-			(a) (a) (b) (b) (b)			
	me	10	rasi			

REF:

CC3/AIG21004463/ATCE2

SS, REG, BY:	ACCIONMENT
	ASSIGNMENT STATE OF THE STATE O
rom: Date:	Veh No: SJS 1912T. Yr Regn: 2020 10ct.
stimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
D/TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or
o Inspect Vehicle No:	Make: Andi Q3. c.c 1398
nt Workshop m/s	Colour A/C: Insured / Std / NI / NA
of	Sp.Reading A/C: Insured / Std / NI / NA T/Radio: Insured / Std / NI / NA
nsured:	Eng/No:
Policy No. 2070151560	C/No: WAUZZZ F 32M1011498
Claims No. 6957542811SG	Gen. Cond. Good Fair / Poor / Burnt
Sum Insured: Excess: 120	Steering: morder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder/ Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 215/63R17.
(Policy Condition)	R: 215/65R17.
Remark: The veh had commenced its	
repair at the time of inspection.	TOYO/YOKO or Continental.
Bal. or Market Value:	Front / Rear
IDAC Accident Rport: Consistent? : Yes or No	//
GIA / PR Seen: Consistent?: Yes or No	1 - 1/21
Est. Repairs: days Res.: Yes or N	
Lum Sum: % 3 Val.: Yes or N	
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear O/S N/S / U/C / Rooftop or
Vehic	icle: IN / OUT
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction	
	epair cost of \$8966.76 @ 6 days.
	7604.24;66%
mv : /501c	<u> </u>
PV: 62.5/C	
Nett: 87.51C	
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 6
: Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2)	Add Fee: Site Insp (\$)3+RSSI
The second secon	: Interview (\$) Fhotos
Report Format:	: Tech. Invs (3) Others
Lump Sum / LBJ: (3	:Weel end (\$

SPOR21280001-01 / PREMIUM AUTOMOBILES PTE LTD [408699] ENTRY DATE & TIME: 08/02/2021 10:36 (SGT) SUBMITTED BY: NADIA HANI VERSION: 2 (31/03/2021 17:10 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> 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.

4. The issue and acceptance of this report will for a fee, be made available upon application by interested parties.

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

08/02/2021 10:36 (SGT) Date of Submission 06/02/2021 13:00 (SGT) Date of Accident Near Cluny Rd, Singapore **Exact Location of Accident** HOLLAND ROAD HEADING TOWARDS ORCHARD Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

SJS1912T Vehicle Registration Number

INSURED/POLICYHOLDER

No Is company? CHAN LEON CHI HONG Name Of Registered Owner SXXXX172J NRIC No LEONPING@SINGNET.COM.SG **Email Address** (Phone) +65-94234238 Mobile Phone No +65-91997099 Alternative Phone No

VEHICLE PARTICULARS

Audi Manufacturer Q3 Model Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to Yes your vehicle? Private car Vehicle Category Auto Transmission 1395 CC

INSURANCE COMPANY

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company Comprehensive Type of Coverage No Fleet Policy 2070151560 Policy Number Cover Note Number

DRIVER

CHAN LEON CHI HONG Name of Driver SXXXX172J NRIC No



12/06/1974 Date Of Birth Indoor Occupation 29/01/1999 Date Of Driving Pass 22 YEARS AND 1 MONTH Driving experience Male Gender (Phone) +65-94234238 Mobile Number +65-91997099 Alt. Phone Number LEONPING@SINGNET.COM.SG **Email Address** 23 BALMORAL PARK Address #02-04, PINEWOOD GARDENS Address complement 259852 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 Side Swipe 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 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) 3 Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance?

PASSENGER 1

Name TAN HUI PING Gender Female

PASSENGER 2

Name KEIRAN MATTHIAS CHAN Gender Male

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 TRAVELLING DOWN HOLLAND ROAD, HEADING TOWARDS ORCHARD. I TOOK THE OUTER LEFT LANE WITH INTENTION OF TURNING LEFT TO CLUNY ROAD. HOLLAND ROAD IS A THREE LANE ROAD AT THE LOCATION OF THE ACCIDENT. THE MIDDLE AND OUTER RIGHT LANE WERE FILLED WITH VEHICLES AND ALL STATIONARY BECAUSE OF A RED LIGHT AHEAD. THE OUTER LEFT LANE I WAS TRAVELLING ON WAS CLEAR AND I WAS TRAVELLING SLOWLY ROUGHLY 20-30KM/H IN VIEW OF MANY VEHICLES BEING STATIONARY ON THE ROAD.

