ASSIGNMENT

font	Dale	Veh No: SFZ & 300Z Type M. Car / M. Cycle / Bus / Van / Lorr	V/Taxi/Prime Mover/
Estimated Cost:		15 Maria 15	,
ODITPIWSI	TP RES / OD RES / EVA / INV / MV	Truck/Trailer or Make: Andi Q5	1504
To Inspect Vehi	icle No:	And the state of the same of t	A/C: Insured / Std / NI / NA
at Workshop ma	is	Colour Black	
of		Sp.Reading 21245	T/Radio: Insured / Std / NI / NA
Insured		Eng/No:	CLC Valo CAT
Policy No.			SK2018545
Claims No.		Gen. Cond: Good / Fair / Poor / Burnt	Program and
Sum Insured:	Excess:	Steering: Inorder / Jammed / Leaked / B	
(Client's Reco	ord)	Brake: knorder / Jammed / Leaked / B	Surnt or
Make of Veh:		Modi: Nil / S/Bim / STD A/Rim or	- 4
		Tyre Size: F: 235/55	K17.
(Policy Condi		R: 255/5	
	reh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / N	
repai	ir at the time of inspection.	TOYOTYOKO OF CONTIN	verotal.
Bal. or Market		Front	Rear
IDAC Accident	Rport: Consistent? : Yes or No	R/Bal. OG mm	R/Bal. Ob mm
GIA / PR See	en: Consistent? : Yes or No	L/Bal. 06 mrn	L/Bal. Q mm
Est. Repairs:	days Res.: Yes or No	D.O.A.	D.O.I. 11/09/20.
Lum Sum:	% 3 Val.: Yes or No	'Survey held at ?cen	un.
CA / REV	/ REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages: Frt / Rear / O/S /	1
Date:	Person Contacted:	The U/C / Chassis frame / Body	
Date / Time	Action / Instruction		
	00 A 1G.		
	mv : 17016		
-	MV: 1701C PV: 734K		
	Nett: 96.61C		
	7,100 - 4		
Date/Time, File Pa	Tell. Report	Days Of Repair:	CONTRACTOR
I)	: Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time File P	Add Fe	se Testa loca (S	Transportation:
21	Add Fe)3+PSSI
edy Constitution (•	: Interview 18	1 F160s
Fejari Fai		: Tech. Inv. 6) Other
िकार्य देखत	P.P.E.	. Mestalvi	
			70311

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 07/09/2020 14:09

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 faise 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	07/09/2020 13:09
Date Of Accident	26/08/2020 11:00
Exact Location Of Accident	VELOCITY MALL CAR PARK RAMP
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SFZ8300Z
Insured/Policyholder	
Name Of Registered Owner	LIM ENG KIAT
NRIC No	SXXXX161I
Email Address	ENGKIAT_LIM@ROCKETMAIL.COM
Mobile Phone No	(LOCAL) +65-81258616
Alternative Phone No	HOME-68747678
Vehicle Particulars	
Manufacturer	AUDI
Model	Q5 SPORT-2.0 TFSI QU S TRONIC (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	1900066968
Cover Note Number	
Driver	The second of th
Name of Driver	LENA TEOH CHYIN

Name of Driver LENA TEOH CHYIN NRIC No SXXXX267Z

 Date Of Birth
 14/12/1966

 Occupation
 INDOOR

 Date Of Driving Pass
 31/01/1990

Driving Experience 30 YEARS AND 6 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-94763398

Fax Number Contact Number

EMail Address TEOH.CHYIN@GMAIL.COM

Address 34 LUCKY VIEW

Postcode 467466

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE
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?

Was any other material or property damaged? NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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

I WAS DRIVING DOWN THE CARPARK RAMP TO EXIT THE BUILDING AND IT WAS CIRCULAR AND A LITTLE NARROW. I GOT TOO CLOSE TO THE LEFT SIDE AND THE FRONT FENDER SCRAPED THE WALL.

