

ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.

Tel: 6453 8686 (3 Lines) Fax: 6459 6550

Company Reg. No.: 201113667N

GST Reg. No.: 201113667N

Vehicle Insured : SLB6911D
Accident Date : 09-Nov-2018
Our Ref : 218189 (AIG) / CHAN

No. : 05883

Date : 13-Nov-2018

PAGE : 1

QUAH TUANG KIT @ LEE TUANG KIT
BLK 234 HOUGANG AVENUE 1
#04-262
Singapore 530234

ESTIMATED COST OF REPAIR FOR AUDI A4 1.4 TFSI SKQ3666P

| | | |
|------|---------------------------|--------|
| 1 pc | Rear bumper fascia | 885.00 |
| 1 pc | Rear bumper lower spoiler | 154.00 |
| 1 pc | Rear o/s bumper reflector | 46.00 |
| 1 pc | Rear bumper reinforcement | 380.00 |

1,465.00

Less 10% : 146.50

1,318.50

To putty and spray replaced parts

500.00

To remove, cut-out damaged parts,
panel beating, welding, align,
refix and to renew above parts

550.00

Total : S\$ 2,368.50

=====

Singapore Dollars Two Thousand Three Hundred
and Sixty Eight and Cents Fifty Only

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 | 12/11/2018 17:36 |
| Date Of Accident | 09/11/2018 19:20 |
| Exact Location Of Accident | STILL ROAD / MARINE PARADE ROAD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SKQ3666P |
|-----------------------------|----------|

Insured/Policyholder

| | |
|--------------------------|--------------------------------|
| Name Of Registered Owner | QUAH TUANG KIT @ LEE TUANG KIT |
| NRIC No | S0164076C |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-90628293 |
| Alternative Phone No | OTHERS-90628293 |

Vehicle Particulars

| | |
|--|-------------|
| Manufacturer | AUDI |
| Model | A4 1.4 TFSI |
| 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? | NO |
| If No, Please state action to be taken | THIRD PARTY |
| 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 | 1700087591 |
| Cover Note Number | |

Driver

| | |
|----------------------|--------------------------------|
| Name of Driver | QUAH TUANG KIT @ LEE TUANG KIT |
| NRIC No | S0164076C |
| Date Of Birth | 22/02/1951 |
| Occupation | INDOOR |
| Date Of Driving Pass | 03/02/1970 |
| Driving Experience | 48 YEARS AND 9 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90628293 |
| Fax Number | |
| Contact Number | OTHERS-90628293 |
| EMail Address | NOEMAIL |

| | |
|---|----------------------------------|
| Address | BLK 234 HOUGANG AVENUE 1 #04-262 |
| Postcode | 530234 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| 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 | AFTER RAIN |
| 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? | NO |
| 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) | 3 |
| Passenger 1 | NAME: : TIANG LENG ING GENDER: : FEMALE |
| Passenger 2 | NAME: : ANG PEI YEE 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

REFER TO SKETCH PLAN.

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 | SLB6911D |
| Vehicle Make/Model/Colour | NISSAN / WHITE |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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:

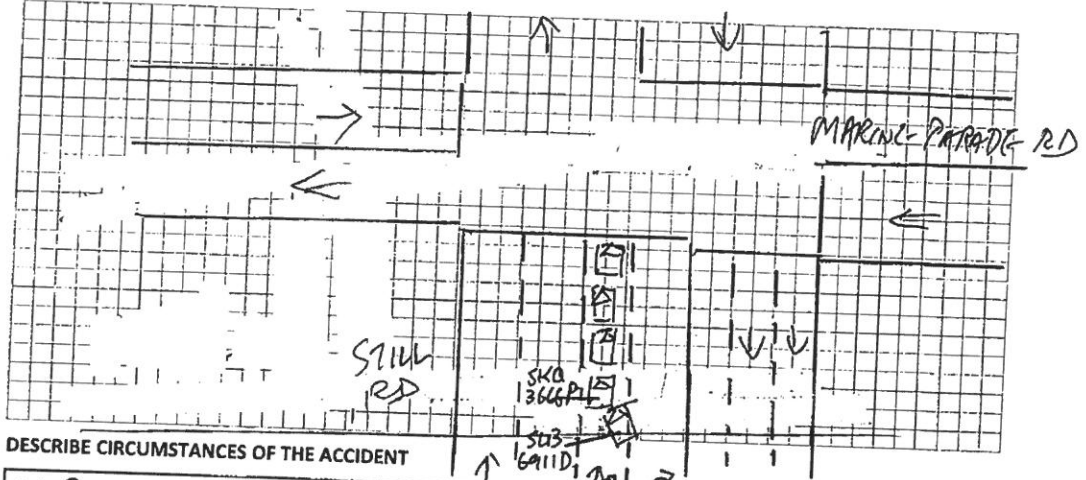
12/11/18

GIA/RCM SketchPlanForm_V3

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

Reporting Centre Personnel's Signature
Name: Jenny Lim
NRIC/FIN No.: S6927273H

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 9-11-2018 AT AROUND 7-20 P.M, I WAS DRIVING ALONG STILL RD ON THE 2ND LANE FROM MY RIGHT, MY VEHICLE WAS STATIONARY AND WAITING FOR FRONT VEHICLE TO MOVE DUE TO IN THE QUEUE OF TURNING TO MARINE PARADE RD, WHILE WAITING SUDDENLY I FELT AN IMPACT FROM THE REAR OF MY VEHICLE, I COME OUT FROM MY VEHICLE TO CHECK AND FOUND DAMAGE ON MY VEHICLE REAR, I ASK FOR THE CONTACT NO. TO TELL HIM WILL CALL HIM HOW MUCH MY REPAIR, AFTER THE NEXT I SEND MY VEHICLE TO WORKSHOP FOR ACCESS THE DAMAGE, AFTER I TOLD HIM THE AMOUNT AND HE TOLD ME TO CLAIM FROM THE INSURANCE COMPANY.

DECLARATION

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

Policyholder's Signature
Date & Time: 12/11/18

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

Reporting Centre Personnel's Signature
Name: Jenny Lim
NRIC/FIN No.: S6927273H

GIARMC SketchPlanForm_V3



CERTIFICATE OF INSURANCE

AUDI AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : QUAH TUANG KIT @ LEE TUANG KIT
Period of Insurance : 11 Dec 2017 To 10 Dec 2018
Engine No. : CVN049863
Chassis No. : WAUZZZF4XJA041949

Vehicle No. : SKQ3666P
Policy No. : 1700087591
Endorsement No. :
Issued Date : 21 Dec 2017

ABOUT THE COVER

Make/Model : AUDI A4 1.4 TFSI S tronic
Engine Capacity/Tonnage : 1,395.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
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 - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

QUAH TUANG KIT @ LEE TUANG KIT - \$600 (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 or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OVERSEA-CHINESE BANKING CORPN LTD

I/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).

0504125256

PREMIUM LEASING-LSYA

281 ALEXANDRA ROAD AUDI CUSTOMER SERVICE CENTRE
SINGAPORE 159938

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Monik

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

Steffany Loh

Owner Particulars

NRIC/Passport/Company Cert No.: S0164076C
Owner ID Type: Singapore NRIC
Owner Name: QUAH TUANG KIT @LEE TUANG KIT
Registered Address: APT BLK 234 HOUGANG AVENUE 1 #04-262 SINGAPORE 530234
Mailing Address: -
Birth Date: 22 Feb 1951

Vehicle Particulars

Vehicle No.: SKQ3666P
Previous Vehicle No.: -
Effective Date of Ownership: 11 Dec 2017
Original Regn Date: 11 Dec 2017
Registration Date: 11 Dec 2017
Year of Manufacture: 2017
Vehicle Type: Passenger Motor Car
Vehicle Scheme: -
Vehicle Attachment 1: No Attachment
Vehicle Attachment 2: -
Vehicle Attachment 3: -
Vehicle Make: AUDI
Vehicle Model: A4 1.4 TFSI S TRONIC
Primary Colour: Black
Secondary Colour: -
Passenger Capacity: 4
Chassis No.: WAUZZZF4XJA041949
Engine No.: CVN049863
Engine Capacity / Power Rating: 1395 cc / -
Maximum Power Output: 110.0 kW (147 bhp)
Propellant: Petrol
Max Unladen Weight: 1450 kg
Maximum Laden Weight: 1945 kg
Open Market Value: \$32,726.00
PARF Eligibility: Yes
PARF Eligibility Expiry Date: 10 Dec 2027
Minimum PARF Benefit: \$13,908.00
No. of Transfers: 0
IU Label No.: 1128107629
COE No.: 2017120103002236M
COE Expiry Date: 10 Dec 2027
COE Category: B - Car above 1600cc or 97kW (130bhp)
COE Registration Category: B - Car above 1600cc or 97kW (130bhp)
Quota Premium (QP) / Prevailing Quota Premium: \$57,390.00 / -
Actual QP Paid: \$57,390.00
QP (Regn Cat): \$57,390.00
OPC Cash Rebate Eligibility: No
QP during COE Bidding Exercise: \$57,390.00
Additional Registration Fee Rate: First \$20,000.00 (100%), next \$12,726.00 (140%)
Actual ARF Paid: \$27,817.00
Vehicle Lifespan Expiry Date: No Lifespan
CO2 Emission: 119.00 (g/km)
CEV/VES Rebate Utilised Amount: \$10,000.00
CO Emission: -
HC Emission: -
NOx Emission: -
PM Emission: -
Message: To renew the COE, the Prevailing Quota Premium payable is that of Category B.

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OK

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