CLOID IN SEPT. 11/4 CC	C3/AIG21003500/Eqd3
ASS FREC. BY: STEVE - MEN: A16	GNMENT 12/19/30
Аоді	CMIL 6317 VIRAGE
From: Dale:	Veh No: Type: M.Car/ M.Cycle / Bus / Van / Lorry / Text / Prime Mover /
Estimated Cost:	
OD TP/WS/JP RES/OD RES/EVA/INV/MY	Truck / Trailer or
To Inspect Vehicle No:	Make: Audi A4
BI Workshop m/s	Colour TRadio: Insured   3td   MI   N
ol	Sp., 1000-19
Insured:	Eng/No: WAUZZZ F 43MA SOO(87
Policy No. 2070145945	
Clalins No. 8096645066SG	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess: 1100	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh;	Modi: NII IS/Rich 1 STO A/Rim or
:	Tyre Size: F: 225/50R17
(Policy Condillon)	I K!
Remark: The veh had commenced its N/S: 10/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYOTYOKO or B Hankaok
Oal as Madral Volum	Fron! Rear
Bal. or Market Value:  Consistent?: Yes or No	R/Bal, R/Bal. R/Bal.
Consistent?: Yes or No	UBal. 5 mm UBal. 5
AO PAR OF NO	D.O.A. 15/3/21
3 Val. Vas or No	Survey held al Premium furnmobilis
Lum Sum: % 3 Val.: 165 di 165	Des. of Damages : Frt / Rear / O/S / N/S (U/C) Rooftop or
CA / REV / REP. / 24 HRS	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to cofficient
Date / Time Action / Instruction	
18/03/21@9.04am revert to AIG via Merimen.	
18/03/21@4.05pm Kok Chong informed C/A via	Merimen
18/03/21@4 57pm Informed Kee Siang C/A & ex	
_01/07/21@11.21am confirmed with Jia Yee final	
: Prell. Report D.	ays Of Repair: 12
: Final Report	Survey No. of Trip: 1 Survey Fee:
ale/Tuno, File Return to?	V 6.05 8
Add Fee:	: Site insp
	: Interview
ornes: MER-OD	: Tech. Inva
104 Sup / I.E.I: 1 12616.56	: Mediand is

## \* 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/TP/0221/2021/HR

DATE : 17-Mar-21 WIP : 19577

VEHICLE IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 17/3/21

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. NEVILLE BERNARD BESTON

ADDRESS : 12 WEST COAST RD

#07-09

SINGAPORE 128042

TELEPHONE : HP +65 91146869

TYPE OF CLAIM : OWN DAMAGE CLAIM

POLICY NO : 2070145945

VEHICLE NO : SMV 6317 C

MODEL CODE : A4 SEDAN 2.0 TFSI S TRONIC

 MODEL YEAR
 : 12/10/2020

 ENGINE NO
 : DEM 025294

CHASSIS NO : WAUZZZF43MN000687

MILEAGE : DATE IN : -

ESTIMATED BY : JOHNNY BOO / ALLAN WU

ACCIDENT DATE : 15-Mar-21

PLACE OF ACCIDENT : ALONG AYE EXPRESSWAY TOWARDS TUAS



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 SMV 6317 C

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO DISMANTLE AND REINSTALL CENTER CONSOLE TO FACILITATE RENEWAL OF FLOOR PAN. (アカカ)	/N	\$ 1,800.00	/
2	TO REMOVE AND REINSTALL REAR AND CENTRE EXHAUST SILENCER. TO ALIGN TO POSITION.	5/N	\$ 480.00	/
3	TO REMOVE AND RENEW FUEL TANK ASSY.	5/N	\$ 600.00	
4	TO REMOVE AND REINSTALL FRONT SEAT ASSY, REAR SEAT ASSY, BACK REST, ABCD PILLAR TRIMS, SILL TRIMS AND CARPETS.	5/N	\$ 2,400.00	
5	TO CUT OUT AND WELD UNDERCARRIAGE FLOOR PAN.		\$ 2,800.00	1000
6	TO RESPRAY UNDERCARRIAGE FLOOR PAN. TO CARRY OUT STONE CHIP TREATMENT, CAVITY PRESERVATION AND JOINT SEALER WORKS.  \$50 \$1		\$ 1,500.00	551
7		S/N	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 9,772.00	=



55 UBI ROAD 1, SINGAPORE 408699 TEL : 6366-2323 - FAX : 6841-1183 EMAIL: NORA.KHAL@PRI-MIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

### MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMV 6317 C

### DAMAGED PARTS & PRICES

S/N	PARTS DESCRIPTION	QTY		S/NETT	REMARKS
	LOWER REINFORCEMENT BAR - LH / MC		_	49.00	
1		1	\$		
2	FLOOR EXTENSION - LH $/$ $O()$	1	\$	141.00	
3	REAR CONNECTING STRUT FOR FLOOR PLATE / DT	1	\$	53.00	
4	INNER SOCKET HEAD BOLTS - M10x25 / MC	4	\$	12.00	
5	HEAT SHIELD FOR CENTER SILENCER / DT	1	\$	137.00	
6	FLOOR PAN HEAT SHIELD NUT / OT (LH)	5	\$	7.00	
7	FUEL TANK / Of	1	\$	5,180.00	
8	FUEL PUMP TANK SEAL RING / M	1	\$	40.00	
9	HEAT SHIELD FOR FUEL TANK / BT ((44)	1	\$	186.00	
10	CENTRE EXHAUST SILENCER / DD	1	\$	896.00	
11	DUAL CLIP FOR EXHAUST SILENCER / MEC	1	\$	59.00	
12	REAR SILENCER DUAL CLIP / HC	1	\$	104.00	
13	REAR UNDERBODY TRIM - LH / CAT COMECK	1	\$	133.00	
14	SUNDRIES 0		\$	300.00	
	TOTAL SPARE PARTS	:	\$	7,297.00	
	TOTAL LABOUR CHARGES	:	\$	9,772.00	
	GRAND TOTAL	:	\$	17,069.00	

ALL CHARGES ARE NOT 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

NAME

SURVEYED DATE

**AUTHORISED DATE** 

**EXCESS COST** 

LIABILITY

REMARKS

Steve CLKK) 00- AM AL EXIVI -?

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 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

SYCHAGOOOT/PREMIUM AUTOMOBILES PTE LTD (408699)
FOR DATE & TIME: 16/03/2021 12/31 (SGT)
SANTTED BY HAIKAL RUDDIN
SANTTED BY HAIKAL RUDDIN SISMI TEU ST. TOTAL MUDDIN SERSION 1 (16/03/2021 12/31 (SGT))



## SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

power and collects, the details of the accident to speed up the claims process.

2 This restriction of Conscience of the Congression and of 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 that he had a confident or the confidence of t

The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies. policy hability

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 take 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 this report will, for a fee, be made available upon application by interested parties.

7. By the kogement 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

16/03/2021 12:31 (SGT) 15/03/2021 13:15 (SGT) ALONG AYE TOWARDS TUAS, NEAR NUS EXIT, BEFORE SPEED CAMERA.

Singapore

#### DETAILS OF OWN VEHICLES

Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

Email Address Mobile Phone No

Alternative Phone No

SMV6317C

No

Audi

Private use

Private car

Comprehensive

2070145945

No

A4

NEVILLE BERNARD BESTON SXXXX989F FAMILY.BESTON@GMAIL.COM

(Phone) +65-91146869

+65-92367716

VEHICLE PARTICULARS

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

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy

Policy Number Cover Note Number

DRIVER

Name of Driver NRIC No Date Of Birth

**NEVILLE BERNARD BESTON** SXXXX989F 15/02/1958

Accident report SP0R213G0001

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Occupation Indoor Dale Of Driving Pass 27/12/2007 Driving experience 13 YEARS AND 3 MONTHS Gender Male Mobile Number (Phone) +65-91146869 Alt. Phone Number +65-92367716 FAMILY.BESTON@GMAIL.COM Email Address 12 WEST COAST RD Address Address complement #07-09 128042 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 Hit by fallen tree / Other objects Type of Accident Clear Weather Conditions Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? No 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 No Was the accident reported to the police? No Was notice of intended Prosecution given? If yes, against whom? DRIVING IN LANE 4 ALONG AYE TOWARDS TUAS NEAR NUS. CONSTRUCTION WORK IN LANE 4 MEANT NEED TO CHANGE CIRCUMSTANCES OF ACCIDENT LANES, I HIT AN OBJECT LYING ON ROAD, RESULTING IN LOUD BANG TO UNDERSIDE OF CAR. ATTACHMENT(S) Yes Are accident photos available for attachment? Was there any video captured by Car Camera? Yes Was there any audio recorded?

DESCRIBENCES OF THE ACCIDENT OF THE METER TO CHAINGE IN CANES TO CHAINGE IN CANES OF THE METER TO CHAINGE IN CANES OF CAR.	Describe Circumstances of the Accident
LANGES. HIT ELLECT LYING ON ROAD, RESULTING IN LIEB  RANG TO UNDERSIDE OF CAR.	DRIVING IN CANE 4 HONG ATE TOWARD WERD TO CHATGE
SANG TO LONGER SIDE OF CAR.	LAWES. HIT OBJECT LYING ON ROAD, RESULTING IN LICH
	BANG TO UNDERSIDE OF CAR.

#### Declaration

Wie declare the foregoing particulars are true in every respect

Policyholder's Signature / Date & Time

S MIXZIM

S PM

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

15 MARCH

Witnessed by Reporting Centre Personnel



#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly 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 truthful and accurate as possible. Any will inscrepessentation or withholding of mater of facts may allow insurance companies to repudiate policy liability
- 2. The issue and acceptance of this Formby insurance companies is not an admission of bolicy liability on the part of the insurance. companies
- 5 Any talse 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)

- Lunderstand, acknowledge, agree and consent that (a) My insurer, my workshop and the General hisurance 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 possessed by my insurer (collectively the Personal Information ) and disclose and transfer such Personal Information to an essureriswind 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 tens, 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 reliabing to the claims
- (a) investigating the accident and/or my claims;
- (#) 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 invalve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes real
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect. (collectively the "Purposes")
- 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 finctuding their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes

Driver's Signature (if driver is not the policyhelder) / Date

& Time

Witnessed by Reporting Cert e Personnel

Sketch Plan

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