

ASS. REC. BY:

REF:

CC3/AIG21004566/Avc

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

☒ OD / ☐ TP / ☐ WS / ☐ TP RES / ☐ OD RES / ☐ EVA / ☐ INV / ☐ MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. 1900165539Claims No. 9525694703SG

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

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: SKU3039D. Yr Regn: 2019 / sept.Type: ☒ M.Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or

Make: Audi Q7. C.C. 1984Colour: Black. A/C: ☐ Insured / ☐ Std / ☐ NI / ☐ NASp. Reading: 31196 T/Radio: ☐ Insured / ☐ Std / ☐ NI / ☐ NA

Eng/No: _____

C/No: WAUZ224M9KD032971Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ BurntSteering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orBrake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orModi: ☒ Nil / ☐ S/Rim / ☐ STD A/Rim orTyre Size: F: 255/55R19.R: 255/55R19.☒ BS / ☐ DUN / ☐ EXNOVA / ☐ GY / ☐ FS / ☐ LIZA / ☐ MIC / ☐ OHTSU / ☐ PIR / ☐ SUMI /

TOYO / YOKO or

Front _____ / Rear _____

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. 3/14/21 D.O.I. 08/04/21Survey held at Premium.Des. of Damages: ☒ Frt / ☒ Rear / ☒ O/S / ☐ N/S / ☐ U/C / ☐ Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>OD ALG.</u>
	<u>MV: 250K.</u>
	<u>PV: 91.9K</u>
	<u>Nett: 158.1K</u>

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

S + RS. SI

Photos

Others

TOTAL

Report Format: _____

Lump Sum / L.R.: (\$ _____)

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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 007B

Vehicle Details

Vehicle No.: SKU3039D
Vehicle to be Exported: No
Intended Deregistration Date: 08 Apr 2021
Vehicle Make: AUDI
Vehicle Model: Q7 2.0 TFSI QU (252 BHP) PSR
Primary Colour: Black
Manufacturing Year: 2019
Engine No.: CYR091525
Chassis No.: WAUZZZ4M9KD032971
Maximum Power Output: 185.0 kW (248 bhp)
Open Market Value: \$60,434.00
Original Registration Date: 23 Sep 2019
First Registration Date: 23 Sep 2019
Transfer Count: 0
Actual ARF Paid: \$80,782.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 22 Sep 2029
PARF Rebate Amount: \$60,586.00

Intended COE Rebate Details

COE Expiry Date: 22 Sep 2029
COE Category: B - Car above 1600cc or 97kW (130bhp)
COE Period (Years): 10
QP Paid: \$37,000.00
COE Rebate Amount: \$31,285.00
Total Rebate Amount: \$91,871.00

The information contained herein is correct as at 08 Apr 2021

OK



ANNOUNCING Car (S) Pte Ltd
as sgCarMart Premium Dealer 2021



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SG Motors Standard



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1 vehicles

Audi Q7

Advanced Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Audi Q7		Any	Any	2019	Any	Any	Any	Available
	Audi Q7 2.0A TFSI Quattro		\$248,800	\$26,670 /yr	31-Mar-2019	1,984 cc	26,121 km	SUV	Available
01 Owner! AA Trust Certified Quality Pre-Owned Vehicle! 7-Seater 2.0L Audi Q7 With Audi Virtual Cockpit + View, Audi Smartphone Interface, Audi Sound System, Audi Pre Sense Front, Convenience Key With Sensor-Controlled Luggage Compartment Lid Release! 100...									
AA Trust Automotive									
Posted: 31-Mar-2021 Tags: 2019 Audi Q7, Audi Q7, Audi, Q7									

Save this search criteria, to get email alerts whenever a match is found.

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
For old advertisements, view Expired ads									
									20 results/page

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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	05/04/2021 12:41 (SGT)
Date of Accident	03/04/2021 21:00 (SGT)
Exact Location of Accident	1 Park Rd, Singapore 059108
Additional Location Information	PEOPLE'S PARK COMPLEX CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU3039D
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LI HONGTAO
NRIC No	SXXXXX007B
Email Address	HONGTAO_LI@HOTMAIL.COM
Mobile Phone No	(Phone) +65-90685172
Alternative Phone No	+65-90685172

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q7
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
Transmission	Auto
CC	1975

