

ov.sg/Ita/vrl/action/enquireRebateByPublicBeforeDeregInput?FUNCTION_ID=F0304009T

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	203H
Vehicle No.:	SMV4094H
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Feb 2021
Vehicle Make:	AUDI
Vehicle Model:	A5 SPORTBACK 2.0 TFSI S TRONIC (110 KW)
Primary Colour:	White
Manufacturing Year:	2020
Engine No.:	DEM024876
Chassis No.:	WAUZZZF55LA021281
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$36,473.00
Original Registration Date:	29 Sep 2020
First Registration Date:	29 Sep 2020
Transfer Count:	0
Actual ARF Paid:	\$43,063.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Sep 2030
PARF Rebate Amount:	\$32,297.00
COE Expiry Date:	28 Sep 2030
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$40,989.00
COE Rebate Amount:	\$39,338.00
Total Rebate Amount:	\$71,635.00

The information contained herein is correct as at 23 Feb 2021

OK

Audi A5 Sportback 2.0A TFSI S-tronic Design

- Overview
- Financial
- Accessories
- Similar
- Research
- Photos
- Map

Price	\$165,000		
Depreciation ?	\$16,040 /yr View models with similar depre	Reg Date	31-Dec-2019 (8yrs 10mths 7days COE left)
Mileage	7,000 km (6.1k /yr)	Manufactured ?	2019
Road Tax ?	\$1,194 /yr	Transmission	Auto
Dereg Value ?	\$67,490 as of today (change)	OMV ?	\$38,532
COE ?	\$42,020	ARF ?	\$45,945
Engine Cap	1,984 cc	Power	140.0 kW (187 bhp)
Curb Weight ?	1,535 kg	No. of Owners ?	1
Type of Vehicle	Luxury Sedan		

Features

Car In Navarra Blue. View specs of the Audi A5 Coupe (2017-2020)

Accessories

Pr Done By Reputable Solar Films Specialist, In-car Cam With Extra Battery Pack, Paint
Di Reverse Camera, Audi Car Mats.

Compare

ASS. REC. BY: P. Anu

REF: CC3/AIG 21002475/RH#3

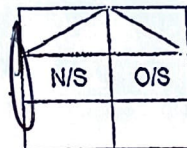
203H

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
☒ TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SMV 4094H
 at Workshop m/s PREMIUM
 of 281, ALEXANDRA RD
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: TBA
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: 177K
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / ☒ REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SMV 4094H Yr Regn: 2020 SEP
 Type: ☒ M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: AIWA ASSB 210TFS1 c.c. 1984
 Colour: WHITE A/C: Insured / Std / NI / NA
 Sp. Reading: 15863 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: WAW 22F55 LA021281
 Gen. Cond: Good / ☒ Fair / Poor / Burnt
 Steering: ☒ In order / Jammed / Leaked / Burnt or
 Brake: ☒ In order / Jammed / Leaked / Burnt or
 Mod: Nil / ☒ SRM / STD A/Rim or
 Tyre Size: F: 245/40R18
 R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / ☒ PIR / SUMI /
 TOYO / YOKO or _____

Front Rear
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. 10/02/2021 D.O.I. 22/02/21
 Survey held at PREMIUM

Des. of Damages: Frt / Rear / OIS / ☒ NIS / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>Repair limit = 105K</u>

Date/Time, File Pass to?

☐ : Prel. Report
☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$ _____)
☐ : Interview (\$ _____)
☐ : Tech. Invs (\$ _____)
☐ : Weekend (\$ _____)

TOTAL

Report Format: _____

Lump Sum / L.B.F. (%) _____

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/0154/2021/GW
DATE	:	20-Feb-21
WIP	:	

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY.

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-1 AIG BUILDING

SINGAPORE 079120

Attn: Motor Claims Dept

Tel: 6880 4602 - FAX : 6880 4838

OWNER'S NAME	:	MDM. CHUA LAY NHOG
ADDRESS	:	69 CHO A CHU KANG LOOP #11-05 SINGAPORE 689672
TELEPHONE	:	96830480
TYPE OF CLAIM	:	OWN POLICY CLAIM
POLICY NO	:	2070139991
VEHICLE NO	:	SMV 4094 H
MODEL CODE	:	A5 SB 2.0 TFSI
MODEL YEAR	:	29/9/2020
ENGINE NO	:	DEM024876
CHASSIS NO	:	WAUZZZF55LA021281
MILEAGE	:	
DATE IN	:	
ESTIMATED BY	:	JOHNNY BOO / ALLAN WU
ACCIDENT DATE	:	10-Feb-21
PLACE OF ACCIDENT	:	EXITING YU HUA MARKET CAR PARK TURNING RIGHT INTO JURONG EAST STREET 24

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SMV 4094 J

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER LHS FRONT DOOR AND LHS REAR DOOR'S MULTI-LOCK SYSTEM AND POWER WINDOW DEVICES. INSPECT FOR DAMAGES.	S/N \$ 800.00	
2	TO DISMANTLE AND RENEW LHS FRONT DOOR, LHS REAR DOOR AND LHS SILL PANEL TRIM. TO REPAIR LHS REAR FENDER. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 3,600.00 1500	
3	TO RESPRAY LHS FRONT DOOR, LHS REAR DOOR, DOOR HANDLES, LHS SILL PANEL TRIM AND LHS REAR FENDER.	\$ 4,300.00 2400	
4	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	
TOTAL LABOUR CHARGES		: \$ 8,892.00	

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TEL : 6366 2323 FAX : 6841 1183

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

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMV 4094 J

S/N PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES	
		S/NETT	REMARKS
1 FRONT DOOR-LH <i>H/</i>		\$ 3,884.00	
2 FRONT DOOR OUTER SEAL-LH <i>re/</i>		\$ 222.00	
3 BONDING AGENT <i>re/</i>		\$ 49.00	
4 CLEANING SOLUTION <i>re/</i>		\$ 68.00	
5 APPLICATOR <i>re/</i>		\$ 8.00	
6 FRONT DOOR CATCH-LH <i>re/</i>		\$ 120.00	
7 FRONT DOOR TRIM-LH <i>?</i>		\$ 164.00	
8 FRONT DOOR HANDLE TRIM PLATE-LH <i>X</i>		\$ 88.00	
9 FRONT DOOR HANDLE HOUSING-LH <i>X</i>		\$ 8.00	
10 FRONT DOOR HANDLE COVER-LH <i>re/</i>		\$ 6.00	
11 REAR DOOR-LH <i>St/</i>		\$ 3,884.00	
12 REAR DOOR OUTER SEAL-LH <i>re/</i>		\$ 222.00	
13 BONDING AGENT <i>re/</i>		\$ 49.00	
14 CLEANING SOLUTION <i>re/</i>		\$ 68.00	
15 APPLICATOR <i>re/</i>		\$ 8.00	
16 REAR DOOR CATCH-LH <i>re/</i>		\$ 120.00	
17 REAR WINDOW SLOT SEAL WITH TRIM STRIP-LH <i>X</i>		\$ 366.00	
18 SIDE MEMBER TRIM-LH <i>SC/</i>		\$ 869.00	
19 SIDE MEMBER TRIM ATTACHMENT PARS-LH <i>re/</i>		\$ 130.00	
20 ADHESIVE TAPE FOR SIDE MEMBER TRIM <i>re/</i>		\$ 212.00	
21 SUNDRIES <i>?</i>		\$ 300.00	
TOTAL SPARE PARTS	:	\$ 10,845.00	
TOTAL LABOUR CHARGES	:	\$ 8,892.00	
GRAND TOTAL	:	\$ 19,737.00	

ALL CHARGES ARE 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

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

NAME

SURVEYED DATE

AUTHORISED DATE

EXCESS COST

LIABILITY

REMARKS

: Rasul - Hp 96010068
: 22/02/2021 @ 1030
: 8 days
: EXCESS: THA
: PERVA
: Reem before put

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

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:

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT

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 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. 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 11/02/2021 13:12 (SGT)
Date of Accident 10/02/2021 10:42 (SGT)
Exact Location of Accident Jurong East, Singapore
Additional Location Information EXITING YU HUA MARKET CAR PARK TURNING RIGHT INTO JURONG EAST STREET 24
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMV4094H

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHUA LAY NGOH
NRIC No SXXXX203H
Email Address JANICECHUA@YAHOO.COM
Mobile Phone No (Phone) +65-96830480
Alternative Phone No (Office) +65-96830480

VEHICLE PARTICULARS

Manufacturer Audi
Model A5
Variant -
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
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company AIG
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2070139991
Cover Note Number -

DRIVER

Name of Driver SOH WEI XUAN
NRIC No SXXXX443A
Date Of Birth 26/07/1999

Occupation
 Date Of Driving Pass
 Driving experience
 Gender
 Mobile Number
 Alt. Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

