

~~\_\_\_\_\_~~ / E.B.: 9578.80



## 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	09/03/2021 09:36 (SGT)
Date of Accident	08/03/2021 12:30 (SGT)
Exact Location of Accident	Near 529 Balestier Rd, Singapore 329856
Additional Location Information	OPPOSITE AH HOOD ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKB606L
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	DICKSON CHU TEE CHEN
NRIC No	SXXXX298Z
Email Address	DICKSON.CTC@GMAIL.COM
Mobile Phone No	(Phone) +65-82927234
Alternative Phone No	+65-82927234

#### VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q3
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	2070117345
Cover Note Number	-

#### DRIVER

Name of Driver	NUELLE SIM JU EE
Passport No/FIN	GXXXX488W
Date Of Birth	22/08/1989
Occupation	Indoor

Date Of Driving Pass .....	23/12/2010
Driving experience .....	10 YEARS AND 3 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-93847228
Alt. Phone Number .....	-
Email Address .....	NUELLES22SIM@GMAIL.COM
Address .....	28 JALAN DATOH
Address complement .....	#27-10
Postcode .....	329426
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Spouse
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 .....	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) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### 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

ON THE 8TH OF MARCH 2021, I WAS CHANGING LANES AND I LOOKED IN THE MIRROR TO MAKE SURE THE LANE WAS CLEAR. THIS HAPPENED AT 12:30PM, UPON CHANGING INTO THAT LANE, THE COLLISION HAPPENED.

#### 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 .....	SMC6001M
Vehicle Manufacturer .....	Hyundai
Vehicle Model .....	Elantra
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
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

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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.

*[Signature]*

Policyholder's Signature / Date & Time

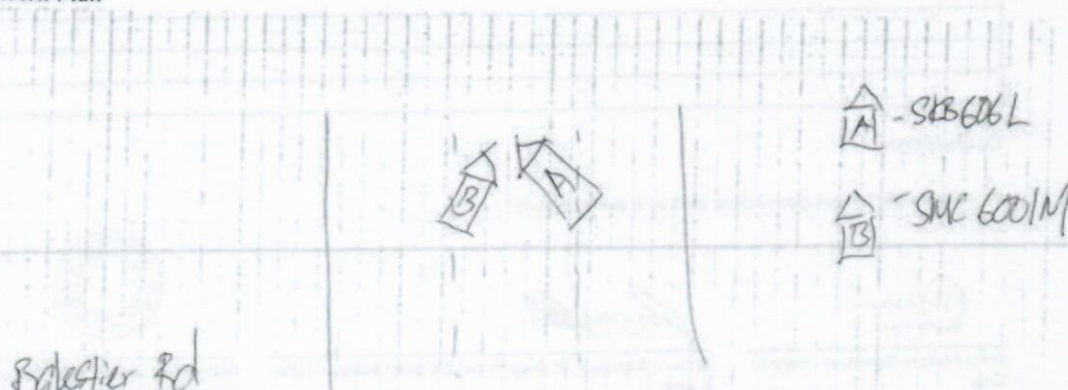
*[Signature]*

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



Witnessed by Reporting Centre Personnel

Sketch Plan

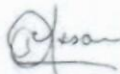


## Describe Circumstances of the Accident

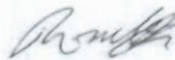
On the 8<sup>th</sup> of March 2021, I was changing lanes and I looked in the mirror to make sure the lane was clear. This happened at 12.30pm. Upon changing into that lane, the collision happened.

## 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





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/0199/2021/HR  
**DATE** : 9-Mar-21  
**WIP** : 18674

**VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 9/2/21**

**AIG ASIA PACIFIC INSURANCE PTE LTD**

78 SHENTON WAY

#07-16 AIG BUILDING

SINGAPORE 079120

Attn: Motor Claims Dept

**Tel: 6880 4602 - Fax: 6880 4838**

**OWNER'S NAME** : MR. DICKSON CHU TEE CHEN (CHU DICHEN)  
**ADDRESS** : 47 MANDALAY ROAD  
#04-03  
SINGAPORE 308227  
**TELEPHONE** : HP +65 8292 7234  
**TYPE OF CLAIM** : OWN DAMAGE CLAIM  
**POLICY NO** : 2070117345  
**VEHICLE NO** : **SKB 606 L**  
**MODEL CODE** : AUDI Q3 1.4 TFSI S-TRONIC  
**MODEL YEAR** : 11/8/2020  
**ENGINE NO** : CZD 893845  
**CHASSIS NO** : WAUZZZF38L1105853  
**MILEAGE** : -  
**DATE IN** : -  
**ESTIMATED BY** : JOHNNY BOO / ALLAN WU  
**ACCIDENT DATE** : 8-Mar-21  
**PLACE OF ACCIDENT** : BALESTIER ROAD, OPPOSITE AH HOOD ROAD

