# \* PREMIUM AUTOMOBILES



AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16 AIG Building Singapore 079120 Attn: Motor Claims

Yr Ref: CC3/AIG22002747/pa3 (SJR8036G)

Norah Khai From

6768 9911 Telephone +65 - 6841 1183 Telefax +65 -

Nora.khai@premiumauto.com.sg Email

Body & Paint Dept Our Dept

PA/TP/0233/2022/NH Our Ref

27-Jun-2022 Date

1 Total Pages

Dear Sir,

#### RE: INSURANCE CLAIM FOR SMJ 3816 L - Audi A5 SPORTBACK 2.0 TFSI S-TRONIC

With reference to the above-mentioned vehicle, no. SMJ 3816 L, claimant, Mr. Rajat Nag, please find the related document per attached.

- 1. A copy of the Original invoice no. 85017575 S\$ 6,352.38.
- 2. A copy of Discharge Voucher duly signed by client.
- 3. A copy of the Letter of Authorisation duly signed by client.
- 4. Loss of Use S\$ 500.00 (S\$ 100.00 x 4 working days + 1 Sunday)
- 5. A copy of the GIA search S\$ 2.00

Based on the above document, we would appreciate you could expedite the payment soonest possible.

If you require any further clarification, please do not hesitate to contact me at 6768 9911.

Regards

This is a computer-generated document. No signature is required.

Norah Khai Claims Dept

Encl

AIG Insurance - SMJ 3816 L

Premium Automobiles Pte Ltd, Showroom 9 Leng Kee Road Singapore 159090 Telephone (65) 6566 1111 Telefax (65) 6471 3733

Service & Parts Centres 55 Ubi Rd 1 Singapore 408699 Telephone (65) 6336 2323 Telefax (65) 684 11183

#### Premium Automobiles Pte Ltd



Audi Centre Singapore 281 Alexandra Road Singapore 159938
Main Telephone 6836 2223
Main Telefax 6471 3733
Co. & GST Reg. No.: 199902271W

Alexandra Service Centre 281 Alexandra Road Singapore 159938 Main Telephone 6388 2223 Main Telefax 6475 1023

**Ubi Service Centre** 55 Ubi Road 1 Singapore 408699 Main Telephone 6388 2323 Main Telefax 6841 1183

**Customer Service** Service Appointment 24-hour Breakdown Service 6366 2323 9828 1233 Email customer.care@premiumauto.com.sg

#### INS TAX INVOICE

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AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR CLAIM DEPT AIG BUILDING

78 SHENTON WAY

#07-16

SINGAPORE 079120 079120

Invoice No: 85017575

Account: A0006

Date : 25/06/2022

Order: SMJ3816L

AIG ASIA PACIFIC INSURANCE PTE LTD MOTOR CLAIM DEPT

AIG BUILDING 78 SHENTON WAY

#07-16

SINGAPORE 079120

Regn No: SMJ3816L

40871)

Regn Date: 28/02/2019

Term : 30

Mileage: 41248 WIP No.: 17064

Model: A5 SPORTBACK 2.0 TFSI S tronic Chassis: WAUZZZF55KA015107

Engine: CVK 074456

Dept: U

You have been assisted by :- UB-Lim Kee Siang

(43)

