

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/TP/0521/2022/JT
DATE : 23-Jun-22
WIP : 29732

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE SURVEY 24/6/22
YOUR INSURED VEH NO : SHC 5000 G

STRIKES AUTOMOTIVE SERVICES Pte Ltd

60 WOODLANDS INDUSTRIAL PARK E4
SINGAPORE 757705

Attn : Motor Claims Dept

Tel: 6866 2615 - Fax: 6368 7421

OWNER'S NAME : MR KHAW HONG LAN
ADDRESS : BLK 863 TAMPINES ST 83
#08-478
SINGAPORE 520863
TELEPHONE : HP +65 96411042
TYPE OF CLAIM : THIRD PARTY CLAIM
POLICY NO : 2100280372-10
VEHICLE NO : **SKD 3720 J**
MODEL CODE : AUDI A4 1.8 TFSI MU
MODEL YEAR : 24/11/2011
ENGINE NO : CDM148510
CHASSIS NO : WAUZZZ8KPCA059440
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 21-Jun-22
PLACE OF ACCIDENT : TAMPINES AVE 10

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SKD 37201

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER REAR PARKING AID.	S/N \$ 280.00	✓
2	TO REMOVE AND TRANSFER REAR LID'S CONVENIENCE LOCK SYSTEM AND WIRE HARNESS FOR TAIL LIGHTS.	S/N \$ 280.00	✓
3	TO DISLDOGE AND REINSTALL REAR WIRE HARNESS FOR LIGHTS, BATTERY MANAGER, FUSE AND RELAY TRAYS, ELECTRICAL AND AUDIO EQUIPMENT. INSPECT FOR DAMAGE AND RENEW WHERE NECESSARY.	S/N \$ 1,400.00	?
4	TO DISMANTLE AND RENEW REAR BUMPER AND REAR LID. TO CUT OUT AND WELD REAR END PANELLING. TO REPAIR SPARE WHEEL HOUSING. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	200 \$ 4,500.00	1400
5	TO RESPRAY REAR BUMPER, REAR LID, REAR END PANELLING AND SPARE WHEEL HOUSING.	\$ 3,500.00	1500
6	TO REMOVE AND RENEW REAR AND CENTER EXHAUST SILENCER. TO ALIGN TO POSITION.	S/N \$ 480.00	?
7	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	✓
TOTAL LABOUR CHARGES		: \$ 10,632.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SKD 3720 J

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	REAR BUMPER	1	\$ 1,830.00	de ✓
2	REAR BUMPER FIXING PARTS	1	\$ 238.00	X
3	REAR BUMPER INFORCEMENT BEAM	1	\$ 726.00	?
4	REAR BUMPER BRACKET HOLDER - LH / RH	2	\$ 504.00	?
5	REAR BUMPER SPOILER	1	\$ 297.00	de ✓
6	REAR BUMPER GUIDE SECTION - LH	1	\$ 49.00	?
7	REAR BUMPER SECURING STRIP	1	\$ 16.00	na ✓
8	REAR BUMPER GUIDE SECTION- LH / RH UPPER	2	\$ 53.00	?
9	GUIDE SECTION PIN	2	\$ 12.00	?
10	REAR PARKING AID SENSOR	2	\$ 530.00	X
11	REAR PARKING AID SENSOR SEAL RING	4	\$ 6.00	na ✓
12	REAR BUMPER WIRING SET	1	\$ 572.00	?
13	REAR LID	1	\$ 3,115.00	bt ✓
14	REAR LID ATTACHMENT PARTS	1	\$ 78.00	X
15	REAR LID FLAP GASKET	1	\$ 229.00	X
16	REAR LID LOCK - INNER	1	\$ 212.00	X
17	REAR LID LOCK COVER	1	\$ 21.00	X
18	REAR LID LOCK STRIKER	1	\$ 56.00	X
19	REAR LID LOCK ACTUATOR	1	\$ 200.00	X
20	REAR PACKING ADHESIVE	1	\$ 36.00	na ✓
SUB TOTAL SPARE PARTS			\$ 8,780.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

