ASS.	ELC.	Bh.

### EF:

## CC3/AIG20008429/Aqf3

		ASSIG	NMENT					
From	Date: .		Joh Mo:	SMS DTC DS	. Vr Regn'	2020 1	Feb	
Estimated Cost:		Veh No: SMS27628 Yr Regn: 2020 / Feb Type M.Cary M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /						
OD/TP/WS/	TP RES / OD RES / EVA / INV / MV		$\overline{}$	Trailer or				
To Inspect Vehic		1	Make:	Audi Q	L SB	c.c 13	95	
at Workshop m/			Colour	Black	/	red / Std /		
of			Sp.Reading	6523	T/Radio: Inst	ured / Std /	NI / NA	
Insured:			Eng/No:					
Policy No.	2070026602		C/No:	WAUZZZ	F38L10488	0 O		
Claims No.	7014987633SG		Gen. Cond:	60d Fair / Poor / Bi				
Sum Insured:		00	Steering: (no	der Jammed / Leal	ked / Burnt or			
(Client's Reco	ord)		Brake:	rder / Jammed / Leal	ked / Burnt or			
Make of Veh:			Modi: Nil	SIRim) / STD A/Rir	n or	_		
			Tyre Size:	F: 23	5/50R19			
(Policy Condi	ition)				150819			
Remark: The v	reh had commenced its	N/S O/S	BS) DUN / E	XNOVA / GY / FS / L			VII /	
repai	ir at the time of inspection.		T0Y0 / Y0					
Bal. or Market	Value:		<u>Front</u>		Rear			
IDAC Accident	Rport: Consistent?: Yes o	г No	R/Bal.	06 mm	R/Bal.	06	mm	
GIA / PR Seen: Consistent? : Yes or No			L/Bal.	D mm	L/Bal.	96	mm	
Est. Repairs:	4 days Res.: Yes	or <b>No</b>	D.O.A.	_	D.O.I.	14/08	/20	
Lum Sum:	φ <sub>0</sub> 3 Val.: Yes (	or <b>No</b>	'Survey held	at To	emim	7		
CA / REV	I REP. I 24 HRS		Des. of Dan	nages : Frt / Rear /	OIS I NIS I UIC I	Rooftop	or	
		Vehicle: IN / OUT		front o	15.			
Date:	Person Contacted:		The U/C	/ Chassis frame /	Body Structure a	ffected due	to collision.	
Date / Time	Action / Instruction			•				
14/08/20@	10.45am revert to Victor via	Merimen.						
	11.41am Victor informed C		n and tak	e out labour 1.				
	mv : 145K 17/08	3/20@11.56ai	m Informe	ed Terrence C/	A & ex:\$400 a	nd take	out	
	177 . 20.4K	ır no. 1 by em						
	Nett: 94.6K. 09/0	9/20 Submit	Preli. repo	ort as the owne	er convert to T	P claim		
Date/Time, File I	Pass to? : Preli. Report		Days Of R	epair: 4				
ı) 09/09 T			Resurvey	No. of Trip;	- Survey F	ee:		
Date/Time, File					Transporta	1		
2)		Add Fed	ş:	e Insp (\$	)3 ÷ RS	SI		
			: Int	erview (\$	) Photos			
Report Fo	MER-OD			ch. Invs (8	) Others			
	n/EBd: cs	1	: VV	ertend (	1			
			<u> </u>	-		177	The second secon	

#### 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 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.

THE REPORT OF THE PARTY OF THE PARTY.	ACCIDENT STATEMENT	
Date Of Report	13/08/2020 12:07	
Date Of Accident	13/08/2020 08:00	
Exact Location Of Accelerat	RIE TOWARDS Woodennaacin	
Country/State of Loss	SINGAPORE	
		D No. of Lot

#### DETAILS OF OWN VEHICLE

SMS27628. 31//327023

insured/Policyholder

Name Of Registered Owner PHUA CHENG MIEN(PAN ZHENGMIAN)

4407. NKIL NO SXXXX44UJ

**Email Address** DCMPHUA@YAHOO.COM.SG

81388397 Manua I Inone No ((COM) 165 91390307

Alternative Phone No OFFICE-81388397

Vehicle Particulars

Manufacturer **AUDI** 

Model Q3 SPORTSBACK 1.4 TFSI S TRONIC

Exact Purpose for which vehicle was being used at PRIVATE USE

time of accident

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 2070026602

Cover Note Number

Driver

Name of Driver PHUA CHENG MIEN(PAN ZHENGMIAN)