BODYWORK  A8W6807900 A8W6853551A 2ZZ A8W6945105A A8D0853419F A8W8853742 2ZZ A8W70853741 2ZZ A8W6807067N GRU  BODYWORK  M:  TO RESPRAY REAR BUMPER AND REAR LID. M:  TO CARRY OUT DIAGNOSTIC CHECK. (SK) STRIP (A) (SK) MOLDING 6/4/2 Less 020% (A) (SK) MOLDING 6/4/2 Less 020% (A) (SK) AUDI SIGN 6/4 Less 020% (A) (SK) AUDI SIGN 6/4 Less 020% (A) (SK) INSCRIPTION ' Less 020% COVER BORROW LESS 020%	Qty	Details	Unit Price	Amount
M: TO DISMANTLE AND RENEW REAR BUMPER. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.   M: TO RESPRAY REAR BUMPER AND REAR LID.	360.00	AND TRANSFER REAR PARTKING	1.00	360.00
BODYWORK  BODYWORK  TO RESPRAY REAR BUMPER AND REAR LID.  M:  TO CARRY OUT DIAGNOSTIC CHECK.  (SK)STRIP  A8W6853551A 2ZZ  A8W6945105A  A8D0853419F  A8W8853742 2ZZ  A8W8853742 2ZZ  A8T0853741 2ZZ  (A) (SK) AUDI SIGN 6/4  Less 020%  (A) (SK) AUDI SIGN 6/4  Less 020%  (A) (SK) AUDI SIGN 6/4  Less 020%  (A) (SK) INSCRIPTION '  Less 020%	500.00	M: RENEW REAR BUMPER. RE-ORGANIZE	1.00	500.00
TO CARRY OUT DIAGNOSTIC CHECK.  A8W6807900  A8W6853551A 2ZZ  A8W6945105A  A8D0853419F  A8W8853742 2ZZ  A8W6853741 2ZZ  (A) (SK) MOLDING 6/4/2  Less 020%  (A) (SK) PACKING 6/4/2  Less 020%  (A) (SK) PACKING 6/4  Less 020%  (A) (SK) AUDI SIGN 6/4  Less 020%  (A) (SK) INSCRIPTION ' Less 020%	1100.00	77.7	1.00	1,100.00
A8W6853551A 2ZZ (A)(SK)MOLDING 6/4/2 Less 020% A8W6945105A REFLECTOR(LAST) Less 020% A8D0853419F (A)(SK)PACKING 6/4/2 Less 020% A8W8853742 2ZZ (A)(SK)AUDI SIGN 6/4 Less 020% A8T0853741 2ZZ (A)(SK)INSCRIPTION Less 020%	192.00	577	1.00	192.00
	1.00 1.00 1.00 1.00 1.00 1.00	C 6/4/2 Less 020% C Less 020% C 6/4/2 Less 020% C GN 6/4 Less 020% C TION ' Less 020%	248.50 1139.00 45.60 20.90 162.50 103.50 3011.00	198.80 911.20 36.48 16.72 130.00 82.80 2,408.80
			*	

0.00 2,152.00 Labour Sublet Menus 0.00 Lubricant 0.00

415.58 7% **GST** 6,352.38 **Grand Total** 

Received by

For & on behalf of Premium Automobiles Pte Ltd

## **AUTHORISATION TO ACT** (AIG Express Third Party Claim)

RAJAT NAG	(the third party claimant) of 3 LUXUS HILL DRIVE
	(address), owner of SMJ3816L (vehicle no.
	OMOBILES PTE LTD ("the workshop") to act for me
with respect to my claim for repair	costs and/or rental and/or loss of use ("claim") for my vehicle
no. SMJ3816L that was dama	ged pursuant to the accident which occurred on 24/3/2022
(date) along CTE BETWEEN AM	K 1 & AMK 3 EXIT (location) involving vehicle no/s
SJR8036G ("the accident").	
I further authorize the workshop to	settle my above mentioned claim in a manner that they deem fe
and the workshop is further author	ized to receive payment further to settlement of my claim with
payment cheque/s being made in fa	your of the workshop.
I further acknowledge that any set	lement the workshop may reach on my behalf is on a without
prejudice and without admission of	hability basis insofar as the driver/owner/insurers of the other
vehicle/s is concerned	
Dated this 29 (day) of	April(month) 20_22 (year)
R	
Signed by the third party claimant	
(with chop if applicable)	(with chop)

(with chop if applicable)