INSURANCE COMPANY

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

DRIVER

Name of Driver	LI HONGTAO
NRIC No	SXXXXX007B

Date Of Birth	09/09/1978
Occupation	Indoor
Date Of Driving Pass	09/07/2008
Driving experience	12 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90685172
Alt. Phone Number	+65-90685172
Email Address	HONGTAO_LI@HOTMAIL.COM
Address	5A PUAY HEE AVENUE
Address complement	-
Postcode	S347470
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	Collided into Property
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
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

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

CIRCUMSTANCES OF ACCIDENT

IN CARPARK GANTRY, HIT THE BACKSIDE ON 3/APRIL 21:00 WHEN EXITING THE CARPARK. THE IU CANNOT DETECT, SO I REVERSE AND HIT ONTO THE BACK POLE

ATTACHMENT(S)

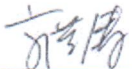
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

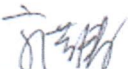
Describe Circumstances of the Accident



In Carpark Entry, hit the backside on 3/Apr 21:00. When exiting the car park. The IV cannot detect, so I reverse. and hit onto the back pole.

Declaration

We declare the foregoing particulars are true in every respect.

 5/Apr/2021
8:34
Policyholder's Signature / Date & Time


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

 
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 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. 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

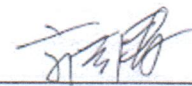
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

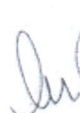

(collectively the "Purposes")

(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

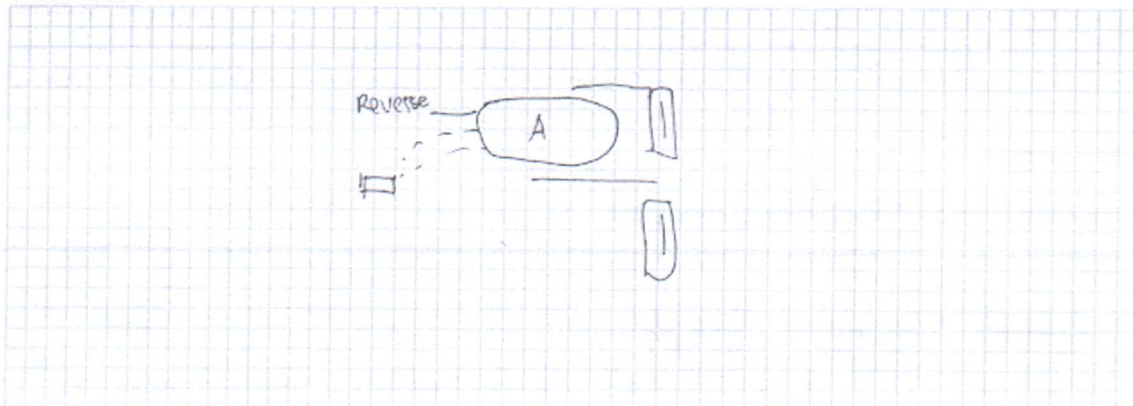
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 5/Apr/2021
8:35
Policyholder's Signature / Date & Time


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

 
Witnessed by Reporting Centre Personnel

Sketch Plan



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/0288/2021/HR
DATE : 6-Apr-21
WIP : 22046

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 8/4/21

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. LI HONGTAO
ADDRESS :
SINGAPORE 347470
TELEPHONE : HP +65 90685172
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : -
VEHICLE NO : **SKU 3039 D**
MODEL CODE : A4 SEDAN 2.0 TFSI S TRONIC
MODEL YEAR : 23/9/2019
ENGINE NO : CYR 091525
CHASSIS NO : WAUZZZ4M9KD032971
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 3-Apr-21
PLACE OF ACCIDENT : NEAR PEOPLE PARK COMPLEX CARPARK

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 SKU 3039 D

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND REINSTALL REAR PARKING AID AND REAR LID KICK SENSOR. CHECK FUNCTION.	S/N \$	360.00	✓
2	TO REMOVE AND TRANSFER REAR LID'S CONVENIENCE LOCK SYSTEM, WIRE HARNESS FOR TAIL LIGHTS AND REAR LID WIPER ASSY.	S/N \$	480.00	X
3	TO RENEW REAR WINDSCREEN TO FACILLITATE REAR LID RENEWAL.	S/N \$	480.00	X
4	TO INSTALL SOLAR FILM FOR REAR WINDSCREEN.	S/N \$	400.00	X
5	TO CARRY OUT WATER SEEPAGE TEST FOR REAR WINDSCREEN.	S/N \$	200.00 150	
6	TO DISMANTLE AND RENEW REAR BUMPER AND REAR LID. RE-ORGANISE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$	2,700.00 600	
SUB TOTAL LABOUR CHARGES		:	\$ 4,620.00	

