

CC3/AIG21012264/Aqc

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. _____

Claims No. **7932334596SG**

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: **SLX816U** Yr Regn: **2019/March**

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

Truck / Trailer or

Make: **Audi Q3** C.C. **999**

Colour: **Orange** A/C: Insured / Std / NI / NA

Sp. Reading: **23084** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **WAUZZ2GASKA001834**

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: **215/60R16**

R: **215/60R16**

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

TOYO / YOKO or

Front Rear

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

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

D.O.A. D.O.I. **01/12/21**

*Survey held at **Premium**

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Front N/S

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

Date / Time Action / Instruction

D AIG

07/12/21@5.53pm revert to AIG via Merimen.

09/12/21@6.07pm Kok Chong informed C/A via Merimen.

MV: **133K** 10/12/21@9.51am Informed George C/A & ex:\$400 by email.

PV: **38.4K**

Nett: **94.6K**

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:

3 + RS. SI

Photos

Report

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Insp (\$

☐ : Washend (\$

Report Format: _____

1. Form 1 (P) (P) (P)

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	27/11/2021 16:57 (SGT)
Date of Accident	27/11/2021 10:58 (SGT)
Exact Location of Accident	Scotts Rd, Singapore
Additional Location Information	SCOTTS ROAD TOWARDS GOODWOOD HOTEL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX816U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM TENG TIN ROCHELLE
NRIC No	SXXXX479H
Email Address	ROCHELLETT168@GMAIL.COM
Mobile Phone No	(Phone) +65-83831618
Alternative Phone No	(Office) +65-83831618

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q2
Variant	Q2 1.0 TFSI
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	1000

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	LIM TENG TIN ROCHELLE
NRIC No	SXXXX479H

Date Of Birth	16/08/1978
Occupation	Indoor
Date Of Driving Pass	30/07/1998
Driving experience	23 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-83831618
Alt. Phone Number	(Office) +65-83831618
Email Address	ROCHELLETT168@GMAIL.COM
Address	1 LEW LIAN VALE
Address complement	#01-08
Postcode	537016
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	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry

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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	LIM CHOON CHENG
Gender	Female

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 CHANGING LANE FROM MIDDLE TO LEFT LANE AND BRUSHED AGAINST THE RIGHT REAR OF THE DRIVER'S CAR.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL4954R
Vehicle Manufacturer	Honda
Vehicle Model	Vezel
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

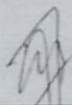
Name of Driver	AYDEN HOW
Contact Number	(Phone) +65-87688169
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Describe Circumstances of the Accident


I was changing lane from middle to left lane and brushed against the right rear of the driver's car.

Declaration

We declare the foregoing particulars are true in every respect.


 Policyholder's Signature / Date &
 Time 23/11/2021 @ 1525

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

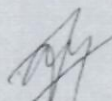

 Witnessed by Reporting Centre
 Personnel

SKETCH PLAN


SKETCH PLAN

IMPORTANT NOTICE

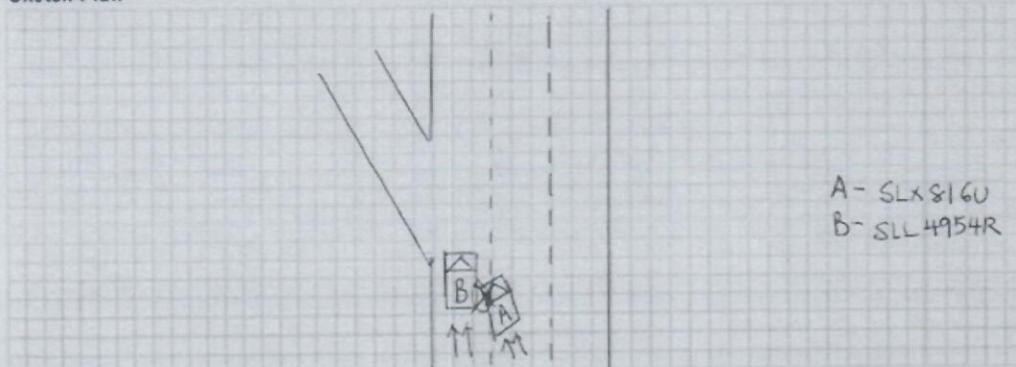
1. Please report correctly the details of the accident to speed up the claims process.
 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
 3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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' 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 27/11/2021 1525

