ASSIGNMENT

From Date:	Veh No: SKX922+E (r.Regn: 2015 Augn)
Estimated Cost:	Type-M.Gar / 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: Audi Q5 cc 1984
at Workshop m/s	Colour Black - A/G: Insured / Std / NI / NA
of	Sp.Reading 438 + 8 T/Radio: Insured / Std / NI / NA
	Eng/No:
Policy No.	CINO: WAUZZZ8 ROFAOZZ 746
Claims No.	Gen. Cond: Good Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inforder/ Jammed / Leaked / Burnt or
(Client's Record)	Brake: horder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil S/Rim STD A/Rim or
	Tyre Size: F: 235/55219.
(Policy Condition)	R: 235/55R19.
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU (PR) SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. Ob mm R/Bal. of mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. 06 mm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 20/04/20
Lum Sum: % 3 Val.: Yes or No	Survey held at Reminn.
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	Thes ofs.
Date: Person Contacted:	The U/C / Chassis frame F Body Structure affected due to collision.
Date / Time Action / Instruction	
ον πίζη.	
mv: 100k.	
PV: 76.2K	
Nett: 23.8K	
Dale/Time, File Pass to? : Preli. Report	Days Of Repair:
) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add Fee	: : Site Insp (\$)s+Pssi
	: Interview (3) Fhelos
Pepori, Formes:	:Tech, lays (5) olien
Lenny Fran / LPJ: cs	:"//teat says (2
	7/14.

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 21/04/2020 13:39

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 <u>truthful and accurate</u> 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.
- 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	20/04/2020 15:31
Date Of Accident	18/04/2020 10:15
Exact Location Of Accident	MARINA BOULEVARD JUNCTION
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKX9224E
Insured/Policyholder	
Name Of Registered Owner	PREMIUM LEASING PTE LTD
Co Reg No	2XXXXX676M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91895414
Alternative Phone No	OFFICE-91895414
Vehicle Particulars	
Manufacturer	AUDI
Model	Q5 SPORT 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	YES
200 90 0	

Driver

Policy Number Cover Note Number

Name of Driver SYLVIO DE ANDRADE COUTINHO

 Passport No/FIN
 GXXXX054X

 Date Of Birth
 05/06/1979

 Occupation
 INDOOR

 Date Of Driving Pass
 11/07/1997

Driving Experience 22 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91895414

Fax Number Contact Number

EMail Address SYLCOUT@GMAIL.COM

82 GRANGE ROAD Address

#02-01

249587 Postcode

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

2

NO

NO

5

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 (including own vehicle)

involved in the accident

Was any body injured in the Accident?

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. Number of Passengers (Including Driver)

Passenger 1

NAME: : SYLIO

GENDER: : MALE

Passenger 2

NAME: : CATARINA

GENDER: : FEMALE

Passenger 3

NAME: : ELISA

GENDER: : FEMALE

Passenger 4

NAME: : SYLVIO FILHO

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

YES

Police Station Name

TRAFFIC POLICE DIVISION HQ

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT

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

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

NAJUNKNOWN

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process
- 2 The 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.
- 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 faise 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.
- 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 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

14:10 hrs

Reporting Centre Personnel's Signature Name: Tany Fass

NRIC/FIN NO. WYUNG

Sketch Plan #2

SKETCH PLAN				
				A = 5 lex 9224
				8: Unknown
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT			
flease	Refer to	the	Police	Report
		/		
	/			
	/			
DECLARATION I/We declare the foregoing part	iculars are true in every respect.	W.	E C	S VIII
Policyholder's Signature Date & Time:	Pover's Signature (If driver is not the policyho Date & Time: 20/04/202		Reporting Centre Person Name: Unit Foots NRIC/FIN No.: U. 24	nel's Signature Mg10 7 4

Police Report





Police Station Of Origin Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No. 65470000 1 of 3 Report No. 1-20200418/7008

REPORT	OF I	A TRAFFIC	ACCIDENT
	-		THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COL

Date/Time Report Made: 18/04/2020 17:01		Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars			
SYLVIO		ADE COUTINHO	Address: APT BLK 6 TAI THONG RESIDENCES SINGAP	CRESCENT #03-04 THE VENUE	
ID Type FIN NO	/ ID No.: / G381305	ıx	Contact No.: Home-Office: Mobile: 91895414		
National BRAZILI	ity: IAN		Email: sylvio@teakrc.com		
Sex: Male	Age: 40	Date of Birth: 05/06/1979	Type of Informant: Driver		
Race: Others		Language: English	Institution / School Name:		
Occupation: Chief operating officer/General Manager			Driving Licence Informat Class:	lion: Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No.	Date/Time of Accident 18/04/2020 10:20	Type of Locatio Bend
Location: MARINA BOL	ULEVARD	Road Surface:		Road Speed Limit
		Dry	1	rioed apeed Limit.
Clear Traffic Flow: One Way				Traffic Volume:

Details of Vehicle Involved							
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger	
SKX9224E	Car	AUDI	A5	Black	Slightly Damaged	5	

Details of Person Involved	· · · · · · · · · · · · · · · · · · ·
Any Pedestrian Involved; No	
No. of Pedastrians Injured; NIL	Use of Pedestrian Crossing: NA

Police Report





Police Station Of Origin:

Traffic Police

10 Upi Avenue 3 SINGAPORE 408666 Tel No: 55470000

2013 Recort No. Tr20200418/7608

CONTINUATION OF REPORT

Date Treatment	NIL Ind Medical Leave NIL	Date Discharge Degree of Injury	NIL	
Hospital/Clinic	NIL	Class Drivin Licent Expiry	g	Class: NII. Date of Expiry: NII.
Related Vehicle	SKX9224E (Car)	Conta	et Na.	91895414
Driver Name	SYLVIO DE ANDRADE COUT			G3813054X

Brief Details.

The traffic light turned green, I was supposed to turn left but I mistook the way and went straight, I was on the traffic light turned green, I was supposed to turn left but I mistook the way and went straight, I was on the third lane that could either turn left or go the second lane (meant to turn left) the other vehicle was on the third lane that could either turn left or go

the second and place one.

After the accident I drove a little further to get away from the lane and stopped the car on the left side.

After the accident I drove a little further to get away from the lane and stopped the car on the left side after the junction. But the other vehicle turned left and we couldn't get each others information, it was a white Cayenne.

Police Report





Police Station Of Origin Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 Report No. 1/20/200416/7008

CONTINUATION OF REPORT

Sketch Plan

MPHS

informent is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time; 18/04/2020 17:01
Officer In Charge Of Case. TP / TPIS / NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:
Authentication Stamp	

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

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

WIP: 35386

Telefax

 Estimate
 : Accident Repairs

 Workshop
 : Ubi Road 1

 Contact No
 : 6366 2323

 Fax No
 : 6841 1183

Reference : PA/OD/0381/2020/NS

Date : 20-Apr-20

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 : Premium Leasing Pte Ltd

Address : 55 Ubi Road 1

Singapore 408699

Telephone : +6563662323
Type of Claim : Own Damage Claim

Policy No. :

Vehicle No : SKX 9224 E

Model Code : Audi Q5 Sport 2.0 TFSI qu

Model / Year : Aug-15
Engine No : CNC 069620

Chassis No : WAUZZZ8R0FA022746

Mileage : Date In : -

Estimated By : Johnny Boo / Allan Wu

Accident Date : 18-Apr-20

Place of Accident : Marina Boulevard Junction

55 Ubi Road 1, Singapore 408699

Telefax

Estimated Labour Charges for Accident Vehicle.SKX 9224 E

S/N	Nature of Jobs		Estimated Charges	R	Surveyor Recommend	
1	To remove and reinstall rear parking aid. Check function and renew according to damage.	S/N	\$ 280.00	/	/	
2	To dismantle and renew rear bumper. To repair rhs rear fender. Re-organise rear crash management components. Reinstall all parts removed.		\$ 1,600,60	7	223	(()
3	To respray rear bumper, rear bumper lower spoiler and rhs rear fender.		\$ 3,000.00		Burger	550
4	To carry out diagnostic check.	S/N	\$ 192.00	/	Spoiler	400
	TOTAL LABOUR CHARGES	:	\$ 5,072.00			יע ו

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

Telefax

Material List for Accident Vehicle Regn No. SKX 9224 E

		Damage Parts & Prices
S/N	Parts Description	S/Nett Remarks
1	REAR BUMPER Defoned	\$ 1,560.00 🗸
2	REAR BUMPER FIXING PARTS ZNE m	\$ 156.00 X
3	REAR BUMPER GUIDE SECTION - RH REAR	\$ 51.00 X.
4	REAR BUMPER SPOILER DILL	\$ 815.00
5	REAR BUMPER CARRIER NE M	\$ 617.00 ×.
6	REAR BUMPER BRACKET HOLDER - LH / RH M 2	\$ 404.00 ×
7	REAR PARKING AID SENSOR 2	TBC ⊁
8	TAIL LIGHT - RH	\$ 282.00 人
9	LED BRAKE LIGHT CLUSTER - RH 14 M	\$ 1,371.00 🗶 .
10	WHEEL HOUSING LINER - RH Tom	\$ 248.00
11	WHEEL HOUSING LINER ATTACHMENT PARTS ?	\$ 98.00 ?
12	SUNDRIES 7	\$ 300.00
	TOTAL SPARE PARTS CHARGES :	\$ 5,902.00

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

Telefax

Name

: Adon hing.