SUDDENLY ONE OF THE VEHICLES AT THE MIDDLE LANE SWERVED OUT OF HIS LANE TO CUT INTO MY LANE WITHOUT WARNING. NATURALLY THE SIDE OF HIS VEHICLE COLLIDED INTO THE FRONT RIGHT SIDE OF MY VEHICLE, AND NUDGED MY WHOLE CAR TO THE LEFT AND MY CAR WENT ONTO THE SIDE WALK ON THE LEFT HAND SIDE.

ATTACHMENT(S)

Are accident photos available for attachment?

Yes
Was there any video captured by Car Camera?

No



DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLT8811B
Vehicle Manufacturer	Hyundai
Vehicle Model	-
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

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 truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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 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.

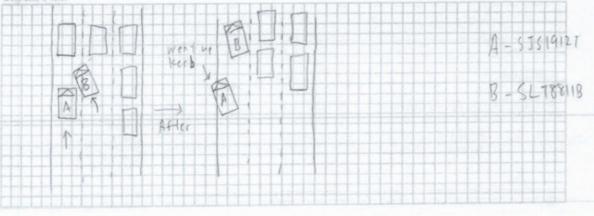
08/02/21 0930an

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Sketch Plan



Describe Circumstances of the Accident	
I was travelling down Holland food, heading towards Orchard I took the obter left Tlane Wilty the interfront of furning left to China Road Holland food is a three slame road of the location of the accident the inidale and outs right, lave were filled with Jehreles and all stationary because of a vid light alease the outer left lade I was offerelling on was	L ol.
Suddenly one of the Jehreles at the middle lane Tewerwed at of his lane to but into try lane without worting Nativally the Rid of his Vehicle Collided into two front right lade of my vehicle, and midged hilly whole that out the left and my large laft hand side.	nudge

Declaration

We declare the foregoing particulars are true in every respect.

8/2/21

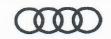
Q-500m

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel Tony Foon

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 : 6366 2323

CONTACT NO

: 6841 1183

REFERENCE

FAX NO

: PA/OD/0131/2021/TF

DATE

11-Feb-21

WIP

14770

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

YOUR INSURED VEH NO: SLT 8811 B

NTUC INCOME INSURANCE CO - CLAIMS DEPARTMENT

73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSE SINGAPORE 189556

ATTN: MOTOR CLAIMS DEPT

TEL: FAX: 6338 1504

OWNER'S NAME

: MR. CHAN LEON CHI HONG

ADDRESS

23 BALMORAL PARK

#02-04

SINGAPORE 259852

TELEPHONE

: HP +65 94234238

TYPE OF CLAIM

OWN DAMAGE CLAIM

POLICY NO

2070151560

VEHICLE NO

: SJS 1912 T

MODEL CODE

Q3 1.4 TFSI S-TRONIC

MODEL YEAR

28/10/2020

ENGINE NO

CZD C05420

CHASSIS NO

WAUZZZF32M1011498

MILEAGE

:

DATE IN **ESTIMATED BY**

JOHNNY BOO / ALLAN WU

ACCIDENT DATE

6-Feb-21

PLACE OF ACCIDENT

HOLLAND ROAD TOWARDS ORCHARD

* 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 SJS 1912 T

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HWADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR, HEADLIGHT WASHER ASSY AND FRONT PARKING AID	S/N	\$ 480.00	
2	TO REMOVE AND TRANSFER RHS HEADLIGHTS'S CONTROL UNIT AND POWER MODULE.	S/N	\$ 400.00	+
3	TO REMOVE AND TRANSFER RHS FRONT DOOR'S MULTI- LOCK SYSTEM AND POWER WINDOW DEVICES. INSPECT FOR DAMAGES.	S/N	\$ 400.00	280
4	TO DISMANTLE AND RENEW FRONT BUMPER, RHS FRONT FENDER, RHS FRONT DOOR AND RHS HEADLIGHT. RE-ORGANISE CRASH MANAGEMENT COMPONENTS. REINSTAIL ALL PARTS REMOVED		\$ 3,200.00	. 1000
5	TO RESPRAY FRONT BUMPER, RHS FRONT FENDER, AND RHS FRONT DOOR.		\$ 3,400.00	(65)
6	TO RENEW RHS FRONT RIM WITH TYRE. TO CARRY OUT PRE/POST WHEEL ALIGNMENT.	S/N	\$ 520.00	· 320:=40+40+2
7	TO CARRY OUT DIAGNOSTIC CHECK.	S/N	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 8,592.00	





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. SJS 1912 T

DAMAGED PARTS & PRICES

5/N	PARTS DESCRIPTION	YTÇ	S/NETT REMARKS
	ERONT BLIMPER De Ld	1	\$ 2,161.00
1	THORT BOTH ER		59.00
2	FRONT BUMPER CLOSING ELEMENT - RH	1	\$
3	FRONT BUMPER LOWER CLOSING ELEMENT - CENTER MAN	2	\$ 190.00 +
4	FRONT BUMPER SPOILER	1	\$ 383.00
5	FRONT BUMPER AIR GRILLE - RH	1	\$ 153.00
6	FRONT BUMPER GUIDE SECTION - RH	1	\$ 39.00
7	FRONT FENDER Deviled	1	\$ 1,286.00
8	FRONT FENDER ATTACHMENT PARTS ~~~~~	1	\$ 63.00 ×.
9	FRONT FENDER BRACE - RH	1	\$ 88.00
10	FRONT FENDER BRACKET - RH	1	\$ 32.00
11	FRONT WHEEL HOUSING LINER - RH	1	\$ 240.00
12	FRONT WHEEL HOUSING LINER ATTACHMENT PARTS	1	\$ 101.00
13	FRONT WHEEL HOUSING LINER COVER - RH	1	\$ 16.00
14	FRONT HEADLIGHT MOUTING - RH / ~~	1	\$ 118.00 🗡
15	FRONT HEADLIGHT - RH	1	\$ 5,589.00 🖈
16	FRONT HEADLIGHT LIFT CYLINDER - RH	1	\$ 210.00
17	FRONT WHEEL ARCH TRIM - LH / RH LH MES RH LT	2	\$ 536.00
18	FRONT DOOR - RH R	1	\$ 2,805.00
19	FRONT DOOR OUTER SEAL - RH	1	\$ 166.00 +
20	FRONT DOOR ATTACHMENT PARTS MA	1	\$ 157.00 *
	SUB TOTAL SPARE PARTS	:	\$ 14,392.00

ALL CHARGES ARE INCLUSIVE OF GST

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

PREMIUM AUTOMOBILES



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

NAME

SURVEYED DATE

:

AUTHORISED DATE

EXCESS COST

LIABILITY

REMARKS

XH Anthonized, of Days

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

Owner ID Type:	Singapore NRIC
Owner ID:	172J
Vehicle Details	大学 日本
Vehicle No.:	SJS1912T
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Apr 2021
Vehicle Make:	AUDI
Vehicle Model:	Q3 1.4 TFSI S TRONIC (17")
Primary Colour:	Grey
Manufacturing Year:	2020
Engine No.:	CZDC05420
Chassis No.:	WAUZZZF32M1011498
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$27,882.00
Original Registration Date:	28 Oct 2020
First Registration Date:	28 Oct 2020
Transfer Count:	0
Actual ARF Paid:	\$31,035.00
Intended PARE Repate Details	Yes
PARF Eligibility:	
PARF Eligibility Expiry Date:	27 Oct 2030
PARF Rebate Amount:	\$23,276.00
COE Expiry Date:	27 Oct 2030
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
OP Paid:	\$40,990.00
COE Rebate Amount:	\$39,160.00
Total Rebate Amount:	\$62,436.00

The information contained herein is correct as at 07 Apr 2021