

ASS. REC. BY:

REF:

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: 1000

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SL22507M. Yr Regn: 2018, AprilType: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Andi Q5 C.C. 1984Colour: Grey. A/C: Insured / Std / NI / NASp. Reading: 12513 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WAU222FY9J 2129663Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 235/35R19.R: 235/35R19

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Continental.

Front _____ Rear _____

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 30/07/20Survey 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

OD ALG.

confirm repair cost of \$4690.80 @ 3 days of repairs.

MV: 150K RED: 7576.20; 61%PV: 73KNett: 77K.

Date/Time, File Pass to?



Preli. Report

1)



Final Report

Date/Time, File Return to?

2)

Report Format: _____

Temp. Sum / L.E. J.C. _____

Days Of Repair: 3

Resurvey No. of Trip: _____

Add Fee:



Site Insp (\$ _____)



Interview (\$ _____)



Tech. Insp (\$ _____)



Week end (\$ _____)

Survey Fee: _____

Transportation: _____

3 + RS. \$ _____

Photos _____

Others _____

TOTAL

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	24/07/2020 15:31
Date Of Accident	23/07/2020 08:55
Exact Location Of Accident	KK HOSPITAL CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLZ2507M
Insured/Policyholder	
Name Of Registered Owner	DISHA SINGHVI KHOSLA
Passport No/FIN	GXXXX401L
Email Address	DISHASINGHVI1@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96529225
Alternative Phone No	HOME-65257120

Vehicle Particulars	
Manufacturer	AUDI
Model	Q5-2.0 TFSI QUATTRO (A)
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	1800042897-01
Cover Note Number	

Driver	
Name of Driver	DISHA SINGHVI KHOSLA
Passport No/FIN	GXXXX401L
Date Of Birth	24/06/1981
Occupation	INDOOR
Date Of Driving Pass	01/06/2013
Driving Experience	7 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-96529225
Fax Number	
Contact Number	HOME-65257120
EEmail Address	DISHASINGHVI1@GMAIL.COM

Address	179 TANJONG RHU ROAD #10-26, TOWER E, WATERPLACE
Postcode	436608
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	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	2
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)	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

THE ACCIDENT HAPPENED AT THE CAR PARK OF KK HOSPITAL ON THE MORNING OF 23 JUL 2020. MY CAR STOPPED TO PARK AT A SPOT AND I TRIED TO REVERSE TO PARK. DURING THIS PROCESS, THE CAR COLLIDED WITH THE CAR BEHIND AS HE WAS IN THE MIDDLE OF TWO LANES WRONGLY DUE TO WHICH I COULDN'T SEE HIM IN MY REAR VIEW MIRROR. MY CAR WAS IN THE RIGHT LANE. IT WAS A MINOR COLLISION WITH MINIMAL IMPACT ON BOTH CARS. THE COLLISION WAS PARTLY CAUSED BY THE MERCEDES DRIVER'S EAGERNESS TO OVERTAKE ME FROM THE RIGHT (MY RIGHT) WHICH MADE HIM GO ON THE WRONG LANE AND ALSO BLINDSIDED ME FROM THE REAR VIEW MIRROR.

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	SY800B
Vehicle Make/Model/Colour	W212 E250
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

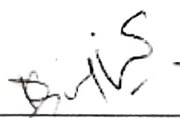
SKETCH PLAN

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:

26 JUL 2020
9:55 am

Driver's Signature

(If driver is not the policyholder)

Date & Time:


Reporting Centre Personnel's Signature

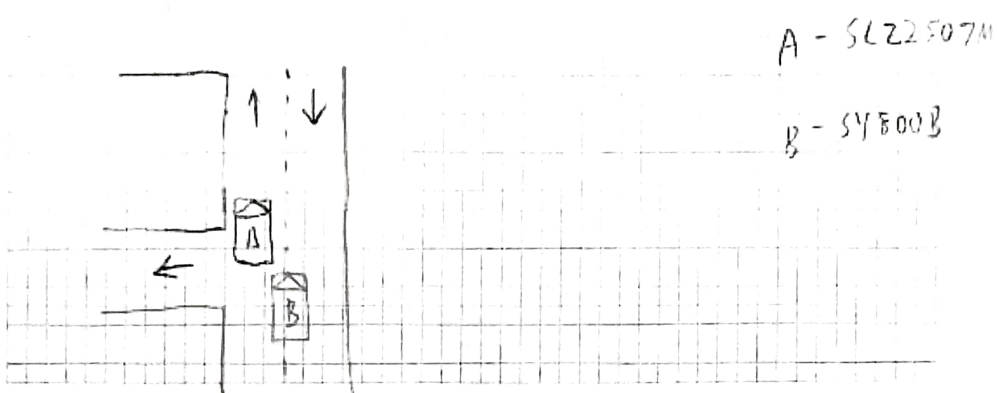
Name:

NRIC/FIN No.:

GUY LEE
67001177

Sketch Plan #2

SKETCH PLAN

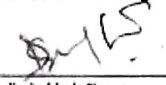


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

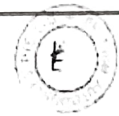
THE ACCIDENT HAPPENED AT THE CAR PARK OF
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MY CAR STOPPED TO PARK AT A SPOT AND I TRIED
TO REVERSE BE TO PARK. DURING THIS PROCESS,
THE CAR COLLIDED WITH THE CAR BEHIND AS
HE WAS IN THE MIDDLE OF TWO LANES WHOMLY
DUE TO WHICH I COULDN'T COULDN'T SEE HIM
IN MY REAR VIEW MIRROR. MY CAR WAS IN THE
RIGHT LANE IT WAS A MINOR COLLISION WITH
MINIMAL IMPACT ON BOTH CARS.
The collision was partly caused by the Mercedes driver
eagerness to overtake me from the right (my right) which
made him go on the wrong line and also blind sided me from
the rear view mirror

DECLARATION

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


Policyholder's Signature
Date & Time:
24 JUL 2020/9 55am
GuARME: Signatures.com.my

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



Reporting Centre Personnel's Signature
Name: Tony Fong
NRIC/FIN No.: 624401474

Premium Automobiles

55 Ubi Road 1, Singapore 408699

Tel : 6366 2323 Fax : 6841 1183

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

WIP : 42817

Telefax

Estimate	:	Accident Repairs
Workshop	:	Ubi Road 1
Contact No	:	6366 2323
Fax No	:	6841 1183
Reference	:	PA/OD/0516/2020/NS
Date	:	27-Jul-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	:	Ms Disha Singhvi Khosla
Address	:	179 Tan Jong Rhu Road #10-26 Singapore 436608
Telephone	:	HP +65 96529225
Type of Claim	:	Own Damage Claim
Policy No.	:	1800042897-01
Vehicle No	:	SLZ 2507 M
Model Code	:	Audi Q5 2.0 TFSI qu
Model / Year	:	Apr-18
Engine No	:	DAX 030922
Chassis No	:	WAUZZZF9J2129663
Mileage	:	-
Date In	:	-
Estimated By	:	Johnny Boo / Allan Wu
Accident Date	:	23-Jul-20
Place of Accident	:	KK Hospital Carpark

Premium Automobiles

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

Telefax

Estimated Labour Charges for Accident Vehicle. SLZ 2507 M

S/N	Nature of Jobs	Estimated Charges	Surveyor's Recommendations
1	To remove and transfer rear parking aid and rear lid kick sensor. Check function and renew according to damage.	S/N \$ 360.00 ✓	
2	To dismantle and renew rear bumper. Re-organise crash management components. Reinstall all parts removed. ✓	\$ 1,200.00 ✓ 500 1500	550 x 2 = 1100
3	To respray rear top bumper, rear lower bumper and both rear wheel arch trims. ✓✓	\$ 2,800.00 ✓	200 x 2 = 400 Wheel Arch
4	To carry out diagnostic check.	S/N \$ 192.00 ✓	
TOTAL LABOUR CHARGES		: <u>\$ 4,552.00</u>	

Premium Automobiles

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

Telefax

Material List for Accident Vehicle Regn No. SLZ 2507 M

		Damage Parts & Prices	
S/N	Parts Description	S/Nett	Remarks
1	REAR BUMPER - UPPER } Regis	\$ 1,724.00	X
2	REAR BUMPER - LOWER } Regis	\$ 1,182.00	X
3	REAR BUMPER SPOILER at	\$ 830.00	✓
4	REAR BUMPER TOWING EYE COVER - RH } not in	\$ 29.00	X
5	REAR BUMPER CLOSING ELEMENT - RH } not in	\$ 95.00	X
6	REAR BUMPER TRIM - RH not in	\$ 234.00	X
7	TAIL LIGHT - RH at	\$ 691.00	✓
8	BOOT LID CONTROL UNIT } not in	\$ 399.00	X
9	REAR BUMPER CARRIER } not in	\$ 911.00	X
10	REAR BUMPER HOLDING STRAP } not in	\$ 166.00	X
11	REAR PARKING AID SENSOR	2 TBC	X
12	REAR WHEEL COVER - LH / RH not in	2 \$ 1,154.00	✓
13	SUNDRIES ?	\$ 300.00	?
TOTAL SPARE PARTS CHARGES		: \$ 7,715.00	
TOTAL LABOUR CHARGES		: \$ 4,552.00	
GRAND TOTAL		: \$ 12,267.00	