NRIC No. SXXXX440J Date Of Birth 18/08/1976 Occupation **INDOOR Date Of Driving Pass** 16/09/1997

**Driving Experience** 22 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81388397

Fax Number

Contact Number OFFICE-81388397

**EMail Address** DCMPHUA@YAHOO.COM.SG

31 JALAN RAMA RAMA Address

#12-03

329111 Postcode

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

NO

NO

### General Information of the Accident

SIDE SWIPE Type Of Accident RAINING Weather Conditions WET Road Surface

#### Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles (including own vehicle) 2 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? I have been approached by unknown person(s) NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

#### **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 FILTERING TO THE RIGHT AT VERY SLOW SPEED. ONCE I FILTERED FULLY INTO THE LANE A FEW SECONDS LATER, A VAN HIT ME FROM THE SIDE AT HIGH SPEED. WE STOPPED OUR CARS AT THE SIDE OF THE EXPRESSWAY AND TOOK PHOTOS AND EXCHANGE DETAILS. HE SUGGESTED SENDING MY CAR TO HIS WORKSHOP WHICH I DECLINED

#### Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? YES NO Was there any audio recorded?

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

CB6400™ Vehicle Registration Number IUYUIA Volume Make/Model/Colour

**GOODS VEHICLE** Vehicle Category TING CHONG MENC Name of Driver

SXXXX384C NRIC/Passport Number Contact Number 91192000

Addrose Postcode

Insurance Company Name

Nature Of Damage

NO. OI 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 Foren must be completed by the Policyholder and/or the Authorised Driver
- 3 Information provided must be as truthful and accurate as possible. Any wirful 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)

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 welf 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 fincluding their lawyers/law firms), which may be seted 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 10.44

1318/202e

Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personner's Signature Name Tewrum Tan

NRIC/FIN No

#### Sketch Plan #2

#### SKETCH PLAN



A SMS 27623 B- CK 6460 T

#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Date & Time: (0.44 3/8/20

	OF THE ACCIDENT	
I was filtening	to the right at very slow spred Once I	
filtered fully	Into the lane a few counds later a van	
hit me from	the side We stopped our core at the	
side of the ex	preservey and took photos and exchange	
details the	suggested sording my con to his workshop	
which I dedie	of the had filtered	
DECLARATION		
/We declare the foregoing part	culars are true in every respect.	
Policyholder's Signature	Oriver's Signature Reporting Centre Personnel's Signat	ture
Date & Time: (0.44	III driver is not the policyholder)  Date & Time  NRIC/FIN No.	

Page 4 of 25

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

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

WIP: 45228

#### Telefax

Estimate : Accident Repairs

 Workshop
 : Ubi Road 1

 Contact No
 : 6366 2323

 Fax No
 : 6841 1183

**Reference** : PA/OD/0565/2020/NS

**Date** : 13-Aug-20

Vehicle NOT IN workshop. Kindly arrange for survey.

#### AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16 AIG Building Singapore 079120

Telephone

Attn: Mr. Adrian Ling - Motor Claims Dept

Tel: 6841 0055 - Fax: 6256 4315

Owner's Name : Mr Phua Cheng Mien(Pan Zhengmian)

Address : BLk 31 Jalan Rama Rama

#12-03

: HP +65 81388397 : Own Damage Claim

Singapore 329111

Type of Claim : Own Damage Policy No. : 2070026602

Vehicle No : SMS 2762 S

Model Code : Audi Q3 Sportsback 1.4 TFS

Model / Year : Feb-20 Engine No : CZD 88513

Chassis No : WAUZZZF38L1048800

Mileage : Date In : -

Estimated By : Johnny Boo / Allan Wu

Accident Date : 13-Aug-20

Place of Accident : PIE Towards Macpherson

Telefax

# Estimated Labour Charges for Accident Vehicle. SMS 2762 S

S/N	Nature of Jobs		Estimated Charges	Surveyor's Recommendations
1	To remove and transfer/reinstall front bumper wire harness for front parking aid system.	S/N	\$ 280.00	
2	To remove and transfer rhs headlight control unit and power module.	S/N	\$ 400.00	X·
3	To dismantle and renew front bumper, rhs front fender and rhs headlight. Re-organise crash management components. Reinstall all parts removed.		\$ 4,000,001	
4	To respray front bumper, rhs front fender and both front wheel arch trims.		\$ 3,000.00	550 x 2 - 1100 wheel Arc x2 - 200 x 2 = 400
5	To renew rhs front rim and carry out wheel alignment.	S/N	\$ 280.00	
6	To carry out diagnostic check.	S/N	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 8,152.00	-

