| ASS, REC. BV: | CC3/AIG2 | 1011286/ATY3E2 | |
|----------------------------|--------------------------------|--|--|
| | AS | SIGNMENT | |
| rom: | Date: | Veh No: Sm X 1823 | F - Yr Regn: 2020, Dec |
| stimated Cost: | | Type: M.Car / M.Cycle / Bus / Van / | Lorry / Taxi / Prime Mover / |
| DD / TP / WS / TP RES / O | D RES / EVA / INV / MV | Truck / Trailer or | |
| o Inspect Vehicle No: | | Make: Andi Q | 3 c.c 1395 |
| t Workshop m/s | | Colour Black. | A/C: Insured / Std / NI / NA |
| f | | Sp.Reading 8430 | T/Radio: Insured / Std / NI / NA |
| nsured: | | Eng/No: | |
| olicy No. 207017 | 79197 | C/No: MAUZZZ | ZF33M1049810- |
| laims No. 4817949 | 9246SG | Gen. Cond: Good / Fair / Poor / Bu | rnt |
| um Insured: | Excess: 800 | Steering: Inorder / Jammed / Leake | ed / Burnt or |
| (Client's Record) | | Brake: Inorder / Jammed / Leake | ed / Burnt or |
| Make of Veh: | | Modi: Nil / S/Rim / STD A/Rim | or |
| - D 940 | (i) Brill | Tyre Size: F: 215/ | 65R17. |
| (Policy Condition) | | R: 215 | 165R17. |
| Remark: The veh had com | nmenced its N/S O/S | BS / DUN / EXNOVA / GY / FS / Liz | ZA / MIC / OHTSU / PIR / SUMI / |
| repair at the time | e of inspection. | TOYO/YOKO or Co | ntnertal |
| Bal. or Market Value: | | Front | Rear |
| DAC Accident Rport: | Consistent?: Yes or No | R/Bal. 06 mm | R/Balmm |
| GIA / PR Seen: | Consistent?: Yes or No | L/Bal mm | L/Bal. OG mm |
| Est. Repairs: | days Res.: Yes or No | D.O.A | D.O.I. <u>62/11/21</u> |
| um Sum: | % 3 Val.: Yes or No | 'Survey held at | emilus . |
| CA / REV / REP. / | 24 HRS | Des. of Damages : Frt / Rear / O | IS INS I UIC I Rooftop or |
| | Vehicle: IN / OU | | |
| | rson Contacted: | The U/C / Chassis frame / B | ody Structure affected due to collision |
| Date / Time Action / | Instruction Alb. | • | |
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| | Confirm rep | air cost of \$9820.08, 6days | 3 |
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| Nett: | 86.61C | | |
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| Date/Time, File Pass to? | : Preli. Report | Days Of Repair: | Company of the Compan |
|) | : Final Report | Resurvey No. of Trip: | Survey Fee: |
| Date/Time, File Return to? | horsen along up a distant CS/I | Constitution of the Consti | Transportation: |
| 2) | Add F | |)S ÷ RSSI |
| | | : Interview (\$ |) Pholos |
| Forcet Formet | | : Tech, Invs (\$ |) Others |

: Westend (8

Lump Sum / LEJ: Ca

SPÚR21B10003 / PREMIUM AUTOMOBILES PTE LTD [408699] ENTRY DATE & TIME: 01/11/2021 17:46 (SGT) SUBMITTED BY: LIM KEE SIANG VERSION: 1 (01/11/2021 17:46 (SGT))



SINGAPORE ACCIDENT STATEMENT

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
 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
- 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.

