Progressive Car Care Pte Ltd

Blk 3022A Ubi Road 1 #01-45/46 Singapore 408716 TEL: 6741 5336 FAX: 6741 7208 Email: claims@procarcare.com.sg GST:201006949C RCB NO:201006949C

M/S: FU WEI LING

ATTN: FIRST CAPITAL

BLK 168B PUNGGOL EAST #11-369

SINGAPORE 822168

Estimate No:

EST1506173

Date:

19 Aug 2020

Policy No:

PNPV2019-00014006

Veh Reg No:

SKG8951K

Make/Model:

AUDI A1 1.4 TFSI S-

TRONIC

Your Ref No:

TP 0820-6051

Claim Type: Accident Date: Third Party

18/08/2020

Chassis No: Engine No:

WAUZZZ8XXBB078342 CAX802673

Reg. Date:

24/06/2011

TP Veh Reg No:

SHC 7245 D

Estimate Repair Cost to Vehicle No :SKG8951K

	Description	U/Price	Quantity	Price	Amoun
	List Price			<u>S\$</u>	S
1	FRONT FENDER - RH	672.8500	1 PC	(72.05	
2	FRONT FENDER CLWING CLIPS - RH	23.3000	10 PCS	672.85	
3	FRONT RIM - RH	802.1500	1 PCS	233.00	
4	FRONT BUMPER	134.8000	0.00 35050	802.15	
5	FRONT BUMPER SIDE HOLDER - RH/LH	561.8500	1 PC	134.80	
6	FRONT BUMPER CLIPS		2 PC	1,123.70	
	2 on a fact of the	147.3500	1 SET	147.35	
			T	3,113.85	
			Less 5%	155.69	2,958.16
	Labour				
7	TO KNOCK OUT DENTS, REMOVE, REPLACE ACCIDENT PARTS	550.0000	1 JOB	550.00	
8	TO RESPRAY PAINT ON ACCIDENT PORTIONS	600.0000	1 JOB	600.00	
9	TO CHECK WIRING	20.0000	1 JOB	20.00	
10	TO REMOVE, REPLACE RHF RIM	50.0000	1 JOB	50.00	
11	TO RESER CHECK LIGHT	75.0000	1 JOB		
12	TO TUFF-KOTE	30.0000	1 JOB 1 JOB	75.00	
13	TO 4 WHEEL ALIGNMENT	100.0000	50,000 (50,000) (50,000 (50,000 (50,000 (50,000 (50,000 (50,000 (50,000 (50,00	30.00	
	Control of the second	100.0000	1 JOB _	100.00	
				1,425.00	1,425.00
				Total	S\$ 4,383.16
			Add GS	T @ 7%	306.82
			Total Amount	Payable	S\$ 4,689.98

TOTAL: SINGAPORE DOLLAR FOUR THOUSAND SIX HUNDRED EIGHTY NINE AND CENTS NINETY EIGHT ONLY

For Progressive Car Care Pte Ltd

AUTHORISED SIGNATURE

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

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	ACCIDENT STATEMENT
Date Of Report	19/08/2020 16:02
Date Of Accident	18/08/2020 16:50
Exact Location Of Accident	MANDAI ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKG8951K
Insured/Policyholder	
Name Of Registered Owner	FU WEI LING
NRIC No	SXXXX462A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90613868
Alternative Phone No	OTHERS-90613868
Vehicle Particulars	
Manufacturer	AUDI
Model	A1-1.4 1.4TFSI (A)
Exact Purpose for which vehicle was being used at time of accident	
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
D.P. M. I	

Policy Number PNPV2019-00014006

Cover Note Number

Driver

Name of Driver FU WEI LING
NRIC No SXXXX462A
Date Of Birth 03/10/1975
Occupation INDOOR
Date Of Driving Pass 10/09/2018

Driving Experience 1 YEAR AND 11 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-90613868

Fax Number

Contact Number OTHERS-90613868

EMail Address NOEMAIL

Address

BLK 302B ANCHORVALE LINK #12-186

Postcode

542302

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 - CHANGE/CROSS LANE

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

NO

ambulance?

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?

YES

If Yes, Please state which Police Station

Police Station Name

SENGKANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE, POSTCODE:

545025, COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800 - 3438999 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED STATEMENT RECORD BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

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

SHC7245D

Vehicle Make/Model/Colour

Details Of Properties

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

SKETCH PLAN

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- 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)

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:
 - processing, handling and/or dealing with my daims including the settlement of the daims 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: Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN		
		<u>Vehicle</u> A-タKG89ゴベ ^{B-} SHK7245 D
		B-SHK7245 D
Z	STE STE	Legend A Vehicle Majorcycle
DESCRIBE CIRCUMSTANCES O	F THE ACCIDENT	
Refer TO	Attached Police	- Thort.
		v
	*	
DECLARATION I/We declare the foregoing partic Please be advised that your insurer may from the day of occurrence. Kindly check	tulars are true in every respect. have a fourteen (14) days clause whereby the claim against cyour policy for more details.	own policy must be made within the stipulated timeframe
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:
19/8/20.	Date & Time:	NRIC/FIN No.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	462A	
Vehicle No.:	SKG8951K	
Vehicle to be Exported:	No	
Intended Deregistration Date:	19 Aug 2020	
Vehicle Make:	AUDI	
Vehicle Model:	A1 1.4 TFSI S-TRONIC	
Primary Colour:	Red	
Manufacturing Year:	2011	Inv
Engine No.:	CAX802673	
Chassis No.:	WAUZZZ8XXBB078342	
Maximum Power Output:	90.0 kW (120 bhp)	************
Open Market Value:	\$26,477.00	
Original Registration Date:	24 Jun 2011	
First Registration Date:	24 Jun 2011	
Transfer Count:	3	
Actual ARF Paid: Intended PARF Rebate Details	\$26,477.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	23 Jun 2021	
PARF Rebate Amount: Intended COE Rebate Details	\$13,238.00	
COE Expiry Date:	23 Jun 2021	
COE Category:	A - Car (1600cc & below)	
COE Period(Years):	10	
QP Paid:	\$50,244.00	
COE Rebate Amount:	\$4,242.00	
Total Rebate Amount:	\$17,480.00	ORDINA COLOR

The information contained herein is correct as at 19 Aug 2020

ОК



Vehicle Details

CO Emission:

Vehicle No. Make / Model SKG8951K AUDI / A1 1.4 TFSI S-TRONIC Vehicle Type: Vehicle Attachment 1: P10 - Passenger Motor Car No Attachment Vehicle Scheme: Chassis No.: Normal WAUZZZ8XXBB078342 Propellant: Engine No.: Petrol CAX802673 Motor No.: Engine Capacity: 1390 cc Power Rating: Maximum Power Output: 90.0 kW (120 bhp) Maximum Laden Weight: Unladen Weight: 1575 kg 1125 kg Year Of Manufacture: Original Registration Date: 2011 24 Jun 2011 Lifespan Expiry Date: COE Category: A - Car (1600cc & below) Quota Premium: COE Expiry Date: \$50,244.00 23 Jun 2021 Road Tax Expiry Date: PARF Eligibility Expiry Date: 23 Dec 2020 23 Jun 2021 Inspection Due Date: Intended Transfer Date: 23 Dec 2020 19 Aug 2020 CO2 Emission: CEV/VES Rebate Utilised Amount:

HC Emission: