

J.E.W Motor PTE LTD

Address: 60 Jalan Lam Huat, #03-72
CARROS CENTER, Singapore 737869

Vehicle number: SME2917L	Date of inspection: _____
Make/Model: Audi A3	Date of dismantling parts: _____
Year: 2018	Date of after repair: _____
Chassis No: WAUZZZ8V6J1077322	

No	Parts Replacement	Qty	List price
1	Bonnet	1	\$ bt 3,158.00
2	Bonnet RH hinge	1	\$ x 182.00
3	Bonnet LH hinge	1	\$ x 182.00
4	Bonnet lock	1	\$ x 234.00
5	Bonnet lock catch	1	\$ x 110.00
6	Front bumper	1	\$ de 2,089.00
7	Front bumper clips	1set	\$ 30 per 70.00
8	Front bumper RH side retainer	1	\$ x 45.00
9	Front bumper LH side retainer	1	\$ cm 45.00
10	Front bumper LH side cover	1	\$ x 189.00
11	Front bumper reinforcement	1	\$ x 808.00
12	Front bumper inner sponge	1	\$ cm 231.00
13	LH headlamp assy	1	\$ cm 5,478.00
14	LH headlamp nozzle cover	1	\$ x 67.00
15	LH headlamp nozzle	1	\$ x 202.00
16	RH headlamp assy	1	\$ x 5,478.00
17	Front LH fender	1	\$ bt 918.00
18	Front LH fender splash shield	1	\$ x un 78.00
19	Front LH fender splash shield clips	1set	\$ x un 50.00
20	Support panel	1	\$ x cm 831.00
21	Front grille	1	\$ x cm 1,478.00

\$ 21,923.00
less discount 5% \$ 1,096.15
Total: \$ 20,826.85

No	Parts Replacement	Qty	Special Nett
1	Front number plate	1	\$ x 70.00
2	Radiator coolant	1	\$ x 80.00

Total: \$ 150.00

Labour and Misc			
1	Panel beating on affected and consistent areas	\$ 600	1,400.00
2	Spray paint on affected and consistent areas	\$ 600	1,200.00
3	To check all wiring and all lighting system	\$ 30	100.00
4	To rust proofing on affected and consistent areas	\$ 30	60.00
5	To refocus and adjust headlamps assy	\$ 30	100.00
6	Remove and reinstall aircon condenser and all aircon attachments to facilitate repair	\$ 1,100	320.00
7	Remove and reinstall radiator, hoses, fan assy and all radiator attachments to facilitate repair	\$ 100	350.00
8	Reset and diagnose control unit and fault code after repair and parts replacement	\$ 100	550.00
Total:		\$	4,080.00

Taufik 97 415749 / 62563561
 *To check consistency of damages
 WP' 2/6/22 @ 1215
 L/S Resurvey after repair
 taufik@lkhauto.com
 04 days

Spare Parts: \$ 20,826.85
 Special Nett: \$ 150.00
 Labour: \$ 4,080.00
 Total Amount: \$ 25,056.85

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:

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	790J

Vehicle Details

Vehicle No.:	SME2917L
Vehicle to be Exported:	Yes
Intended Deregistration Date:	07 Jun 2022
Vehicle Make:	AUDI
Vehicle Model:	A3 SEDAN 1.4 TFSI COD S TRONIC
Primary Colour:	White
Manufacturing Year:	2018
Engine No.:	CZE693520
Chassis No.:	WAUZZZ8V6J1077322
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$26,140.00
Original Registration Date:	25 Sep 2018
First Registration Date:	25 Sep 2018
Transfer Count:	1
Actual ARF Paid:	\$28,596.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Sep 2028
PARF Rebate Amount:	\$21,447.00

Intended COE Rebate Details

COE Expiry Date:	24 Sep 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$31,307.00
COE Rebate Amount:	\$19,714.00
Total Rebate Amount:	\$41,161.00

The information contained herein is correct as at 06 Jun 2022

OK

Date of Accident : 4/6/22 Accident Time: 10:19 (24-HR-Format)
 Accident Place : BK 246 Yishun Ave 9 carpark
 Vehicle No. (Car Plate No.) : SME 2917 L Make/Model: Audi A3
 Insurance Company : ERGO Policy No: DMPG 22003363
 Owner or Company Name /IC No. : Edwin Tan Yong You / S9014790J
 Owner or Company Contact No. : 96162546 Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : As above
 DRIVER'S Date Of Birth : 7/5/1990 DRIVER'S License Pass Date 29/10/2018
 Relationship of Owner & Driver : Spouse\Parent\Children\Sibling\Employee\Others: _____
 DRIVER'S Address : BK 245 Yishun Ave 9 # 04-157 S760245
 DRIVER'S Contact No./ Alt No. : 1) 96162546 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : edwintan@gmail.com
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 0
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at time of accident: Private use \ Work Purpose
 Any Injury (If YES, Pls state): NO

Other Party Driver's Particular (if any)

Vehicle. No: <u>SLF 5419 U</u>	Vehicle. No: _____
Vehicle Make \Model: _____	Vehicle Make \Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

* **NEW – Passenger's name & gender:**

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. 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



Vehicle A: SME 29172

Vehicle B: SLF 54194

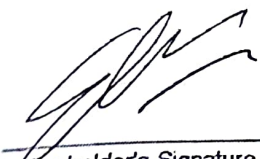
Blk 246 Yishun Ave 9

Describe Circumstances of the Accident

On the stated date and time, 1 vehicle A was parked at the stated location. When I came back to retrieve my vehicle at about 4pm, I saw damages on my vehicle front portion. I then went to check my in-car camera and realised that vehicle B collided onto my vehicle front portion while reversing.

Declaration

We declare the foregoing particulars are true in every respect



Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel