

REF: CC3/AIG21011761/Avc

ASS. REC. BY:

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. 7210063244

Claims No. 0869246868SG

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SNA5120H Yr Regn: 2021 / June

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Audi Q3 C.C. 1395

Colour: Bronze A/C: Insured / Std / NI / NA

Sp. Reading: 2316 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WAUZZZF37M1107305

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 215/65R17.

R: 215/65R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Falken.

Front

Rear

R/Bal. 06 mm R/Bal. 06 mm

L/Bal. 06 mm L/Bal. 06 mm

D.O.A. 11/11/21 D.O.I. 17/11/21.

Survey 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
	OD AIG
21/12/21	Final fig \$5489.36 confirmed by email (red 20,295.64, 78%)
	MV: 176
	PV: 79K
	Nett: 97K

Date/Time, File Pass to?



: Preli. Report

1)



: Final Report

Date/Time, File Return to?

2) 29/12/21-typist

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

3 + RS. SI

Photos

Others

Report Format: Merimen

Lum Sum / LE: \$5489.36

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

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	15/11/2021 11:03 (SGT)
Date of Accident	11/11/2021 17:00 (SGT)
Exact Location of Accident	68 Orchard Rd, Singapore 238839
Additional Location Information	PARKING LOT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNA5120H
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TADOKORO DAI
NRIC No	GXXXX763U
Email Address	DAI.TADOKORO.715@GMAIL.COM
Mobile Phone No	(Phone) +65-90177328
Alternative Phone No	+65-90177328

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
Transmission	Auto
CC	1395

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	7210063244
Cover Note Number	-

DRIVER

Name of Driver	AKIRA TADOKORO
NRIC No	GXXXX239T

Date Of Birth	08/07/2001
Occupation	Indoor
Date Of Driving Pass	10/04/2021
Driving experience	7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97202298
Alt. Phone Number	-
Email Address	AKIRATADOKORO817@GMAIL.COM
Address	327 BUKIT TIMAH ROAD
Address complement	#06-02 FERRELL RESIDENCE
Postcode	259715
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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 vehicle 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

I WAS TRAVELLING SLOWLY INSIDE THE CARPARK AT PLAZA SINGAPURA. I WAS ABOUT TO TURN INTO NARROW ROAD IN THE PARKING LOT, WHICH ALLOW ME TO GO DOWN A FLOOR. I TURN TOO CLOSE TO THE CURVE AND HIT ONTO IT.

ATTACHMENT(S)

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

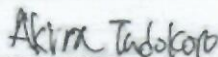
SKETCH PLAN

IMPORTANT NOTICE

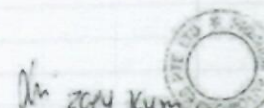
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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.



Policyholder's Signature / Date & Time

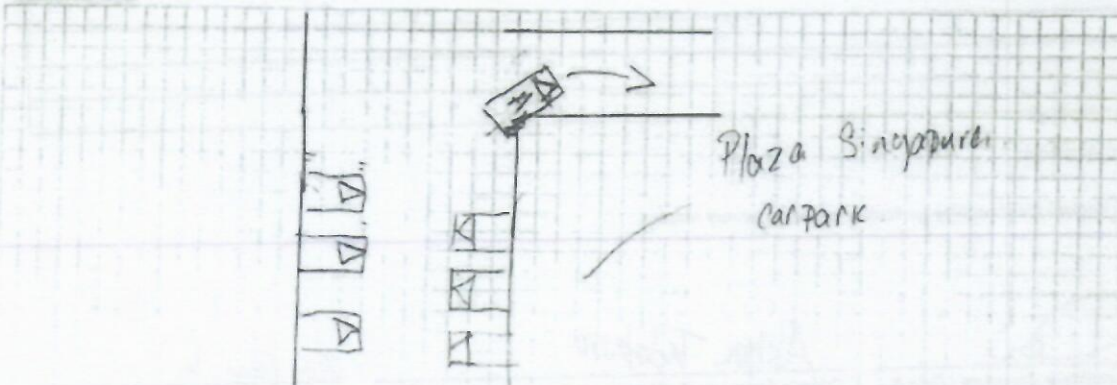


Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

I was travelling slowly inside the carpark at Plaza Singapura.
I was about to turn into narrow road in the parking lot, which allow me to
go down a floor. I turn too close to the curves and hit onto it.

Declaration

We declare the foregoing particulars are true in every respect.

Dei

Policyholder's Signature / Date &

Akima Tadokoro

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

204 Kum Lin

Witnessed by Recording Officer



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/0927/2021/JT
DATE	:	15-Nov-21
WIP	:	53563

VEHICLE NOT IN WORKSHOP. SURVEY TBC

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 TADOKORO DAI
ADDRESS	:	327 BUKIT TIMAH ROAD #06-02 FERRELL RESIDENCE SINGAPORE 259715
TELEPHONE	:	HP +65 90177328
TYPE OF CLAIM	:	OWN DAMAGE CLAIM
POLICY NO	:	7210063244
VEHICLE NO	:	SNA 5120 H
MODEL CODE	:	AUDI Q3 SB 1.4 TFSI
MODEL YEAR	:	25/6/2021
ENGINE NO	:	CZD C38056
CHASSIS NO	:	WAUZZZF3M1107305
MILEAGE	:	-
DATE IN	:	-
ESTIMATED BY	:	JOHNNY BOO / ALLAN WU
ACCIDENT DATE	:	11-Nov-21
PLACE OF ACCIDENT	:	PLAZA SINGAPURA PARKING LOT