- The issue and acceptance of this Form by insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 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

01/11/2021 17:46 (SGT) Date of Submission Date of Accident 31/10/2021 14:45 (SGT) 92 Dunlop St, Singapore 209415 **Exact Location of Accident** Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX1823E

INSURED/POLICYHOLDER

Is company? No **DUBEY ADITYA** Name Of Registered Owner GXXXX425L Passport No/FIN ADITYA.DUBEY@SE.COM **Email Address** (Phone) +65-90179546 Mobile Phone No +65-90179546 Alternative Phone No

VEHICLE PARTICULARS

Audi Manufacturer Model Q3 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 Fleet Policy No 2070179197 Policy Number Cover Note Number

DRIVER

DUBEY ADITYA Name of Driver Passport No/FIN GXXXX425L

07/07/1982 Date Of Birth Occupation Indoor 30/04/2007 Date Of Driving Pass 14 YEARS AND 6 MONTHS Driving experience Gender Male (Phone) +65-90179546 Mobile Number +65-90179546 Alt. Phone Number Email Address ADITYA.DUBEY@SE.COM Address 30 KAMPONG EUNOS #03-03 DENGFU Address complement Postcode 41777 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 Collided into Parked Vehicle Type of Accident Weather Conditions Clear Road Surface Dry 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 vehicle or property damaged?

Yes
Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance?

No

PASSENGER 1

Name SHWETA DUBEY
Gender Female

PASSENGER 2

Name AADHYA DUBEY
Gender Female

PASSENGER 3

Name AAVYA DUBEY Gender Female

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

CAR WAS SLANDING IN THE PARKING AREA, WE WERE ALL TOGETHER AND I WAS HOLDING MY 1.5 YRS DAUGHTER AND MY OTHER DAUGHTER 5 YRS WENT FORWARD TO OPEN THE LEFT HAND SIDE REAR DOOR, SUDDENLY A VAN FROM THE OTHER SIDE OF ROAD BANGED INTO THE DOOR AND MY DAUGHTER GOT VERY SCARED AND WAS CRYING VERY BADLY GOOD THAT SHE LUCKILY DIDN'T MEET AND INJURY. THE VAN DRIVER DIDN'T NOTICE ON BY VIRTUE OF DRIVING WITH LESS ATTENTION BANGED INTO THE DOOR AS MY DAUGHTER OPENED THE DOOR FROM OUTSIDE.

ATTACHMENT(S)

Are accident photos available for attachment?

No



DETAILS OF OTHER VEHICLE PROPERTY 1

| Vehicle Registration Number | GBA944Y |
|---|--|
| Vehicle Manufacturer | Toyota |
| Vehicle Model | |
| Vehicle Variant | |
| Vehicle Colour | |
| Vehicle Category | Commercial vehicle |
| Name of Driver | ABDUL AZIM BIN ABDUL RAZAK |
| Contact Number | (Phone) +65-83639810 |
| 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 Formmust 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 w orkshop 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.

Policyholder's Signature / Date &

11:35 am

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

Witnessed by Reporting Centre GM FOON

Sketch Plan

Confirm repair cost of \$9820.08, 6days re GBA 94UY

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| ond I was holding my 1.5 yes daughter other daughter I age Syss went for a left hand side near door, suddenly the other side of wood banged and my aloughter got very sca was crying very badly good that didn't mear min any Injury. The didn't monce or by virtue of less attention datas banged into as my daughter opened that door | van driver |
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| Wurk 1 | Wassessan Designed |
| | Witnessed by Reporting Centre |
| Driver's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date | Personnel Tony Faces |

