOH SINGAPORE 417921	UB	
5a.			Remarks	PERSONAL PROPERTY.
	B) THE REPAIR E THE REPAIRER V	STIMATE WAS NOT PRESEN IAS TOLD TO PREPARE THE EASE FIND DAMAGED VEHIO	"WITHOUT PREJUDICE" BASIS TED AT THE TIME OF INSPEC ESTIMATE. CLE PHOTOGRAPHS.	S. TION.

Report Ref No. CS3/FCI18020539/Jcd3s2

Inspected By

00

ONG HWEE JIE

to

K.K.LAU CPT(RET)

Automotive Assessor

BEng(Hons), B.Bus, MBA, PEng, PE, MinstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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