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 SNA 5120 H

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER RHS REAR DOOR'S MULTI-LOCK SYSEM AND POWER MODULE WINDOW DEVICES. INSPECT FOR DAMAGES.	S/N \$ 400.00	280
2	TO REMOVE AND REINSTALL RHS FRONT DOOR PANEL TRIM. TO REMOVE AND REINSTALL RHS WING MIRROR ASSY TO FACILITATE RESPRAY RHS FRONT DOOR.	S/N \$ 280.00	X
3	TO REMOVE AND REINSTALL FRONT SEAT ASSY. REAR SAT ASS, BACK REST, ABCD PILLAR TRIMS, CARPETS, ELECTRONIC COMPONENTS AND FUSE TRAYS.	S/N \$ 1,800.00	X
4	TO DISMANTLE AND RENEW RHS REAR DOOR. TO CUT OUT AND WELD RHS SILL PANEL AND RHS B-PILLAR. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 4,800.00	500
5	TO RESPRAY RHS REAR DOOR, RHS REAR DOOR COVER, RHS FRONT DOOR, RHS FRONT DOOR COVER, RHS REAR WHEEL ARCH TRIMS, RHS SILL PANEL, RHS B-PILLAR AND DOOR ENTRANCE.	\$ 5,500.00	1150
6	TO RENEW RHS REAR RIM AND CARRY OUT WHEEL ALIGNMENT.	S/N \$ 280.00	X
7	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	✓
TOTAL LABOUR CHARGES		: \$ 13,252.00	

Door Cover x2 = 400
Arc Trim = 200
Door = 550
1150

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. SNA 5120 H

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	REAR DOOR - RH <i>Dented</i>	1	\$ 2,816.00	✓
2	REAR DOOR OUTER SEAL - RH <i>new</i>	1	\$ 135.00	✓
3	REAR DOOR CATCH - RH <i>?</i>	1	\$ 120.00	?
4	REAR DOOR SILL PANEL - RH <i>new</i>	1	\$ 135.00	+
5	REAR DOOR COVER - RH <i>distorted</i>	1	\$ 349.00	✓
6	REAR DOOR INNER SEAL - RH <i>?</i>	1	\$ 191.00	+
7	REAR WINDOW REGULATOR - RH <i>new</i>	1	\$ 282.00	+
8	REAR WINDOW REGULATOR MOTOR - RH <i>new</i>	1	\$ 271.00	+
9	FRONT DOOR CONTROL UNIT - RH	1	\$ 400.00	+
10	FRONT SECTIONAL PART PILLAR A/B - RH <i>new</i>	1	\$ 3,470.00	+
11	SILL TRIM STRIP - RH <i>new</i>	1	\$ 556.00	+
12	FRONT SIDE TRIM - RH <i>new</i>	1	\$ 179.00	+
13	FRONT DOOR COVER - RH <i>new</i>	1	\$ 370.00	✓
14	REAR WHEEL ARCH TRIM - RH <i>new</i>	1	\$ 536.00	✓
15	REAR WHEEL HOUSING LINER - RH <i>new</i>	1	\$ 241.00	+
16	REAR WHEEL SPOILER - RH <i>new</i>	1	\$ 40.00	+
17	REAR ALUMINIUM RIM - RH <i>new</i>	1	\$ 1,262.00	+
18	ACRYLIC SEALANT <i>new</i>	S/N	\$ 180.00	+
19	CAVITY WAX <i>new</i>	S/N	\$ 140.00	+
20	STONE CHIP <i>new</i>	S/N	\$ 180.00	+
SUB TOTAL SPARE PARTS		:	\$ 11,853.00	

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. SNA 5120 H

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	METAL FILLER POWDER <i>NEM</i>	S/N	\$ 280.00	<i>+</i>
22	SUNDRIES <i>?</i>	1	\$ 400.00	<i>?</i>
TOTAL SPARE PARTS		:	\$ 12,533.00	
TOTAL LABOUR CHARGES		:	\$ 13,252.00	
GRAND TOTAL		:	\$ 25,785.00	

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 King*
SURVEYED DATE : *17/11/21*
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS : *Not Authorized, 04 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

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type:

Owner ID:

Foreign Identification Number

763U

Vehicle Details

Vehicle No.:

Vehicle to be Exported:

SNA5120H

Intended Deregistration Date:

No

Vehicle Make:

18 Nov 2021

Vehicle Model:

AUDI

Primary Colour:

Q3 SPORTBACK 1.4 TFSI S TRONIC (17")

Manufacturing Year:

Grey

Engine No.:

2021

Chassis No.:

CZDC38056

Maximum Power Output:

WAUZZZF37M1107305

Open Market Value:

110.0 kW (147 bhp)

Original Registration Date:

\$29,677.00

First Registration Date:

25 Jun 2021

Transfer Count:

25 Jun 2021

Actual ARF Paid:

0

Intended PARF Rebate Details

PARF Eligibility:

\$33,548.00

PARF Eligibility Expiry Date:

Yes

PARF Rebate Amount:

24 Jun 2031

Intended COE Rebate Details

COE Expiry Date:

\$25,161.00

COE Category:

24 Jun 2031

COE Period(Years):

B - Car above 1600cc or 97kW (130bhp)

QP Paid:

10

COE Rebate Amount:

\$56,032.00

Total Rebate Amount:

\$53,790.00

\$78,951.00

The information contained herein is correct as at 18 Nov 2021

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Price

Dealer

Built in

User Rating



1.4 TFSI S tronic [17" Rim] (A)

\$218,089
\$20,100 /yr ?

• 14.2km/L | 148bhp | 6-speed (A) S tronic

Premium Automobiles

Hungary

4 User Reviews

Promotion available

Audi Q3



1.4 TFSI S tronic [17" Rim] (A)

\$207,890
\$19,300 /yr ?

Premium Automobiles

Hungary

3 User Reviews

Promotion available

Car Model

Price

Dealer

Built in

User Rating

15 results/page

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