Pepori. Formet:

Lugger Sunit Charles

254.14C.B. ASSIGNMENT SLR5653 X . Yr Reyn: 2017 Ayrt From Dale Type (M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Estimated Cost: OD/TP/WS/TP RES/OD RES/EVA/INV/MV Truck / Trailer or Andi A4. To Inspect Vehicle No: Make: at Workshop m/s Colour A/C: Insured / Std / NI / NA Sp.Reading T/Radio: Insured / Std / NI / NA Insured: Eng/No: WAU 222 F48HA177989. Policy No. C/No: Claims No. Gen. Cond: Good / Fair / Poor / Burnt Steering: Inorder / Jammed / Leaked / Burnt or Sum Insured: Excess: Brake: Inorder / Jammed / Leaked / Burnt or (Client's Record) Make of Veh: Modi: Nil / S/Rin / STD A/Rim or 245/40R18 Tyre Size: (Policy Condition) Remark: The veh had commenced its N/S 0/8 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU/ PIR / SUMI / repair at the time of inspection. TOYO/YOKO or Central Bal, or Market Value: Front Rear Consistent?: Yes or No. R/Bal 86 IDAC: Accident Rport: R/Bal Consistent?: Yes or No GIA / PR Seen: L/Bal. L/Bal Est. Repairs: Res.: Yes or No D.O.A. DOL 3 Val.: Yes or No remin Lum Sum: Survey held at Des. of Damages : Frt / Rear / O/S N/S / U/C / Rooftop or CA / REV / REP. / 24 HRS Vehicle: IN / OUT Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date / Time Action / Instruction OD A16 mv : 90K. PV: 56.71C 33.310 Date/Time, File Pass to? : Preli. Report Days Of Repair: : Final Report Resurvey No. of Trip: Survey Fee: Date/Time. File Petron In? Transportation Orld Feet Site Insp (\$ 3+P8. 3I Interview

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## 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	28/10/2020 15:46
Date Of Accident	27/10/2020 10:30
Exact Location Of Accident	HEDGES PARK CONDOMINIUM CARPARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLR5653X
Insured/Policyholder	是是在自己的原则的是一种自己的原则是在自己的原则是
Name Of Registered Owner	LIM KNG YAU
NRIC No	SXXXX609J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96426011
Alternative Phone No	HOME-68362260
Vehicle Particulars	
Manufacturer	AUDI
Model	A4-1.4 (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	
Cover Note Number	
Driver	

LIM KNG YAU Name of Driver SXXXX609J NRIC No 02/04/1973 Date Of Birth INDOOR Occupation 16/06/1994 Date Of Driving Pass 26 YEARS AND 4 MONTHS Driving Experience MALE Gender (LOCAL) +65-96426011 Mobile Number Fax Number

HOME-68362260 Contact Number

NOEMAIL **EMail Address** 

Address 77 FLORA DRIVE

#08-23

Postcode 506884

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 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

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

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**

ON THE MORNING OF DATE 27/10/2020 TIME AROUND 10.30AM, I WAS DRIVING MY CAR OUT OF THE CARPARK LOT AND I ACCIDENTALLY CRASH MY CAR LEFT BACK ONTO THE CAR PARKING NEXT TO ME VEHICLE NUMBER SKV9624U CAUSING SCRATCHES ON THE FRONT RIGHT BUMPER AND HEADLIGHT.

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 SKV9624U

Vehicle Make/Model/Colour MERCEDEZ CLA180

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver TEO KIM HUAT
NRIC/Passport Number SXXXX435H

Contact Number 97438868

Address 77 FLORA DRIVE

#07-19

Postcode 506884

Insurance Company Name HL ASSURANCE PTE LTD

Nature Of Damage SCRATCH OF FRONT RIGHT BUMPPER & HEADLIGHT

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
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 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")
- 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: 17/15/20

11.45 AM

Driver's Signature (If driver is not the policyholder)

Date & Time: 27/10/20

Repo

Reporting Centre Personnel's Signature Name: Lim BRL Exong NRIC/FIN No.: Greenes S69 m