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

Telefax

Name

: Adrian King

Surveyed Date

: 30/07/2000

Authorised Date

:

Excess Cost

:

Liability

:

Remarks

: Xbre Authorised, 03 Days

- LPK & JRC must hence notify the Repairer of the following:
- To resurvey before respray 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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Foreign Identification Number
Owner ID:	401L
Vehicle Details	
Vehicle No.:	SLZ2507M
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Jul 2020
Vehicle Make:	AUDI
Vehicle Model:	Q5 SPORT 2.0 TFSI QU S TRONIC (PSR)
Primary Colour:	Grey
Manufacturing Year:	2018
Engine No.:	DAX030922
Chassis No.:	WAUZZZF9J2129663
Maximum Power Output:	185.0 kW (248 bhp)
Open Market Value:	\$46,492.00
Original Registration Date:	26 Apr 2018
First Registration Date:	26 Apr 2018
Transfer Count:	0
Actual ARF Paid:	\$57,089.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Apr 2028
PARF Rebate Amount:	\$42,816.00
Intended COE Rebate Details	
COE Expiry Date:	25 Apr 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$37,066.00
COE Rebate Amount:	\$30,182.00
Total Rebate Amount:	\$72,998.00

The information contained herein is correct as at 30 Jul 2020

OK

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Market. Awarded Free Full Agent
Refined, Full Turbo Engine
Quality Motor

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Ho Bee Group
One Stop Car Hub
Finance, Insurance, Workshop
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30 years
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4 vehicles

Audi Q5

Advanced Search

	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Audi Q5	Any	Any	2018	Any	Any	Any	Available
	Audi Q5 2.0A TFSI Quattro S-tronic Sport	\$153,800	\$16,850 /yr	29-Jan-2018	1,984 cc	38,000 km	SUV	Available
1 Owner Only! Tip Top Condition! Low Mileage Unit! Fully Agent Maintained! Still Under Agent Warranty! In House Financing And Trade In Available! Call Now To Enquire! Hui Hua Credit Pte Ltd Posted: 31-May-2020 Tags: 2018 Audi Q5, Audi Q5, Audi, Q5								
	Audi Q5 2.0A TFSI Quattro	\$152,988	\$16,730 /yr	04-May-2018	1,984 cc	24,500 km	SUV	Available
Graded A by STA 3 Years/100,000Km Warranty Till 2021 And Fully Serviced. Special 1.99% Financing Rate! STA Certified. Stunning White Paintwork And Brown Leather Interior! Trade-In Available. View The Car At Our Leng Kee Showroom Today! Supreme Cars Pte Ltd Posted: 25-Jul-2020 Tags: 2018 Audi Q5, Audi Q5, Audi, Q5								
	Audi SQ5 3.0A TFSI Quattro	\$225,000	\$23,220 /yr	24-Jul-2018	2,995 cc	16,000 km	SUV	Available
Rare Audi SQ5 Up For Sale. Very Low Mileage! A SUV With Superb Road Hold And Absolute Power. Only 2 Owners, Agent (Premium Automobiles) Unit With Full Agent Service History And Warranty Until 2023. High Loan And Trade In Available! Viewing By Appointment... Posted: 18-Jul-2020 Tags: 2018 Audi SQ5, Audi SQ5, Audi, SQ5								
	Audi SQ5 3.0A TFSI Quattro Tip	\$223,800	\$22,010 /yr	30-Nov-2018	2,995 cc	8,500 km	SUV	Available
Brand New Currently Selling At \$319000! In-House Or Bank Loan Available. Fast And Easy Loan Approval. Mileage Only 8500KM. Warranty By Audi Premium Automobiles. Perfectly Maintained. Viewing By Appointment Only. 88 Motor Trading Posted: 29-Jul-2020 Tags: 2018 Audi SQ5, Audi SQ5, Audi, SQ5								

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