NO

Attachment(s)

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

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)
 - (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 detaction, 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:

7/9/2020

un **Driver's Signature**

(If driver is not the policyholder)

Date & Time:

7/9/2020

Reporting

Name: Terveuse tan NRIC/FIN NO. G 893 DOCT

SIARMI STATESPIENTONN VI

Sketch Plan #2

Circular ramp- Accident I was driving down the carporte ramp and it was greater and a little name to the left side and the front finder	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT I was driving down the carporte ramp and it was carcular and a little name to the left side and the front finder	to exit the built w. I got too cl. Soraped the wall.
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT I was driving down the carpork ramp and it was circular and a little name to the left side and the front funder	to exit the built www. I got too all soraped the wall.
I was driving down the carpork ramp and it was carentar and a little name to the left side and the front funder	to exit the built w. I got too cl. Soraped the wall.
I was driving down the carpork ramp and it was grantar and a little name to the left side and the front funder	to exit the built www. I got too cl Soraped the wall.
I was driving down the carpork ramp and it was carcular and a little name to the left side and the front funder	to exit the built w. I got too cl Soraped the wall.
I was driving down the corporte ramp and it was coventar and a little name to the left side and the front funder	to exit the built w. I got too cl Soraped the wall.
and it was carentar and a little name to the left side and the front funder	w. I got too cl Soraped the wall.
to the left side and the front finder	W. I got too cl Scraped the wall.
ine left side and the front finder	Soraped the wall.
LARATION	
declare the foregoing particulars are true in every respect.	CHOP
1 long	() E
holder's Signature Driver's Signature	
	eporting Centre Personnel's Signature ame: TOWENCE TOP

PREMIUM AUTOMOBILES

55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATE

ACCIDENT REPAIRS

WORKSHOP

UBI ROAD 1

CONTACT NO

6366 2323

FAX NO

6841 1183

REFERENCE

PA/OD/0646/2020/NS

DATE

9-Sep-20

WIP

48271

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

MR LIM ENG KIAT

ADDRESS

34 LUCKY VIEW

TELEPHONE

SINGAPORE 467466

HP +65 81258616

TYPE OF CLAIM

OWN DAMAGE CLAIM

POLICY NO

1900066968

VEHICLE NO

SFZ 8300 Z

MODEL CODE

AUDI Q5 SPORT 2.0 TFSI QU

MODEL YEAR

25/3/2019

ENGINE NO

DAX 049909

CHASSIS NO

MILEAGE

WAUZZZFY5K2018545

DATE IN

:

:

ESTIMATED BY

JOHNNY BOO / ALLAN WU

ACCIDENT DATE

26-Aug-20

PLACE OF ACCIDENT

VELOCITY MALL CARPARK RAMP



PREMIUM AUTOMOBILES

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EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SFZ 8300 Z

S/N	NATURE OF JOBS		CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR, HEADLIGHT WASHER ASSY AND FRONT PARKING AID.	5/N	\$ 480.00	
2	TO REMOVE AND TRANSFER LHS HEADLIGHT CONTROL UNIT AND POWER MODULE.	S/N	\$ 400.00	150
3	TO DISMANTLE AND RENEW FRONT BUMPER, LHS FRONT FENDER AND LHS HEADLIGHT. RE-ORGANISE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	S/N	\$ 2,400.80	ζυρ
4	TO RESPRAY FRONT BUMPER, FRONT BUMPER LOWER SPOILER, LHS FRONT FENDER AND BOTH WHEEL ARCH TRIMS.	S/N	\$ 1750 4,000:00	\$50 x > = 110 3 Sporter = 250 Arch tales 2 = 200 x 2 = 400
5	TO CARRY OUT DIAGNOSTIC CHECK.	S/N	\$ 192.00	1750
	TOTAL LABOUR CHARGES	:	\$ 7,472.00	