GIARMC SketchPlanForm, V3

1

## Sketch Plan #2

	¥: 25 \$ 5 6 2 3 ×
	8: SKV 962 4 U
	(18)
CRIBE CIRCUMST	TANCES OF THE ACCIDENT
ON THE	MULANZUL OF DATE 27/10/2020 TEMS ALLUMD 10300M
was Drive	NE MY CAR OUT OF THE CARPARK LOT & I ACCEDENT
(RASH MH	CAL LEFT BOCK ONTO THE CAR PARKING NEXT TO
Versus	CHE COLLEGE AND THE CHE PARTIM NICT TO
	NUMBER & SKN9624 U CONTENTS SCRAFCARS OF THE
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The second secon	
The state of the s	g particulars are true in every respect.
The second secon	g particulars are true in every respect.
V	Ju Vin Vin
declare the foregoing	Driver's Signature Reporting Centre Personnel's Signature
declare the foregoing	Driver's Signature Reporting Centre Personnel's Signature



# CERTIFICATE OF INSURANCE

#### AUDI AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : LIM KNG YAU(LIN GUANGYAO)

Period of Insurance

: 18 Aug 2020 To 17 Aug 2021

Engine No.

: CVN 040756

Chassis No.

: WAUZZZF48HA177989

Vehicle No.

: SLR5653X

Policy No.

**Issued Date** 

: 1700041626-03

Endorsement No.

: 05 Aug 2020

#### ABOUT THE COVER

Make/Model

AUDI A4 1.4 TFSI S tronic

Engine Capacity/Tonnage: 1,395.00 CC

Sum Insured : Market Value

First Year of Registration

Insuring with COE/PARF

2017 Yes

**Driver Restriction** : NA Person or Classes of Persons Entitled to Drive\*:

a) The Policyholder
 b) Any other person who is driving on the Policyholder's order or with his/her permission.
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience

Off Peak Car : No

All Age Condition

Mileage Condition

: Unlimited Mileage

Age Condition Limitation as to use\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1800cc - 2000cc Optional

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings

#### EXCESS

Section 1
Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

LIM KNG YAU(LIN GUANGYAO) - \$600 (Own Damage), \$600 (Flood Cover)

## APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1 Audi Customer Service Center Add: 55 Ubi Road 1 Singapore 408699 63662323

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189). Part IV of the Road Transport Act. 1987 (Malaysia). Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules. 1959 (Malaysia).

0504125262

PREMIUM LEASING -KTL

281 ALEXANDRA ROAD AUDI CUSTOMER SERVICE CENTRE

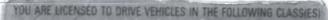
SINGAPORE 159938

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.





PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unleden does not exceed 2500 kilograms

NP 428A





## **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/0822/2020/NS

DATE 30-Oct-20 WIP 54873

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 KNG YAU **ADDRESS** 77 FLORA DRIVE

#08-23

SINGAPORE 506884 **TELEPHONE** : HP +65 96426011

TYPE OF CLAIM OWN DAMAGE CLAIM **POLICY NO** 1700041626-03

**VEHICLE NO SLR 5653 X** 

MODEL CODE : AUDI A4 SEDSN 1.4 TFSI S

**MODEL YEAR** 18/8/2017 : CVN 040756 **ENGINE NO** 

**CHASSIS NO** WAUZZZF48HA177989

**MILEAGE** 

DATE IN

JOHNNY BOO / ALLAN WU **ESTIMATED BY** 

27-Oct-20 **ACCIDENT DATE** 

HEDGES PARK CONDOMINIUM CARPARK PLACE OF ACCIDENT



# \* PREMIUM AUTOMOBILES



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

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

## **ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLR 5653 X**

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 REMOVE AND TRANSFER LHS REAR DOOR'S MULTI- LOCK SYSTEM AND POWER WINDOW DEVICES. INSPECT FOR DAMAGES.	S/N	\$ 280.00	X.
3	TO DISMANTLE AND RENEW REAR BUMPER AND LHS REAR DOOR. TO REPAIR LHS REAR FENDER. RE- ORGANISE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.		\$ 2,450,00	500
4	TO RESPRAY REAR BUMPER, LHS REAR FENDER AND LHS REAR DOOR.		\$ 2,900,00	1650
5	TO RENEW LHS REAR RIM AND CARRY OUT WHEEL ALIGNMENT.	S/N	\$ 280.00	1
6	TO CARRY OUT DIAGNOSTIC CHECK.	S/N	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 6,462.00	