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


 Witnessed by Reporting Centre Personnel

Sketch Plan



PREMIUM AUTOMOBILES



55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL : NOBA.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/0967/2021/JT
DATE : 30-Nov-21
WIP : 55986

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 1/12/21

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 : MS ROCHELLE LIM TENG TIN
ADDRESS : BLK 1 LEW LIAN VALE
#01-08
SINGAPORE 537016
TELEPHONE : HP +65 83831618
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO :
VEHICLE NO : **SLX 816 U**
MODEL CODE : AUDI Q2 1.0 TFSI S TRONIC
MODEL YEAR : 28/3/2019
ENGINE NO : CHZ A92540
CHASSIS NO : WAUZZZGA5KA001834
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 27-Nov-21
PLACE OF ACCIDENT : SCOTTS ROAD TOWARDS
GOODWOOD HOTEL

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 SLX 816 U

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR AND HEADLIGHT WASHER ASSY.	S/N \$ 360.00	X.
2	TO REMOVE AND TRANSFER LHS HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N \$ 400.00	X.
3	TO DISMANTLE AND RENEW FRONT BUMPER, LHS FRONT FENDER AND LHS HEADLIGHT. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 2,400.00	1000
4	TO RESPRAY FRONT BUMPER AND LHS FRONT FENDER.	\$ 2,000.00	1100
5	TO RENEW LHS FRONT RIM AND CARRY OUT WHEEL ALIGNMENT.	S/N \$ 280.00	X
6	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	✓
TOTAL LABOUR CHARGES		: \$ 5,632.00	



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

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLX 816 U

			DAMAGED PARTS & PRICES		
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS	
1	FRONT BUMPER <i>Dehnd</i>	1	\$ 894.00	✓	
2	FRONT BUMPER FIXING PARTS <i>Men</i>	1	\$ 347.00	+	
3	FONT BUMPER AIR GUIDE GRILLE - LH <i>lit</i>	1	\$ 169.00	✓	
4	FRONT BUMPER AIR GUIDE GRILLE END CAP - LH <i>ne</i>	1	\$ 59.00	+	
5	FRONT BUMPER SPOILER <i>lit</i>	1	\$ 299.00	✓	
6	FRONT BUMPER CLOSING ELEMENT <i>men</i>	1	\$ 156.00	+	
7	FRONT WHEEL SPOILER - LH <i>men</i>	1	\$ 34.00	+	
8	FRONT BUMPER ADAPTER - LH <i>men</i>	1	\$ 36.00	+	
9	FRONT BUMPER FOAM FILLER PIECE <i>men</i>	1	\$ 78.00	+	
10	FROMT BUMPER REINFOCEMENT BEAM <i>men</i>	1	\$ 723.00	+	
11	FRONT BUMPER GUIDE SECTION - LH <i>men</i>	1	\$ 36.00	+	
12	FRONT BUMPER TOP COVER <i>men</i>	1	\$ 100.00	+	
13	"CAUTION" STICKER <i>men</i>	1	\$ 14.00	x	
14	AIRCOND STICKER <i>men</i>	1	\$ 8.00	+	
15	FRONT FENDER - LH <i>Dented</i>	1	\$ 1,147.00	✓	
16	FRONT FENDER ATTACHEMENT PARTS <i>men</i>	1	\$ 40.00	+	
17	FRONT FENDER BRACE - LH <i>men</i>	1	\$ 44.00	+	
18	FRONT FENDER BRACKET CENTER - LH <i>men</i>	1	\$ 48.00	+	
19	FRONT FENDER BRACKET - LH <i>men</i>	1	\$ 16.00	+	
20	FRONT FENDER BRACKET CENTER UPPER - LH <i>men</i>	1	\$ 23.00	+	
SUB TOTAL SPARE PARTS		:	\$ 4,271.00		

ALL CHARGES ARE NOT INCLUSIVE OF GST
LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED
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. SLX 816 U