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 SKB 606 L**

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR AND HEADLIGHT WASHER ASSY AND FRONT PARKING AID.	S/N \$	480.00	✓
2	TO REMOVE AND TRANSFER LHS HEADLIGHTS'S CONTROL UNIT AND POWER MODULE.	S/N \$	<del>400.00</del>	250
3	TO DISMANTLE AND RENEW FRONT BUMPER, LHS FRONT FENDER & LHS HEADLIGHT. RE-ORGANISE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	S/N \$	<del>2,400.00</del>	500
4	TO RESPRAY FRONT BUMPER AND LHS FRONT FENDER.	\$	<del>2,500.00</del>	<del>1100</del>
5	TO CARRY OUT DIAGNOSTIC CHECK.	\$	192.00	✓
<b>TOTAL LABOUR CHARGES</b>		:	<b>\$ 5,972.00</b>	



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. SKB 606 L**

				DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY		S/NETT	REMARKS
1	FRONT BUMPER <i>del</i>	1	\$	2,161.00	✓
2	FRONT BUMPER END PLATE SHORT - LH	1	\$	59.00	X
3	FRONT BUMPER LOWER GRILLE - LH	1	\$	110.00	X
4	FRONT BUMPER END PLATE LONG	1	\$	190.00	X
5	FRONT BUMPER SPOILER <i>at</i>	1	\$	383.00	✓
6	FRONT BUMPER AIR GUIDE GRILLE - LH <i>new at</i>	1	\$	153.00	✓
7	FRONT BUMPER GUIDE SECTION - LH	1	\$	39.00	?
8	FRONT BUMPER FOAM FILLER	1	\$	102.00	X
9	FRONT BUMPER IMPACT BAR	1	\$	916.00	X
10	FRONT FENDER - LH <i>Regis</i>	1	\$	1,286.00	X
11	FRONT FENDER ATTACHMENT PARTS - LH <i>new</i>	1	\$	63.00	X
12	FRONT FENDER BRACE - LH	1	\$	88.00	X
13	FRONT FENDER BRACKET - LH	1	\$	32.00	X
14	FRONT FENDER WHEEL HOUSING LINER - LH	1	\$	240.00	X
15	WHEEL HOUSING LINER ATTACHMENT PARTS F/R	1	\$	101.00	X
16	FRONT FENDER COVER - LH	1	\$	16.00	X
17	HEADLIGHT LAMP BRACKET - LH	1	\$	118.00	X
18	LED HEADLIGHT - LH <i>at</i>	1	\$	5,589.00	✓
19	HEADLIGHT LIFT CYLINDER - LH <i>new</i>	1	\$	210.00	X
20	FRONT FENDER WHEEL COVER - LH / RH <i>LH at, RH new</i>	2	\$	536.00	✓
21	SUNDRIES		\$	250.00	?
<b>TOTAL SPARE PARTS</b>			:	\$	<b>12,642.00</b>
<b>TOTAL LABOUR CHARGES</b>			:	\$	<b>5,972.00</b>
<b>GRAND TOTAL</b>			:	\$	<b>18,614.00</b>

ALL CHARGES ARE NOT 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 : *Adrian Ly*  
SURVEYED DATE : *10/03/21.*  
AUTHORISED DATE :  
EXCESS COST :  
LIABILITY :  
REMARKS : *Not Authorised, O4 Pyp*

PLEASE NOTE : THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER LABOUR 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 / 6768 9911 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

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	298Z
Vehicle Details	
Vehicle No.:	SKB606L
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Mar 2021
Vehicle Make:	AUDI
Vehicle Model:	Q3 1.4 TFSI S TRONIC (17")
Primary Colour:	Black
Manufacturing Year:	2020
Engine No.:	CZD893845
Chassis No.:	WAUZZZF38L1105853
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$27,743.00
Original Registration Date:	11 Aug 2020
First Registration Date:	11 Aug 2020
Transfer Count:	0
Actual ARF Paid:	\$30,841.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	10 Aug 2030
PARF Rebate Amount:	\$23,130.00
Intended COE Rebate Details	
COE Expiry Date:	10 Aug 2030
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$37,102.00
COE Rebate Amount:	\$34,937.00
<b>Total Rebate Amount:</b>	<b>\$58,067.00</b>

The information contained herein is correct as at 10 Mar 2021

OK



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<b>Audi Q3</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> 1.4 TFSI S tronic [17" Rim] (A) <b>\$169,780</b> \$15,400 /yr</li> <li><input type="checkbox"/> 1.4 TFSI S tronic S line (A) <b>\$193,850</b> \$17,600 /yr</li> </ul>		Premium Automobiles	Hungary	★★★★★ 3 User Reviews
<b>Audi Q3 Sportback Mild Hybrid</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> 1.4 35 TFSI S tronic (A) <b>\$162,000</b></li> </ul>		Parallel Importers	Hungary	★★★★★ 3 User Reviews
<b>Audi RS Q3 Sportback</b> <b>NEW MODEL</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> 2.5 TFSI qu S tronic (A) <b>\$311,450</b></li> </ul>		Premium Automobiles	Germany	No Ratings yet Rate it!
Car Model	Price	Dealer	Built in	User Rating

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