# **PREMIUM** AUTOMOBILES



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. SLR 5653 X

S/N PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES S/NETT REMARKS
1 REAR BUMPER Pers		\$ 2,181.00 🙏
2 REAR BUMPER FIXING PARTS		\$ 72.00
3 REAR BUMPER SECURING STRIP		\$ 220.00 *
4 REAR BUMPER SPOILER		\$ 246.00 \$
5 REAR LIGHT REFLECTOR - LH		\$ 41.00
6 REAR BUMPER GUIDE SECTION - LH Ne Nac		\$ 44.00 <
7 REAR DOOR - LH Reput		\$ 2,354.00
8 REAR DOOR OUTER SEAL - LH ME NA	NEC	\$ 203.00 +
9 BONDING AGENT	NEC	\$ 47.00 +
10 CLEANING SOLUTION NEA	NEC	\$ 65.00
11 SEALING STRIP		\$ 16.00
12 REAR DOOR ATTACHMENT PARTS 🚶		\$ 563.00 +
13 REAR DOOR CATCH		\$ 119.00 4
14 REAR ALUMINIUM RIM - LH		TBC /
15 SUNDRIES		\$ 300.00
TOTAL SPARE PARTS	:	\$ 6,471.00
TOTAL LABOUR CHARGES	:	\$ 6,462.00
GRAND TOTAL	:	\$ 12,933.00

ALL CHARGES ARE INCLUSIVE OF GST

LEGEND:

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

## **PREMIUM** AUTOMOBILES

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

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

Adra ( )



LKK Auto Consultants hence notify the Repairer of the following:

- . To resurvey before/after spray 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:

NAME

SURVEYED DATE

**AUTHORISED DATE** 

**EXCESS COST** 

LIABILITY

**PLEASE NOTE** 

**REMARKS** 

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

169 Authorised, 05 Days.

MS. NORAH KHAI AT TEL: 6768 9828 FOR APPOINTMENT.

YOURS FAITHFULLY, PREMIUM AUTOMOBILES PTE LTD

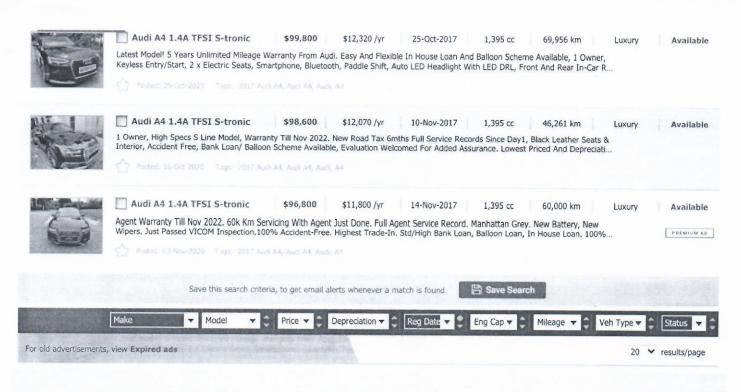
JOHNNY BOO **BODY REPAIR MANAGER**  **ALLAN WU CLAIMS CONSULTANT** 

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Véhide Owner Paralleulars	
Owner ID Type:	Singapore NRIC
Owner ID:	609J
Vehicle No.:	SLR5653X
Vehicle to be Exported:	No
Intended Deregistration Date:	04 Nov 2020
Vehicle Make:	AUDI
Vehicle Model:	A4 1.4 TFSI S TRONIC
Primary Colour:	Brown
Manufacturing Year:	2017
Engine No.:	CVN040756
Chassis No.:	WAUZZF48HA177989
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$32,098.00
Original Registration Date:	18 Aug 2017
First Registration Date:	18 Aug 2017
Transfer Count:	0
Actual ARF Paid:	\$26,938.00
Intended PARF Rebate Details	· 中国的大学工作。在在1000年度1000年100日,1000日的大学工作。
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Aug 2027
PARF Rebate Amount:	\$20,203.00
Intended COE Rebate Details	
COE Expiry Date:	17 Aug 2027
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$53,711.00
COE Rebate Amount:	\$36,442.00
Total Rebate Amount:	\$56,645.00

The information contained herein is correct as at 04 Nov 2020



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