55 UBI ROAD 1, SINGAPORE 408699

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SKU 3039 D

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
7	TO RESPRAY REAR BUMPER, REAR LOWER BUMPER, REAR LID AND BOTH REAR WHEEL ARCH TRIMS.	\$ 2200	600 x 3 = 1800
8	TO REMOVE AND REINSTALL RHS FRONT DOOR PANEL TRIM. TO REMOVE AND RENEW RHS WING MIRROR ASSY.	S/N \$ 280.00	✓
9	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	✓
TOTAL LABOUR CHARGES		\$ 9,092.00	

55 UBI ROAD 1, SINGAPORE 408699

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

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SKU 3039 D

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	REAR BUMPER - UPPER <i>Delid</i>	1	\$ 1,362.00	✓
2	REAR BUMPER - MIDDLE <i>Delid.</i>	1	\$ 2,070.00	✓
3	REAR BUMPER FIXING PARTS <i>Not in</i>	2	\$ 208.00	X
4	REAR BUMPER LOWER SPOILER <i>Delid</i>	1	\$ 1,261.00	✓
5	REAR BUMPER LOWER SPOILER TRIM <i>Not in</i>	1	\$ 107.00	X
6	REAR BUMPER CARRIER <i>Not in</i>	1	\$ 1,417.00	X
7	REAR BUMPER HOLDING STRAP ?	1	\$ 182.00	?
8	REAR BUMPER GUIDE SECTION - CENTER <i>Not in</i>	1	\$ 142.00	X
9	REAR BUMPER SEAL - LH / RH <i>Not in</i>	2	\$ 28.00	X
10	REAR BUMPER GUIDE SECTION - LH / RH <i>Not in</i>	2	\$ 126.00	X
11	REAR PARKING AID SENSOR <i>Not in</i>	2	\$ 488.00	X
12	REAR PARKING AID SENSOR SEAL RING <i>Not in</i>	1	\$ 14.00	X
13	REAR BOOT LID <i>Repair</i>	1	\$ 6,018.00	X
14	REAR BOOT LID ATTACHMENT PARTS <i>Not in</i>	1	\$ 344.00	X
15	REAR BOOT LID LOCK <i>Not in</i>	1	\$ 248.00	✓
16	REAR BOOT COVER CAP <i>Not in</i>	1	\$ 13.00	X
17	REAR BOOT GASKET <i>Not in</i>	1	\$ 292.00	X
18	REAR BOOT PACKING ADHESIVE <i>Not in</i>	1	\$ 19.00	X
19	"AUDI" EMBLEM <i>Not in</i>	1	\$ 138.00	✓
20	"Q7" EMBLEM <i>Not in</i>	1	\$ 99.00	✓
SUB TOTAL SPARE PARTS		:	\$ 14,576.00	

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

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SKU 3039 D

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
21	"QUATTRO" EMBLEM <i>new</i>	1	\$	99.00	✓
22	REAR WINDOW <i>new</i>	1	\$	1,174.00	X
23	PRIMER <i>new</i>	1	\$	20.00	X
24	REAR WINDOW SIDE SPOILER - LH / RH <i>new</i>	2	\$	462.00	X
25	REAR LID SPOILER FIXING PARTS <i>new</i>	1	\$	62.00	X
26	REAR BUMPER TAILLIGHT- RH <i>new</i>	1	\$	359.00	✓
27	REAR WHEEL ARCH COVER - LH / RH <i>new</i>	2	\$	754.00	✓
28	FRONT WING MIRROR MOUNTING - RH <i>new</i>	1	\$	1,508.00	✓
29	REAR WINDSCREEN SEALANT <i>new</i>	S/N	\$	200.00	X
30	SUNDRIES ?		\$	250.00	?
TOTAL SPARE PARTS		:	\$	19,464.00	
TOTAL LABOUR CHARGES		:	\$	9,092.00	
GRAND TOTAL		:	\$	28,556.00	

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 Lj*
SURVEYED DATE : *08/04/21.*
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS : *Not Authorised, 05 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

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