		ASSIGNMENT
		Chamber and the state of the st
From:	Date:	Veh No: SLZ 78616 . Yr Regn: 20/81 May
Estimated Cost:		Type M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD/TP/WS/T	PRESIOD RESIEVA/INV/MV	Truck / Trailer or
To Inspect Vehicl	le No:	Make: Audi A4- c.c 1984
at Workshop m/s		Colour Blue A/C: Insured / Std / NI / NA
of		Sp.Reading 26971 T/Radio: Insured / Std / NI / NA
Insured:		Eng/No:
Policy No.	1800055765	C/No: WAUZZZF47JA147193
Claims No.	6480270200SG	Gen. Cond. Good ) Fair / Poor / Burnt
Sum Insured:	Excess: 1100	Steering (norder) Jammed / Leaked / Burnt or
(Client's Recor	d)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:		Modi: Nil S/Rim / STD A/Rim or
0. 5		Tyre Size: F: 205/60R16-
(Policy Condition	on)	R: 205/60RIL
Remark: The ve	h had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair	at the time of inspection.	TOYO/YOKO or Continental.
Bal. or Market V	alue	<u>Front</u> <u>Rear</u>
IDAC Accident F	Rport: Consistent? : Yes or No	R/Bal. 06 mm / R/Bal. mm
GIA / PR Seer	n: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. 96 mm
Est, Repairs:	days Res.: Yes or No	D.O.A. D.O.I. 06/01/21
Lum Sum:	% 3 Val.: Yes or No	'Survey held at Promiver.'
CA / REV /	REP. / 24 HRS	Des. of Damages : Frt / Rear O/S / N/S / U/C / Rooftop or
	Vehicle:	IN / OUT
Date:	Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time	Action / Instruction	
/01/21@5	54pm revert to AIG via Merin	nen
	1.01am Kok Chong informed	
	MY: 115K.	
	PV: 57.5K	
	Nett: 57.5K.	
	1.12am Informed Premium C	
	J.∠oam comirmed with ivir Bo	o final fig \$18385.64, 13 days. (Red \$10105.36, 35%)
Date/Time, File Pa	ss to? : Preli. Report	Days Of Repair: 13
1)	: Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File R		Transportation:
2)	*	Add Fee: : Site Insp (\$)8 + R8\$I
		: Interview (\$ ) Photos
Report For	mei: MER-OD	(Tech. Invs (8 ) Others
	/I.B.J: (18385.64	: West end (\$

SPORZ1140003 / PREMIUM AUTOMOBILES PTE LTD [408699] ENTRY DATE & TIME: 04/01/2021 14:15 (SGT) SUBMITTED BY, MUHD NURSYAFIQ VERSION: 1 (04/01/2021 14:15 (SGT))



## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

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.

#### ACCIDENT STATEMENT

Date of Submission Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

04/01/2021 14:15 (SGT) 03/01/2021 12:06 (SGT) Hougang Ave 3 & Tampines Rd, Singapore HOUGANG AVE 3 AND TAMPINES RD JUNCTION Singapore

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLZ7861G

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No

SIOW TZE HOU, EUGENE(XIAO ZHIHAO, EUGENE) SXXXX269Z EUGSIOW@GMAIL.COM (Phone) +65-97616972 +65-96929671

#### VEHICLE PARTICULARS

Alternative Phone No

Manufacturer Model Variant

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? Vehicle Category Private use

Yes

Audi A4

Private car

#### INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number

Cover Note Number

AIG

Comprehensive No

1800055765-01

### DRIVER

Name of Driver NRIC No Date Of Birth Occupation

SIOW TZE HOU, EUGENE(XIAO ZHIHAO, EUGENE) SXXXX269Z 24/09/1979 Indoor



Accident report SP0R21140003

Page 1 of 20

Date Of Driving Pass 21/06/2011 9 YEARS AND 7 MONTHS Driving experience Gender Male (Phone) +65-97616972 Mobile Number +65-96929671 Alt. Phone Number EUGSIOW@GMAIL.COM Email Address 273D COMPASSVALE LINK Address #14-176 Address complement 544273 Postcode Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Side Swipe
Weather Conditions Raining
Road Surface Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

Yes
Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance?