55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SFZ 8300 Z

S/N PARTS DESCRIPTION QTY	DAMAGED PARTS & PRICES S/NETT REMARKS
^ .	
1 FRONT BUMPER Delo-C	\$ 2,595.00 /
2 REAR BUMPER FIXING PARTS / LC 12	\$ 267.00 ×
3 FRONT BUMPER CLOSING ELEMENT - LH LUM	\$ 111.00 <i>\mathcal{k}</i>
4 FRONT BUMPER GRILLE - CENTRE んん	\$ 142.00 ¥
5 FRONT SPOILER ALL REPUT	\$ 754.00 +
6 FRONT BUMPER UNDERRUN BAR LLC	\$ 474.00 +
7 FRONT BUMPER CLOSING ELEMENT My an	\$ 171.00 £
8 FRONT BUMPER AIR GUIDE GRILLE - LH 4	\$ 574.00
9 FRONT BUMPER END CAP - LH H	\$ 91.00 \$
10 FRONT BUMPER SECURING STRIP - LH XW (CL	\$ 37.00 +
11 FRONT BUMPER GUIDE SECTION - LH MA	\$ 38.00 +
12 FRONT FENDER - LH Repis	\$ 1,411.00 \$
13 FRONT FENDER ATTACHMENT PARTS 2	\$ 66.00 +
14 FRONT FENDER BRACKET - LH	\$ 17.00 +
15 FRONT FENDER BRACE - LH	\$ 222.00 *
16 WHEEL HOUSING LINER - LH	\$ 275.00 >
17 WHEEL HOUSING LINER ATTACHMENT PARTS Mu	- \$ 38.00 /
18 WHEEL SPOILER - LH Lit	\$ 159.00
19 HEADLIGHT MOUNTING - LH HC ~	\$ 117.00 +
20 LED HEADLIGHT - LH	\$ 7,931.00
21 LIFT CYLINDER - LH NEW	\$ 138.00 ×
22 FRONT WHEEL COVER - LH / RH LIN wt RH N42	\$ 1,250.00
23 SUNDRIES	\$ 250.00 ?
TOTAL SPARE PARTS :	\$ 17,128.00
TOTAL LABOUR CHARGES :	\$ 7,472.00
GRAND TOTAL :	\$ 24,600.00

ALL CHARGES ARE INCLUSIVE OF GST

LEGEND:

REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED SPARE PARTS ARE SPECIAL NETT.

PREMIUM AUTOMOBILES



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EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

NAME

SURVEYED DATE

AUTHORISED DATE

EXCESS COST

LIABILITY

REMARKS

All Authorised, 04 Days

PLEASE NOTE

THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER LAOUR 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**

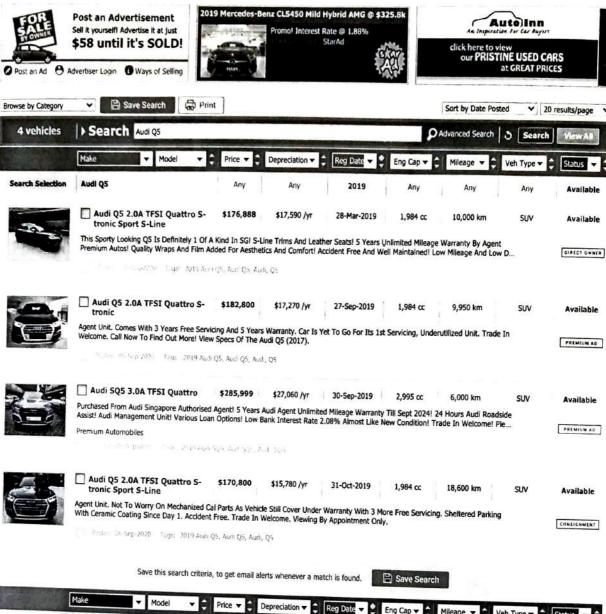
> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Signature NDIG			
Owner ID:	Singapore NRIC			
	1611			
Vehicle No.:	SFZ8300Z			
Vehicle to be Exported:	No			
Intended Deregistration Date:	11 Sep 2020			
Vehicle Make:	AUDI			
Vehicle Model:	Q5 SPORT 2.0 TFSI QU S TRONIC			
Primary Colour:	Black			
Manufacturing Year:	2018			
Engine No.:	DAX049909			
Chassis No.:	WAUZZZFY5K2018545			
Maximum Power Output:	185.0 kW (248 bhp)			
Open Market Value:	\$45,559,00			
Original Registration Date:	25 Mar 2019			
First Registration Date:	25 Mar 2019			
Transfer Count:	0 0			
Actual ARF Paid:				
	\$55,783.00			
PARF Eligibility:	Yes			
PARF Eligibility Expiry Date:	24 Mar 2029			
PARF Rebate Amount:	\$41,837.00			
million of the second	\$41,657.00			
COE Expiry Date:	24 Mar 2029			
COE Category:	B - Car above 1600cc or 97kW (130bhp)			
COE Period(Years):	10			
QP Paid:	\$36,961,00			
COE Rebate Amount:	\$31,546.00			
Total Rebate Amount:				
information contained herein is correct as at 11 Sep 2020	₽/3,303.UU			

Golden Moments

Golden Moments Durian Mooncak





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