16	220038611Kq43
From: Date:  Estimated Cost:  OD VIP I WS I TP RES I OD RES I EVA I INV I MV  To Inspect Vehicle No: at Workshop m/s  of  Insured:  Policy No.  Claims No.  SIMULD WZ AV J WS  Sum Insured:  Excess:  (Client's Record)	Veh No: SFL 37/C Yr Regn: C2 // Type: M.Car/M.Cycle/Bus/Van/Lorry/Taxi/Prime Mover/ Truck/Traller or A) . Wagan Make: Audi Q5 c.c /984  Colour M.D. Blue A/C: Insured/Std/NI/NA  Sp.Reading 986/5 T/Radio: Insured/Std/NI/NA  Eng/No: C/No: WAUTTTBR X: BAOB 48  Gen. Cond: Sood/Fair/Poor/Burnt  Steering: Inorder/Jammed/Leaked/Burnt or  Brake: Inorder/Jammed/Leaked/Burnt or
(Policy Condition)  Remark: The veh had commenced Its repair at the time of inspection.  Bal. or Market Value:  IDAC Accident Rport: Consistent?: Yes or No  GIA / PR Seen: Consistent?: Yes or No  Est. Repairs: days Res.: Yes or No  Lum Sum: 20 % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Of 3 / Vehicle: IN / OUT  Date / Time   Action / Instruction	Modi: NII / S/RIm / STD A/RIM or  Tyre Size: F: 235/55 ZR /9  R:  BS / DUN / EXNOVA / GY / FS / LIZA /MIC / OHTSU / PIR / SUMI /  TOYO / YOKO or  Front Rear  R/Bal. Z mm R/Bal. 4 mm  L/Bal. Z mm L/Bal. 4 mm  D.O.A. 21/4/22 D.O.I. 23/5/202  Survey held at  Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  N/S Rear  The U/C / Chassis frame / Body Structure affected due to collision.
24/5 1 Pup & 2450/, confirmed  O2/6/20@ 11.5bar mised to cacilia  Data/Tima, File Pass 10? : Prell. Report Da	CREAB 6184.60, 72/1) Les Via Meinnon.  Bys Of Repair: 4
Coute/Firme, File Return to?  Add Fee:  Report Format:  Lump Sum / I.B.H. (S 2450	Survey No. of Trip:

# **Tropical Tech Automobile Services**

Blk 5032 Ang Mo Kio Avenue 3 #01-303 Industrial Park 2 Singapore 569535

Tel: 6481 7773 / 6481 1403 Fax: 6484 4978

E-mail: kennyphua@tropical-success-autocare.com.sg

M/s:

China Taiping Insurance (Singapore) Pte. Ltd

Estimate bill:

TT 16 / 22 / TP / WT

3, Anson Road, #16-00, Springleaf Tower,

Registration No:

SFL37K

Singapore 079909

Attention:

Motor Claims Third Party Department

Make / model:

Audi O5

Tel:

6389 6111

A total:

Fax:

6222 1033

21 / 05 / 2022

TRAFFIC ACCIDENT INVOLVING VEHICLE BEARING REGISTRATION NO: GBK9380L AND SFL37K ALONG CTE ON 21 APRIL 2022 AT ABOUT 2000HRS.

CIRO		\$ 1.774.00 X	
1pc	Rear LH door	4	,
1pc	Rear LH fender	\$ 2,462.00 X	_
1pc	Rear LH tail lamp	\$ 728.00	
1pc	Rear LH tail lamp gasket 63/	\$ 52.00	_ ,
1pc	Rear bumper 1483.40	1,878.00	2
1	Sub total:	\$ 6,894.00	
	Less 10% discount:	\$ 689.40	
	A total:	\$ 6,204.60	

Remove & transfer rear LH door necessary attachment spare parts item.

Remove & refit rear LH door.

Remove & transfer rear bumper necessary attachment spare parts item.

Remove & refit rear LH tail lamp, rear LH tail lamp gasket, rear bumper.

Heat / weld / cut / renew rear LH fender.

Under coating on rear damaged portion.

Putty / primer application, spray painting rear LH door, resr LH fender, rear bumper.

\$ 1,200.00

200.00

1,000.00

**Grand Final Amount:** 

8,604.60

Tropical Tech Automobile Services

(Authorised Signature) William Tan

Not Nothering 1/Ly & 2450/2 Meany After Pains Eday, 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

Page & Unfidementary item(s) must be resurveyed and s subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

SS1Q224N0001 / SU Brothers Motor Workshop ENTRY DATE & TIME: 23/04/2022 11:10 (SGT) SUBMITTED BY:-Su Kia Wee VERSION: 1 (23/04/2022 11:42 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report <u>correctly</u> 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 witholding 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

23/04/2022 11:10 (SGT) 21/04/2022 20:00 (SGT) CTE, Singapore CENTRAL EXPRESSWAY Singapore

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SFL37K

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No

TAN SEAR YEW S1726034J tsac303@singnet.com.sg (Phone) +65-83330703 +65-83330703

VEHICLE PARTICULARS

Alternative Phone No

Manufacturer Model

Audi Q5

Variant

Exact purpose for which vehicle was being used at time of

accident

CC

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category

Transmission

Private use

No - Claiming third party Private car

Auto

2000

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

NTUC Income Insurance Co-operative Ltd

Comprehensive

No

5116513006-02

5116513006-02

DRIVER

Name of Driver

NRIC No

CHIAM SOON HUANG



S1802273G

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender . Mobile Number Alt. Phone Number **Email Address** Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver

01/04/1967 Indoor 28/08/1997 24 YEARS AND 8 MONTHS Female (Phone) +65-83330703

tsac303@singnet.com.sg 37 JALAN RAYA JALAN RAYA 368591 No Spouse

-

No

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Chain Collision Clear Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No 3 No -Yes 1

## DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address
Was notice of intended Prosecution given?
If yes, against whom?

Yes MacPherson Neighbourhood Police Post (Phone) +65-18007449999 (Fax) +65-65476366 Blk 54 Pipit Road #01-82/84 Singapore 370054 No

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT REPORT NO: T/20220422/2095

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Reasons for not uploading a video of the accident
Was there any audio recorded?

Yes Yes KIV No

# DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

GBG4188E

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

Address

Address complement

Postcode
Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

Commercial vehicle

MR.LOH

(Phone) +65-90197165

Address

Name

Anature Of Damage

Location of Passenger (Including Driver)

# DETAILS OF OTHER VEHICLE PROPERTY 2

GBK9380L
-
_
Commercial vehicle
-
_
-
-
-
•
-
-
-
-

ത് . . .

Roles to	Police raport.
7/20220422/	
4 2003 64231	
Maria de la companya del companya de la companya de la companya del companya de la companya de l	
;	
Please Tick	
Claim	OD   TP at Six Brothers
L/ Claim	OD TO at Other Workshop
L Report	ting Cn/y
claration	Name of Wishop: Tropical Successivery respect  Email Ackl: touc3032 Signi
declare the foregoing particulars are true in e	Email Ackl : touc3030 simple
Munde	ym — (1)
	1937 \ / 7

#### SKETCH PLAN

### IMPORTANT NOTICE

- Rence report correctly the details of the accident to speed up the claims process.
- 2 This Learnings be completed by the Policyholder and/or the Authorised Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful mistepresentation 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
- 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 afores aid
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 tirms, 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

(ii) investigating the accident and/or my claims;

(ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) adjunistering 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

(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 (stickliding their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purpose;

Policyholder's Signature / Date &

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

Sketch Plan

Personnel

Witnessed by Reporting Centre

A: SFL37K B: GBK9386L

C: GBG 4188E

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	034J	
Vehicle No.:	SFL37K	
Vehicle to be Exported:	No	
Intended Deregistration Date:	21 May 2022	
Vehicle Make:	AUDI	
Vehicle Model:	Q5 2.0 TFSI QUATTRO	
Primary Colour:	Blue	
Manufacturing Year:	2010	
Engine No.:	CDN171668	
Chassis No.:	WAUZZZ8RXBA064867	
Maximum Power Output:	155.0 kW (207 bhp)	
Open Market Value:	\$51,975.00	
Original Registration Date:	23 Feb 2011	
First Registration Date:	23 Feb 2011	
Transfer Count:	6	
Actual ARF Paid: Intended PARF Rebate Details	\$51,975.00	
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:		
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	31 Jan 2031	
COE Category:	B - Car (1601cc & above)	
COE Period(Years):	10	
PQP Paid:	\$42,683.00	
COE Rebate Amount:	\$37,106.00	
Total Rebate Amount:	\$37,106.00	

The information contained herein is correct as at 21 May 2022

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1726034J





TAN SEAR YEW

耀

CHINESE

Date of birth 09-07-1965

Country/Place of birth

SINGAPORE

6460253



Sex

M



NRIC No. S1726034J

Date of Issue 20-07-2020

37 JALAN RAYA SINGAPORE 368591



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

12 Mar 1983

NP 428A