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

Telefax

## Material List for Accident Vehicle Regn No. SMS 2762 S

S/N	Parts Description			<u>Damage Parts &amp; Prices</u> S/Nett Remarks
1	FRONT BUMPER ispire		\$	2,615.00 🔀
2	FRONT BUMPER FIXING PARTS		\$	410.00 X
3	FRONT BUMPER FRONT SPOILER		\$	754.00 <del>K</del>
4	FRONT BUMPER AIR GUIDE GRILLE - RH		\$	151.00 ⊀
5	AIR GUIDE GRILLE TRIM - RH		\$	162.00 +
6	FRONT BUMPER CLOSING ELEMENT - RH		\$	58.00 T
7	FRONT BUMPER GUIDE SECTION - RH		\$	38.00 ×
8	FRONT FENDER - RH Dewled.		\$	1,271.00
9	FRONT FENDER ATTACHMENT PARTS 7		\$	62.00 2
10	FRONT FENDER BRACE - RH		\$	87.00
11	FRONT FENDER BRACKET - RH ?		\$	31.00 ?
12	FRONT WHEEL HOUSING LINER - RH		\$	237.00 🗡
13	WHEEL HOUSING LINER ATTACHMENT PARTS		\$	100.00 ₹
14	WHEEL HOUSING LINER COVER - RH		\$	16.00 K
15	WHEEL HOUSING LINER CLOSING ELEMENT - RH		\$	19.00 +
16	HEADLIGHT MOUNTING - RH Zue mer		\$	117.00 ×
17	LED HEADLIGHT - RH  FRONT WHEEL COVER - LH / RH  PLANT XLER		\$	5,526.00 ₹.
18	FRONT WHEEL COVER - LH / RH Petter xler	2	\$	1,060.00 🗸
19	FRONT RIM - RH ?			TBC ?
20	SUNDRIES ?		\$	200.00 .
	TOTAL SPARE PARTS CHARGES TOTAL LABOUR CHARGES GRAND TOTAL	: \$12,914.00 : \$ 8,152.00 : \$21,066.00		8,152.00

All charges are not inclusive of GST.

Legend - Remarks (OK) = Approved, Remarks (X) = Not approved

Spare parts are Special Nett.

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

### Telefax

Name

Surveyed Date

Authorised Date

Excess Cost

Liability Remarks Adria Ly
13/08/20
Not Andlorsed, 04 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

#### > Back to OneMotoring

## **Enquire PARF/COE Rebate for Registered Vehicle**

**Vehicle Owner Particulars** 

Owner ID Type: Singapore NRIC

Owner ID: 440J

**Vehicle Details** 

Vehicle No.: SMS2762S
Vehicle to be Exported: Yes

Intended Deregistration Date: 13 Aug 2020

Vehicle Make: AUDI

Vehicle Model: Q3 SPORTBACK 1.4 TFSI S TRONIC (17")

Primary Colour:
Manufacturing Year:
Engine No.:
Black
2019
CZD888513

Chassis No.: WAUZZZF38L1048800
Maximum Power Output: 110.0 kW (147 bhp)

 Open Market Value:
 \$30,143.00

 Original Registration Date:
 19 Feb 2020

 First Registration Date:
 19 Feb 2020

Transfer Count: 0

Actual ARF Paid: \$34,201.00

**Intended PARF Rebate Details** 

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 18 Feb 2030
PARF Rebate Amount: \$25,650.00

Intended COE Rebate Details

COE Expiry Date: 18 Feb 2030

COE Category: B - Car above 1600cc or 97kW (130bhp)

COE Period(Years): 10

 QP Paid:
 \$30,890.00

 COE Rebate Amount:
 \$24,712.00

 Total Rebate Amount:
 \$50,362.00

The information contained herein is correct as at 13 Aug 2020

OK

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There are 2 Past New Audi Q3 Cars for Sale no longer being sold by local distributors View all past Audi cars







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