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	FRONT FENDER BRACKET BACK - LH <i>new</i>	1	\$ 16.00	+
22	FRONT WHEEL HOUSING LINER - LH <i>new</i>	1	\$ 196.00	+
23	FRONT WHEEL HOUSING LINER ATTACHEMENT PARTS <i>new</i>	1	\$ 57.00	+
24	HEADLIGHT MOUTING - LH <i>free</i>	1	\$ 118.00	+
25	HEADLIGHT - LH	1	\$ 4,915.00	+
26	HEADLIGHT WASHER ASSY - LH <i>new</i>	1	\$ 142.00	+
27	LIFT CYCLINDER HOSE <i>new</i>	1	\$ 182.00	+
28	FRONT WHEEL ARCH COVER - LH / RH <i>LH at, RH new</i>	2	\$ 644.00	✓
29	ALUMINIUM RIM - LH <i>Abel new</i>	1	\$ 949.00	+
30	SUNDRIES <i>?</i>		\$ 300.00	?
TOTAL SPARE PARTS		:	\$ 11,790.00	
TOTAL LABOUR CHARGES		:	\$ 5,632.00	
GRAND TOTAL		:	\$ 17,422.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

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



55 UBI ROAD 1, SINGAPORE 408699

TEL : 6365 2323 FAX : 6841 1183

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

NAME : *Adrian Lim*
SURVEYED DATE : *01/12/21*
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. NORA 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: Singapore NRIC
Owner ID: 479H

Vehicle Details

Vehicle No.: SLX816U
Vehicle to be Exported: No
Intended Deregistration Date: 01 Dec 2021
Vehicle Make: AUDI
Vehicle Model: Q2 1.0 TFSI STRONIC
Primary Colour: Orange
Manufacturing Year: 2018
Engine No.: CHZA92540
Chassis No.: WAUZZZGA5KA001834
Maximum Power Output: 85.0 kW (113 bhp)
Open Market Value: \$23,691.00
Original Registration Date: 28 Mar 2019
First Registration Date: 28 Mar 2019
Transfer Count: 0
Actual ARF Paid: \$25,168.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 27 Mar 2029
PARF Rebate Amount: \$18,876.00

Intended COE Rebate Details

COE Expiry Date: 27 Mar 2029
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$26,659.00
COE Rebate Amount: \$19,514.00
Total Rebate Amount: \$38,390.00

The information contained herein is correct as at 01 Dec 2021

OK

FLEXIBILITY TO PLAN AHEAD

with StarHub's 12-Months Business Broadband plan

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Sell it yourself! Advertise it at just
\$68 until it's SOLD!

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2020 Model XC60 T6 R-Design, Oct 2020 Registered.



Original Red Paint Protected In
Car Wrap, LTA Approved Tinted
Windscreen.
Direct Owner StarAd

AutoInn
An Inspiration For Car Buyers

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our **PRISTINE USED CARS**
at **GREAT PRICES**

Browse by Category

2 vehicles



AUDI Q3

Advanced Search



Search

Search Selection

AUDI Q3



Audi Q3 1.4A TFSI S-Tronic S-Line

\$144,800

\$15,900 /yr

26-Nov-2019

1,395 cc

10,000 km

SUV

Available

Come With 5 Years Warranty, Excellent Condition, Bank Loan In-House Loan Available, Trade-In Welcome.

Posted: 26-Nov-2021 Tags: 2019 Audi Q3, Audi Q3, Audi, Q3

DIRECT OWNER



Audi Q3 1.4A TFSI S-Tronic

\$139,800

\$15,390 /yr

31-Dec-2019

1,395 cc

13,300 km

SUV

Available

Ceramic Coated! Tip Top Condition! Fully Agent Maintained. As Good As New, Premium Finishes In The Car As Well. Reluctant Sale! Drive With A Peace Of Mind, Agent Warranty Til Dec 2024! Consignment Unit, Trade In Are Welcome And High Loan Assists Are Available Too!...

Posted: 26-Nov-2021 Tags: 2019 Audi Q3, Audi Q3, Audi, Q3

CONSIGNMENT

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

20 results/page

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