* 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

en automobile i gas i sagrakes dae son m**etalika**n jeleksi

WORKSHOP

: UBI ROAD 1

CONTACT NO

REFERENCE

: 6366 2323 : 6841 1183

FAX NO

: PA/OD/0896/2021/JT

DATE

: 2-Nov-21

WIP

: 51520

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 2/11/21

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 DUBEY ADITYA

ADDRESS

30 KAMPONG EUNOS

#03-03

SINGAPORE 41777

TELEPHONE

: HP +65 90179546

TYPE OF CLAIM

: OWN DAMAGE CLAIM

POLICY NO

20701799197

VEHICLE NO

SMX 1823 E

MODEL CODE

: AUDI Q3 14 TFSI S TRONIC

MODEL YEAR

29/12/2020

ENGINE NO

CZD C21236

CHASSIS NO

WAUZZZF33M1049810

MILEAGE

_

DATE IN ESTIMATED BY

JOHNNY BOO / ALLAN WU

ACCIDENT DATE

: 31-0ct-21

PLACE OF ACCIDENT

: 92 DUNLOP ST





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 SMX 1823 E

| S/N | NATURE OF JOBS | | 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 | 560 |
| 2 | TO REMOVE AND RENEW LHS FRONT DOOR AND LHS REAR DOOR. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED. | | \$ 2,400.00 | 1000 |
| 3 | TO RESPRAY LHS FRONT DOOR, LHS REAR DOOR, LHS REAR FENDER AND DOOR HINGES. | | \$ 3,500.00 | 1650 |
| 4 | TO CARRY OUT DIAGNOSTIC CHECK | S/N | \$ 192.00 | / |
| | TOTAL LABOUR CHARGES | : | \$ 6,892.00 | |

* PREMIUM AUTOMOBILES



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. SMX 1823 E

DAMAGED PARTS & PRICES

| S/N | PARTS DESCRIPTION | QTY | S/NETT | REMARKS |
|-----|------------------------------------|-------|-----------------|---------|
| 1 | FRONT DOOR LH Buckled | 1 | \$ 2,805.00 | |
| 2 | FRONT DOOR OUTER DOOR SEAL LH | 1 | \$ 166.00 | |
| 3 | FRONT DOOR ATTACHEMENTS PARTS | len 1 | \$ 157.00 | × |
| 4 | FRONT DOOR CATCH | 1 | \$ 120.00 | of ? |
| 5 | FRONT DOOR COVER LH | 1 | \$ 268.00 | |
| 6 | REAR DOOR LH Brekeled | 1 | \$ 2,909.00 | |
| 7 | REAR DOOR OUTER SEAL LH | 1 | \$ 135.00 | |
| 8 | REAR DOOR ATTACHMENTS PARTS | 1 | \$ 311.00 | |
| 9 | REAR DOOR CATCH | 1 | \$ 120.00 | |
| 10 | REAR DOOR INNER SEAL | 1 | \$ 191.00 | + |
| 11 | SEAL FOR SILL PANEL LH | en 1 | \$ 135.00 | + |
| 12 | REAR DOOR HINGE HALF UPPER PART LH | 7 1 | \$ 47.00 | ? |
| 13 | REAR DOOR HINGE HALF LOWER PART | ? 1 | \$ 44.00 | ? |
| 14 | REAR DOOR COVER LH | 1 | \$ 257.00 | |
| 15 | REAR WHEEL COVER LH | 1 | \$ 268.00 | + |
| 16 | SUNDRIES | 1 | \$ 250.00 | ? |
| | TOTAL SPARE PARTS | : | \$ 8,183.00 | |
| | TOTAL LABOUR CHARGES | : | \$ 6,892.00 | |
| | GRAND TOTAL | : | \$ 15,075.00 | |
| | | | | |

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

Not Anthorised, 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

10HNNY BOO BODY REPAIR MANAGER

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:

ALLAN WU CLAIMS CONSULTANT

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| Owner ID Type: | Foreign Identification Number |
|-------------------------------|---------------------------------------|
| Owner ID: | 425L |
| Vehicle Details | |
| Vehicle No.: | SMX1823E |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 03 Nov 2021 |
| Vehicle Make: | AUDI |
| Vehicle Model: | Q3 1.4 TFSI S TRONIC (17") |
| Primary Colour: | Black |
| Manufacturing Year: | 2020 |
| Engine No.: | CZDC21236 |
| Chassis No.: | WAUZZZF33M1049810 |
| Maximum Power Output: | 110.0 kW (147 bhp) |
| Open Market Value: | \$27,869.00 |
| Original Registration Date: | 29 Dec 2020 |
| First Registration Date: | 29 Dec 2020 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$31,017.00 |
| Interded PARE Rebate Details | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 28 Dec 2030 |
| PARF Rebate Amount: | \$23,262.00 |
| Interpled Columnia Details | |
| COE Expiry Date: | 28 Dec 2030 |
| COE Category: | B - Car above 1600cc or 97kW (130bhp) |
| COE Period(Years): | 10 |
| QP Paid: | \$49,300.00 |
| COE Rebate Amount: | \$45,112.00 |
| Total Rebate Amount: | \$68,374.00 |

The information contained herein is correct as at 03 Nov 2021

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