	ASSIGNMENT
From: Date:	Veh No: SMP 5338 E - Yr Regn: 2019 / Sept
Estimated Cost:	Type (M.Car)M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Adi At c.c 1984.
at Workshop m/s	Colour Bld 0 A/C: Insured / Std / NI / NA
of	Sp.Reading 49144 T/Radio: Insured / Std / NI / NA
nsured	Eng/No:
Policy No.	C/No: WAUZZZF45K4090025
Claims No.	Gen. Cond. Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorden / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil (S/Rim / STD A/Rim or
	Tyre Size: F: 245,40218 -
(Policy Condition)	R: 245/40RB.
Remark The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value:	<u>Front</u> <u>Rear</u>
DAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 06 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. 96 mm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 29/08/22 .
Lum Sum: % 3 Val.: Yes or No	
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: II Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
op Alla.	
	·
MV: 143K	
PV: 56.8K	
Nett: 86.2K.	
ate/Time, File Pass to? : Preli. Report	Davis Of Barrain
: Final Report	Days Of Repair: Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee:
	d Fee: Site Insp (\$)_s+rc_s
	: Interview (4) Photos
oper Forms:	: Tech. Invs (3) office

SP1422800005 / PREMIUM AUTOMOBILES PTE LTD [408699] ENTRY DATE & TIME: 24/08/2022 19:09 (SGT) SUBMITTED BY: FOONG CHIN FONG VERSION: 1 (24/08/2022 19:09 (SGT))



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 Actual 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 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 24/08/2022 19:09 (SGT) Reported by Both Date of Accident 23/08/2022 09:50 (SGT) **Exact Location of Accident** PIE, Singapore Additional Location Information PIE TOWARDS TUAS NEAR 36KM/JALAN BAHAR EXIT

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMP5338E

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LIM BOON LEONG NRIC No SXXXX699F PROTEGE323@GMAIL.COM **Email Address** Mobile Phone No (Phone) +65-81574245 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Audi Model A4 Variant SEDAN 2.0 TFSI

Exact purpose for which vehicle was being used at time of accident

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

Vehicle Category Transmission CC

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

LIM BOON LEONG SXXXX699F 25/12/1979 Indoor

Private use

Private car

Yes

Auto

1984

Date Of Driving Pass 30/12/1999 Driving experience 22 YEARS AND 8 MONTHS Gender Male Mobile Number (Phone) +65-81574245 Alt. Phone Number Email Address PROTEGE323@GMAIL.COM Address 3 LORONG 5 TOA PAYOH Address complement #35-16 Postcode 319459 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 Chain Collision Weather Conditions Clear Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 3 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

ON 23 AUGUST 2022 AT ABOUT 9.50AM, I WAS DRIVING MY AUDI SMP5338E ALONG PIE TOWARDS THE DIRECTION OF TUAS. NEAR THE 36KM MARK, I WAS TRAVELING ON THE EXTREME LEFT LANE, INTENDING TO EXIT PIE VIA JALAN BAHAR EXIT. THERE WAS A TRAFFIC JAM NEAR THE EXIT, MY CAR CAME TO A COMPLETE STOP. MY SEATBELT WAS PROPERLY STRAPPED ON. I WAS JUST AWAITING FOR TRAFFIC AHEAD TO MOVE WHEN MY VEHICLE WAS REAR-ENDED. I WAS NOT TRACED FOR IMPACT. I ALIGHTED FROM MY CAR AFTER IMPACT AND REALIZED THAT SLC4549A WAS THE 3RD VEHICLE AND SCW58C WAS THE 2ND VEHICLE BEING THE VEHICLE IMMEDIATELY BEHIND MINE. I WOULD CALL THIS A 3-VEHICLE CHAIN COLLISION. I HAVE VISITED ALEXANDRA HOSPITAL A&E DEPARTMENT SOON AFTER THE ACCIDENT ON 23 AUGUST 2022. I WAS GIVEN MC FOR 3 DAYS.

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?

Yes No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer

SCW58C Toyota



Vehicle Model Sienta Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver TAN KWEE TIN EILEEN Contact Number (Phone) +65-97343473 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLC4549A Vehicle Manufacturer Opel Vehicle Model Meriva Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver LIAW YEOW HONG Contact Number (Phone) +65-93694664 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Gender
Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the clams process.
- 2 This Formmust 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.
- 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)

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' law yers/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;
- (ii) 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