Surveyed Date

:

Authorised Date Excess Cost

Liability

Remarks

: He Authorised, O4 Days.

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



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Audi Q5

Model

Any

2015

Any

Eng Cap

Any

Mileage

Sort by Date Posted

Any

Veh Type

Available

▼ 20 results/page

Search Selection

Audi Q5 2.0A TFSI Quattro

\$96,800

Απγ

Price

\$14,290 /yr

Depreciation

28-Feb-2015

1.984 cc

45,938 km

SUV

Available SPENION TO

\$0 Downpayment, 100% Loan Available. Facelift Model. New Road Tax. Extremely Low Mileage And Agent Maintained, Car In Excellent Condition Both Interior And Exterior, No Repairs Needed! 6 Months Warranty, View To Believe! Accident Free, High Trade In Available W..

Posted: 14-Mar-2020 Tags: 2015 Audi Q5, Audi Q5, Audi, Q5

Audi O5 2.0A TFSI Quattro

\$103,888

\$15,630 /yr

13-Mar-2015

1,984 cc 81,061 km SUV

Available

1 Owner! Agent Unit With Full Agent Serviced Records, Parked Indoor Almost Daily! 100% Accident Free! Optional For Additional Warranty! In House Financing And Instant In House Loan Approval, Hassle-Free Transaction! Call Now! Owner 2nd Car And Seldom Driv...

Posted: 23-Mar-2020 Tags: 2015 Audi Q5, Audi Q5, Audi, Q5

Audi Q5 2.0A TFSI Quattro

\$118,000

\$18,340 /vr

31-Mar-2015

1.984 cc

18,450 km

Available

Low Mileage (18,450km), Serviced By Audi Only, One Lady Owner, Tip Top Condition, Seldom Driven Second Car, Nice 3 Digit Number. Please Contact To Arrange Test Drive.

DIRECT OWNER

Posted: 13-Apr-2020 Tags: 2015 Audi Q5, Audi Q5, Audi, Q5



Audi Q5 2.0A TFSI Quattro

\$101,999

\$14,190 /yr

24-Nov-2015

1,984 cc

70,000 km

SUV

SUV

Available

Purchased From Authorized Preowned Audi Agent For Peace Of Mind Drive Away! No Ordinary 2.0T But A 221Bhp Dynamic Driving Experience Luxury German Engineered Machine With Spacious Seating For All! Musk Brown Exterior With Elegant Rare Wood Interior Tri...

PREMIUM AD

Premium Automobiles

Posted: 04-Apr-2020 Tags: 2015 Audi Q5, Audi Q5, Audi, Q5

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

Model

Price

Depreciation

Eng Cap

Mileage

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company Owner ID: 676M

Vehicle Details

Vehicle No.: SKX9224E Vehicle to be Exported: No

Intended Deregistration Date: 22 Apr 2020 Vehicle Make: AUDI

Vehicle Model: Q5 2.0 TFSI QUATTRO (EU6)

Primary Colour: Black Manufacturing Year: 2014 CNC069620 Engine No.:

Chassis No.: WAUZZZ8R0FA022746 Maximum Power Output: 165.0 kW (221 bhp)

Open Market Value: \$44,900.00 Original Registration Date: 28 Aug 2015

First Registration Date: 28 Aug 2015 Transfer Count:

Actual ARF Paid:

\$54,860.00 Intended PARF Rebate Details

PARF Eligibility: Yes PARF Eligibility Expiry Date: 27 Aug 2025

PARF Rebate Amount: \$41,145.00 Intended COE Rebate Details

COE Expiry Date: 27 Aug 2025

COE Category: E - Open Category

COE Period(Years): \$69,001.00 QP Paid: COE Rebate Amount: \$35,021.00

The information contained herein is correct as at 22 Apr 2020

Total Rebate Amount:

\$76,166.00