

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
CONTACT NO : 6366 2323
FAX NO : 6841 1183
REFERENCE : PA/OD/0060/2022/JT
DATE : 24-Jan-22
WIP : 64756

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE SURVEY 28/1/22

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 NG SAI KIN (WU SHIJIAN)
ADDRESS : 7 BISHAN STREET 15
#24-08
SINGAPORE 573908
TELEPHONE : HP +65 9661 5580
TYPE OF CLAIM : ~~THIRD PARTY CLAIM~~ *OD claim*
POLICY NO : 1800129481-03
VEHICLE NO : **SMF 1243 Z**
MODEL CODE : AUDI A3 SEDAN 1.4 TFSI
MODEL YEAR : 29/10/2018
ENGINE NO : CZE 802055
CHASSIS NO : WAUZZZ8V1J1082735
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 23-Jan-22
PLACE OF ACCIDENT : JUNCTION OF CTE TURNING RIGHT
INTO ANG MO KIO AVE 3



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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SMF 1243 Z

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER REAR PARKING AID. CHECK FUNCTION.	S/N \$ 280.00	✓
2	TO DISMANTLE AND RENEW REAR BUMPER. TO REPAIR LHS REAR FENDER. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 1,400.00	750 ✓
3	TO RESPRAY REAR BUMPER AND LHS REAR FENDER.	\$ 2,000.00	1100 ✓
4	TO RENEW LHS REAR RIM AND CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 280.00	✓
5	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	✓
TOTAL LABOUR CHARGES		: \$ 4,152.00	

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SINGAPORE 65 UBI ROAD 1, SINGAPORE 408699

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMF 1243 Z

ESTIMATED LABOUR CHARGES FOR

S/N		PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
1	REAR BUMPER	<i>Repair</i>	1	\$	1,944.00	X
2	REAR BUMPER FIXING PARTS	} <i>NEP</i> <i>NE</i>	1	\$	201.00	X
3	REAR BUMPER ADAPTER - LH		1	\$	42.00	X
4	REAR BUMPER GUIDE SECTION - LH / RH		2	\$	36.00	✓
5	REAR BUMPER SPOILER - LH		1	\$	264.00	✓
6	REAR LIGHT REFLECTOR - LH		1	\$	46.00	✓
7	REAR BUMPER GUIDE SECTION LOWER - LH		1	\$	75.00	✓
8	REAR WHEEL HOUSING LINER - RH	<i>NE</i>	1	\$	260.00	X
9	ALUMINIUM RIM	<i>cut</i>	1	\$	1,303.00	✓ 1042.4
10	SUNDRIES	? NEC		\$	250.00	? 2.96
TOTAL SPARE PARTS				:	\$	4,421.00
TOTAL LABOUR CHARGES				:	\$	4,152.00
GRAND TOTAL				:	\$	8,573.00

ALL CHARGES ARE NOT INCLUSIVE OF GST

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

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NAME

SURVEYED DATE

AUTHORISED DATE

EXCESS COST

LIABILITY

REMARKS

Adnan Ly
11/02/22

All Authorised, 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

AUTOMOBILES Form

Male
(Phone) 153-100-1530
9 36
7 BISHAN ST
#24-08

Editor **IMPORTANT NOTICE**

CUSTOMER NO
INSURED

PREMIUM AUTOMOBILES Order Form

Male
(Phone) 153-100-1530
9 36
7 BISHAN ST
#24-08
573908

Editor

CUSTOMER NO
INSURED

1. Please report correctly the details of the accident to speed up the claim process.
2. The Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any act of 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.

Signature
24/1/22

Policyholder's Signature / Date & Time 1145

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



Witnessed by Reporting Centre Personnel

Tony Tang

Sketch Plan