Indoor
 17/05/2019
 1 YEAR AND 9 MONTHS
 Male
 (Phone) +65-90613910
 -
 SOHWEIXUAN999@GMAIL.COM
 69 CHOA CHU KANG LOOP
 #11-05
 689672
 No
 Parent
 No
 -
 -

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 the accident? No
 Number of vehicles involved in the accident 2
 Was anybody injured in the Accident? No
 Was any injured conveyed to hospital by ambulance? -
 Was any other material or property damaged? Yes
 Number of Passengers (Including Driver) 2
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

PASSENGER 1

Name CHUA LAY NHOG
 Gender Female

DETAILS OF POLICE ACTION

Was the accident reported to the police? No
 Was notice of intended Prosecution given? No
 If yes, against whom? -

CIRCUMSTANCES OF ACCIDENT

EXITING YU HUA MARKET CAR PARK TURNING RIGHT INTO JURONG EAST STREET 24 GOING TOWARDS JURONG EAST AVENUE 1. DUE TO HEAVY TRAFFIC ON BOTH SIDE OF ROAD, I HAD TO WAIT AT THE EXIT FOR ABOUT FIVE MINUTES TO CHECK FOR A SAFE TIMING TO EXIT. IT WAS AROUND 10:20AM. THERE WAS A QUEUE ON BOTH SIDE OF THE ROAD TO ENTER THE CAR PARK. THERE WAS A WHITE VAN WAITING BEHIND THE YELLOW BOX WITH ANOTHER GREY CAR. I WAVED TO THE VAN DRIVER TO CHECK WHETHER HE WOULD LET ME PASS. AFTER CHECKING THAT HE ACKNOWLEDGED ME, I TURNED INTO THE YELLOW BOX. WHEN I WAS TURNING INTO THE YELLOW BOX, THE TRAFFIC ON BOTH SIDE WAS AT A STAND STILL. AFTER I TURNED INTO THE YELLOW BOX, THE CAR HIT MY BACK LEFT SIDE -DOOR AT AROUND 10:25AM

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLT3141J

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

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 willful 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 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' lawyers/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;

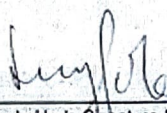
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;


(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")

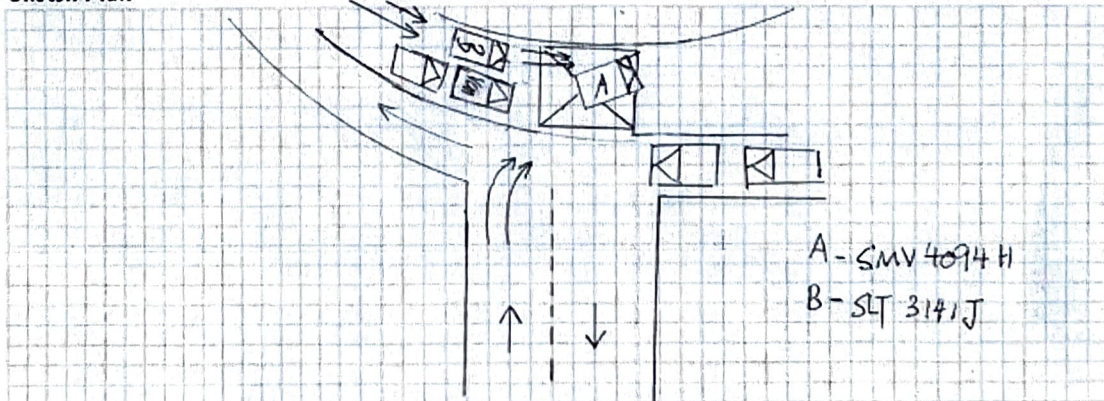
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

Exiting Tu hua market carpark turning right into Jurong East Street 24 going towards Jurong East Avenue 1. Due to heavy traffic on both side of roads, I had to wait at the exit for about five minutes to check for a safe timing to exit. It was around 10:20 am

There was a queue on both side of the road to enter the carpark. There was a white van waiting behind the yellow box with another grey car.

I waved to the van driver to check whether he would let me pass. After checking that he acknowledged me, I turned into the yellow box. When I was turning into the yellow box, the traffic on both side was at a stand still.

After I turned into the yellow box, the car hit my back^{left} side-door at around 10:25 am

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