# RELEASE VOUCHER (AIG Express Third Party Claim)

"We/I, PREMIUM AUTOMOBILES PTE LTD	("the workshop") hereby confirm that we/
have reached an agreement with the appointed surveyor	
AUTO CONSULTANTS PTE LTD (name of survey s\$63733 (Repair Cost), S\$ \( \sum \) (Loss of rental/u SMJ3816L that was damaged pursuant to the accidence of the consultant state of	se), <u>S\$</u> (Disbursement), for vehicle notent which occurred on <u>24/3/2022</u> (date) along
pursuant to the inspection conducted on 6/4/2022 (date	
We/I confirm that we/I are/am authorized by the owner	RAJAT NAG
("the third party claimant") of vehicle no. SMJ3816L	nake the claim as set out in the above paragraph
and we/I have full authority to settle the matter on his/h	er hehalf in a manner that we/I deem fit. We/I
enclose herein the letter of authority given by "the third par	ty claimant".
We/I further confirm that we/I will indemnify AIG Asia I	
and/or expense that they will or have already incurred in the	he event that "the third party claimant" after the
above said agreement lodges a further claim against the	ne former for any loss and expenses suffered
pertaining to costs of repairs and/or rental and/or loss o	f use pursuant to the damage to SJR8036G
(vehicle no.) as a result of the accident.	
We/I confirm that the agreement reached above is in full	- Orthodoxidadi Amelin Urbinidad Cobinstitution
party claimant" pursuant to the accident and that further the	his settlement is reached on a without prejudice
and without admission of liability basis.	
This agreement is subject to the application of Singapore	law and the Singapore Courts have exclusive
jurisdiction over any dispute arising out of the same.	
Dated this (day) of (month) 202	22 (year)
	PREMILIA STATISON
Signed by appointed surveyor	Signed by "the workshop" (with chop)

### **BREAKDOWN OF PAYMENT**

Vehicle No: SMJ3816L	-			
Accident onatCTE BETWEEN AMK 1 & AMK 3 EXIT				
Involving vehicle/s	SJR8036G	·		
1) Repair cost	s 6,752.78	Payable to: <u>Premium Automobiles Pte Ltd</u>		
2) GIA/L <del>TA-</del> search fee	\$ 2.00	Payable to: <u>Premium Automobiles Pte Ltd</u>		
3) Loss of Use or <del>Rent</del> al Car	\$	Payable to: PREMIUM AUTOMOBILES PTE LTD		
4) Medical fees	\$	Payable to:		
5) Others	\$	Payable to:		

# INSURER ENQUIRY Find insurer

Vehicle reg. no.

SJR8036G

**Date of Accident** 

24/03/2022

Reset

#### % RESULT & RECEIPT

# **TP Insurer Enquiry**

Insurance AIG Asia Pacific Insurance Pte....

Period of Insurance 30/07/2021 - 29/07/2022

Requested By LIM KEE SIANG (PREMIUM AU...

Requested Date 24/03/2022 16:10

#### Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13** 

Total Amount Due (GST Inclusive): \$\$2

#### **General Insurance Association**

Records Management Centre
GST Registration No: **M400017735** 



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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.
- 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 24/03/2022 18:35 (SGT) Date of Accident 24/03/2022 14:55 (SGT) **Exact Location of Accident** Near CTE, Singapore Additional Location Information CTE BETWEEN AMKL 1 & AMK 3 EXIT Country/State of Loss Singapore

#### DETAILS OF OWN VEHICLE

SMJ3816L

(Phone) +65-98204245

No - Claiming third party

+65-97535280

Private use

Private car

Auto

1988

INSURED/POLICYHOLDER Is company? No Name Of Registered Owner **RAJAT NAG** NRIC No SXXXX429A **Email Address** RAJAT.NAG.INSEAD@GMAIL.COM Mobile Phone No

VEHICLE PARTICULARS

Alternative Phone No

Vehicle Registration Number

Manufacturer Audi Model A5 Variant Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission CC

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No

Policy Number

SP2001030466-01 Cover Note Number

DRIVER

Name of Driver RAJAT NAG NRIC No SXXXX429A

Accident report SP0Q223O0003