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

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S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
21	AUDI EMBLEM	1	\$	144.00	all
22	1.8T EMBLEM	1	\$	104.00	net
23	A4 EMBLEM	1	\$	104.00	net
24	TAIL LIGHT INNER - LH	1	\$	295.00	X
25	REAR END PANEL - OUTER	1	\$	330.00	?
26	REAR END PANEL - LOWER	1	\$	916.00	? photo
27	REAR END PANEL REINFORCEMENT - INNER	1	\$	560.00	?
28	REAR SILENCER - LH	1	\$	1,190.00	?
29	DUAL CLIP	1	\$	64.00	?
30	REAR SILENCER BRACKET	2	\$	124.00	?
31	REAR SILENCER CENTER	1	\$	1,209.00	?
32	REAR SILENCER BRACKET - LH / RH	2	\$	96.00	?
33	REAR SILENCER HEAT SHIELD - LH	1	\$	172.00	?
34	REAR SILENCER CENTER HEAT SHELF	1	\$	331.00	?
35	REAR END PANEL TRIM	1	\$	210.00	?
36	LUGGAGE COMPARTMENT FLOOR COVER	1	\$	786.00	?
37	REAR NO PLATE	S/N	\$	60.00	X
38	ARYLIC SEALANT	S/N	\$	180.00	?
39	CAVITY WAX	S/N	\$	140.00	?
40	STONE CHIP	S/N	\$	180.00	?
41	METAL FILLER POWDER	S/N	\$	280.00	?
42	SUNDRIES		\$	400.00	?
TOTAL SPARE PARTS			:	\$	16,655.00
TOTAL LABOUR CHARGES			:	\$	10,632.00
GRAND TOTAL			:	\$	27,287.00

ALL CHARGES ARE NOT INCLUSIVE OF GST

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NAME :
SURVEYED DATE :
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS :

Tanfikun 97495749/62563561
WP' 24/6/22 @ 1040
Resurvey before paint

65 days
tanfikun@pkharts.com

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

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT

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:

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	21/06/2022 18:47 (SGT)
Date of Accident	21/06/2022 15:15 (SGT)
Exact Location of Accident	Tampines Ave 10, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKD3720J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KHAW HONG LAN
NRIC No	SXXXX657C
Email Address	SHEAKHAW55@GMAIL.COM
Mobile Phone No	(Phone) +65-96411042
Alternative Phone No	(Home) +65-67864971

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
Variant	-
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100280372-10
Cover Note Number	-

DRIVER

Name of Driver	KHAW HONG LAN
NRIC No	SXXXX657C

Date Of Birth	04/04/1959
Occupation	Indoor
Date Of Driving Pass	04/09/1992
Driving experience	29 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96411042
Alt. Phone Number	(Home) +65-67864971
Email Address	SHEAKHAW55@GMAIL.COM
Address	BLK 863 TAMPINES ST 83
Address complement	#08-478
Postcode	520863
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 - Head to Rear
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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

AS I WAS DRIVING ALONG TAMPINES AVE 10. SUDDENLY, HEARD A BANG SOUND. I CAME OUT OF THE CAR & SAW THE TAXI SHC 5000 G BANG INTO MY CAR REAR. THIS HAPPENED ON 21 JUN 22 AT 15:15 PM.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5000G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	EDWIN LING
Contact Number	(Phone) +65-96325503
Address	-

Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

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 wilful misrepresentation or withholding of material facts may allow Insurance companies to reputate 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' law firms/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' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time
21/6/2022

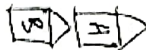
Sketch Plan 3.15pm

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

Witnessed by Reporting Centre Personnel

A: SKD37205

B: SHL5006



Describe Circumstances of the Accident

As I was driving along Tampines Ave. 10, suddenly
 heard a bang-sound. I came out of the car
 & saw the taxi SHC 5000G bang into my car rear.
 This happened on 21 June 2022 at 3.15 pm.

Declaration

We declare the foregoing particulars are true in every respect.

H. Khan
 Policyholder's Signature / Date &
 Time 21/6/2022
 3.15 pm

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

[Signature]
 Witnessed by Reporting Centre
 Personnel