No

PASSENGER 1

Name TAN SHIN HUEY
Gender Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

#### CIRCUMSTANCES OF ACCIDENT

I WAS AT THE JUNCTION OF HOUGANG AVE 3 AND TAMPINES RD. I WAS ON HOUGANG AVE 3. THE TRAFFIC LIGHT JUST TURNED FROM RED TO GREEN. AS A RESULT, MY CARS SPEED WAS NO FAST. I WAS ON THE LEFT MOST LANE. AFTER CHECKING MY RIGHT LANE WAS AVAILABLE AND CHECKING MY BLIND SPOT, I MOVED INTO THE LANE. AFTER MOVING INTO THE LANE, I SAW ANOTHER CAR ALSO STARTED TO MOVE INTO THE SAME LANE. I HONKED AT THE CAR SEVERAL TIMES, BUT THE OTHER CAR DID NOT REACT AND CONTINUE TO MOVE INTO THE LANE. AS I HAVE MOVED INTO THE LANE FIRST, THE OTHER CAR HIT MY REAR WHEEL RIGHT AREA

#### ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMA3034Z
Vehicle Manufacturer Kia
Vehicle Model Vehicle Variant -



Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	
Postcode	-
Insurance Company Name	2
Nature Of Damage	2
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. 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>.
- 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 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.
- 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

4 Jan 2021

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel Ton Fatire

Sketch Plan

A - S L Z 78614 B - SMA3034Z

## **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/0002/2020/NS

DATE : 4-Jan-21 WIP : 65288

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 SIOW TZE HOU, EUGENE(XIAO ZHIHAO, EUGENE)

ADDRESS : BLK 273 COMPASSVALE LINK

#14-176

SINGAPORE 544273

 TELEPHONE
 :
 HP +65 97616972

 TYPE OF CLAIM
 :
 OWN DAMAGE CLAIM

 POLICY NO
 :
 1800055765-01

POLICY NO : 180005576

VEHICLE NO : SLZ 7861 G

MODEL CODE : AUDI A4 SEDAN 2.0 TFSI 8W

MODEL YEAR : 18/5/2018 ENGINE NO : CVK 058692

CHASSIS NO : WAUZZZF47JA147193

MILEAGE :

DATE IN :

ESTIMATED BY : JOHNNY BOO / ALLAN WU

ACCIDENT DATE : 3-Jan-21

PLACE OF ACCIDENT : HOUGANG AVE 3 AND TAMPINES RD JUNCTION



# \* 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 SLZ 7861 G

S/N	NATURE OF JOBS		1113	STIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND REINSTALL REAR PARKING AID AND REAR LID KICK SENSOR. CHECK FUNCTION AND RENEW ACCORDING TO DAMAGE.	S/N	\$	360.00	
2	TO RENEW REAR WINDSCREEN AND 1/4 GLASS TO FACILITATE FENDER RENEWAL.	S/N	\$	600.00	/
3	TO INSTALL SOLAR FILM FOR REAR WINDSCREEN AND 1/4 GLASS.	S/N	\$	400.00	/
4	TO CARRY OUT WATER SEEPAGE TEST FOR REAR WINDSCREEN.	S/N	\$	200.00	.150
5	TO DISLODGE AND REINSTALL REAR WIRE HARNESS FOR LIGHTS, BATTERY MANAGER, FUSE AND RELAY TRAYS, ELECTRICAL AND AUDIO EQUIPMENT.	S/N	\$	1,400.00	
6	TO REMOVE AND REINSTALL REAR SEAT, BACK REST, HAT TRAY, ABCD PILLAR TRIMS, LUGGAGE COMPARTMENT TRIMS. DISLODGE ROOF LINER AND DISENGAGE CURTAIN AIRBAG ETC.	S/N	\$	1,400.00	
	SUB TOTAL LABOUR CHARGES	:	\$	4,360.00	



# \* PREMIUM AUTOMOBILES



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

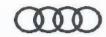
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

### ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLZ 7861 G

S/N	NATURE OF JOBS		CHARGES	SURVEYOR'S RECOMMENDATIONS
7	TO REMOVE AND TRANSFER RHS REAR DOOR'S MULTI- LOCK SYSTEM AND POWER WINDOW DEVICES. INSPECT FOR DAMAGES.	S/N	\$ 280.00	
8	TO DISMANTLE AND RENEW REAR BUMPER AND RHS REAR DOOR. CUT OUT AND WELD RHS REAR FENDER. RE-ORGANISE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.		\$ 5,600,00	3500
9	TO RESPRAY REAR BUMPER, RHS REAR FENDER, RHS REAR DOOR, DOOR HANDLE, RHS SILL PANEL, DOOR ENTRANCES, ROOF CHANNEL, DRAIN PANEL AND END PANELLING. TO CARRY OUT STONE CHIP TREATMENT AND JOINT SEALER WORKS.		\$ 5,550.00	(3.5+2) x 550 + 100 = 3125
10	TO RENEW RHS REAR RIM AND CARRY OUT WHEEL ALIGNMENT.	S/N	\$ 280.00	
11	TO CARRY OUT DIAGNOSTIC CHECK.	S/N	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 16,262.00	



# \* PREMIUM AUTOMOBILES



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

### MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLZ 7861 G

QTY		DAMAGED PARTS & PRICES S/NETT REMARKS
	\$	2,181.00 🛰
	\$	72.00 +
	\$	45.00 -
	\$	2,644.00 🗸
	\$	1,141.00
	\$	609.00
	\$	19.00
	\$	2,354.00
NEC	\$	203.00
NEC	\$	47.00
NEC	\$	65.00 ?
	\$	16.00+
	\$	563.00
	\$	119.00 ?
i	\$	87.00 🔧
	\$	684.00
S/N	\$	200.00
S/N	\$	100.00
S/N	\$	280.00
5/N	\$	180.00 /
S/N	\$	140.00 🖊
S/N	\$	180.00
	\$	300.00 ?
:	\$	12,229.00
:		16,262.00 28,491.00
	NEC NEC NEC S/N S/N S/N S/N	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

ALL CHARGES ARE INCLUSIVE OF GST

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

NAME

SURVEYED DATE

**AUTHORISED DATE** 

**EXCESS COST** 

LIABILITY

REMARKS

Adrian hing 06/01/21

: Not Anthonsed, 13 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:	Singapore NRIC	
Owner ID:	269Z	
Vehicle No.:	SLZ7861G	CT (
Vehicle to be Exported:		
Intended Deregistration Date:	No	
Vehicle Make:	06 Jan 2021	
	AUDI	
Vehicle Model:	A4 SEDAN 2.0 TFSI S TRONIC (NAV)	
Primary Colour:	Blue	
Manufacturing Year:	2018	
Engine No.:	CVK058692	
Chassis No.:	WAUZZZF47JA147193	
Maximum Power Output:	140.0 kW (187 bhp)	
Open Market Value:	\$33,419.00	
Original Registration Date:	18 May 2018	
First Registration Date:	18 May 2018	
Transfer Count:	0	
Actual ARF Paid:	\$38,787.00	
Interned PARE Repair Delenis		
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	17 May 2028	
PARF Rebate Amount:	\$29,090.00	
Intended COR Reparts Details		
COE Expiry Date:	17 May 2028	
COE Category:	B - Car above 1600cc or 97kW (130bhp)	
COE Period(Years):	10	
QP Paid:	\$38,501.00	
COE Rebate Amount:	\$28,347.00	
Total Rebate Amount:	\$57,437.00	

The information contained herein is correct as at 06 Jan 2021

New Cars

**Used Cars** 

Rental Cars

Sell My Car

Directory

Products

Insurance

Articles

Forum

Resources

Available

PREMIUM AD

40,800 km

30-May-2018

\$119,888

\$13,610 /yr

New Year Sale! 1 Owner! Powerful 187bhp Engine! Fully Maintained By Agent With Full Service Records. Still Under Agent Warranty.

Showroom Condition Like New Carl Ideal For Family Sedant Low Downpayment With Attractive Interest Rate At 1.88%

1,984 cc

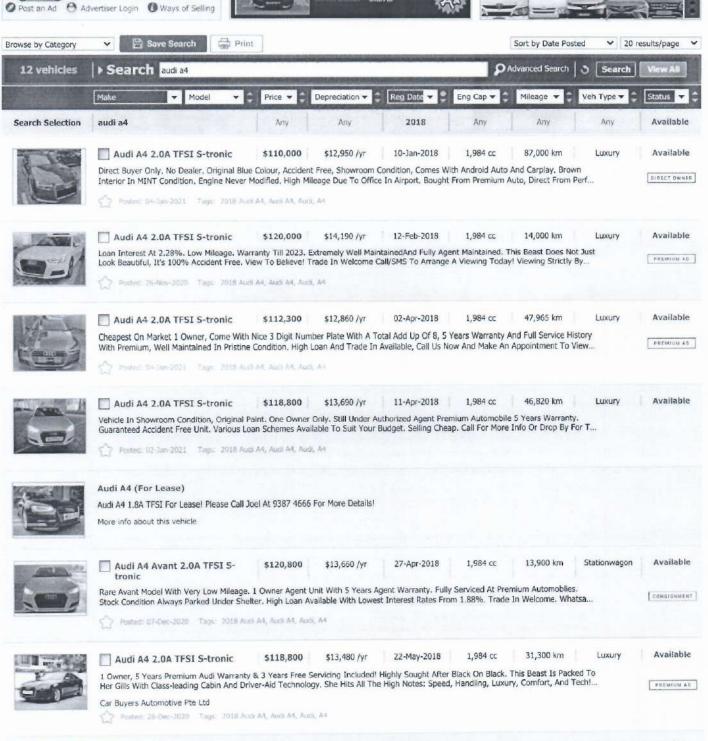
Luxury





Rare Powerful 2.0 Turbo Mated With 8 Speed DSG Gear. Above \$10k Spent Over Past 1 Year For Mod And Replaced All Wear And Tear. StarAd







Audi A4 2.0A TFSI S-tronic