19 @9.45cm

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

B-SCW C-SLC Describe Circumstances of the Accident

Policyholder's Signature / Date & Time	Driver's Signature (fi driver is not the policyholder) / Date 8 Time	Witnessed by Reporting Centre Personnel	
My 24/8			
We declare the foregoing particula	ers are true mievery respect.		
Declaration			
			13
accident on 23 Augus	22 at about 9.50 m, I wan driving my clien of Thes News the 36 km marks, nearling to exit PIK via Idan Bohave on came to a complete stop. May shart awaiting for tarthic ahead to move not traced for inpact. I alighted from 4549 A was the 3rd vehicle and side immediately behind mine. I would are visited Alexandra Hespital ASE Depart 2022. I was given MC for 3 day	y 5.	
chain collision - I he	are visited Alexandra Hispital A&E Depier	I ment soon after the	
and realised that SLC	4549 A was the 3rd vehicle and 5	CW58 c was she 2nd	
Strapped on I was	not traced for inaget. I aliabed for	on my vehicle than	ct
jam near the exit, in	ry car came to or complete stop. My	seathelt was groperly	
PLE towards the dire	ction of Tuas News the 36 Km mark,	I was traveling on the	8
VI 23 MUDINI CO	22 of about 4. >0pm, I will alriving m	1 HUGH SITE 2220 E 91	0,19

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/0735/2022/EQ

DATE : 25-Aug-22 WIP : 38715

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 29/8/2022.

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. LIM BOON LEONG
ADDRESS : 3 LOR 5 TOA PAYOH

#35-16, GEM RESIDENCES

SINGAPORE 319459

 TELEPHONE
 : HP +65 81574245

 TYPE OF CLAIM
 : OWN DAMAGE CLAIM

 POLICY NO
 : 1900170790-02

VEHICLE NO : SMP 5338 E

MODEL CODE : AUDI A4 SEDAN 2.0 TFSI

MODEL YEAR : 30-09-2019 ENGINE NO : CVK 084478

CHASSIS NO : WAUZZZF45KA090025

MILEAGE : DATE IN : -

ESTIMATED BY : JOHNNY BOO / ALLAN WU

ACCIDENT DATE : 23-Aug-22

PLACE OF ACCIDENT : PIE TOWARDS TUAS NEAR 36KM/

JALAN BAHAR EXIT





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EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SMP 5338 E

S/N	NATURE OF JOBS		CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER REAR PARKING AID AND REAR LID KICK SENSOR.	S/N	\$ 360.00	
2	TO REMOVE AND TRANSFERL REAR LID'S CONVENIENCE LOCK SYSTEM AND WIRE HARNESS FOR TAIL LIGHTS.	S/N	\$ 280.00	
3	TO DISMANTLE AND RENEW REAR BUMPER AND REAR LID. TO REPAIR REAR END PANELLING. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.		\$ 2,500.00	1000
4	TO RESPRAY REAR BUMPER, REAR LID AND REAR END PANELLING.		\$ 3,000.00	1100
5	TO CARRY OUT DIAGNOSTIC CHECK	S/N	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 6,332.00	-





55 UBI ROAD 1, SINGAPORE 408699
TEL:6366 2323 FAX:6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMP 5338 E

DAMAGED PARTS & PRICES

S/N	PARTS DESCRIPTION	QTY		S/NETT REMARKS
1	REAR BUMPER Delad	1	Ś	3,188.00
2	REAR BUMPER FIXING PARTS	1	\$	487.00
3	REAR BUMPER SECURING STRIPS ?	1	\$	249.00
4	REAR BUMPER SPOILER	1	\$	276.00
5	REAR BUMPER BLACK TRIM Crulked	1	\$	326.00
6	REAR BUMPER BRACKET LH / RH	2	\$	260.00
7	REAR BUMPER LIGHT REFLECTOR REAR LH / RH	2	\$	92.00 +.
8	REAR BUMPER REINFORCEMENT BEAM	1	\$	1,131.00
9	REAR BUMPER SEAL	2	\$	32.00 7
10	REAR BUMPER GUIDE SECTION LH/ RH	2	\$	52.00
11	REAR BUMPER HOLDING STRIPS LH / RH	2	\$	188.00 ←
12	REAR PARKING AID SENSORS INNER/OUTER Zones M	5421	\$	531.00 265.50.
13	REAR PARKING AID SENSORS SEAL RINGS Nu	4	\$	10.00
14	EXHAUST TAIL TRIM PIPE LH / RH Wen	2	\$	766.00 L
15	REAR LID Devoled	1	\$	3,497.00
16	REAR LID LOCK 7	1	\$	218.00 +
17	REAR LID LOCK COVER CAP KIN	1	\$	8.00 +
18	REAR LID LOCK STRIKER	1	\$	37.00 ₹
19	PARKING ADHESIVE	1	\$	21.00
20	REAR LID WEATHERSTRIP Ne m	1	\$	229.00 *
	SUB TOTAL SPARE PARTS	:	\$	11,598.00

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED

SPARE PARTS ARE SPECIAL NETT.





55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183 EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMP 5338 E

DAMAGED PARTS & PRICES

S/N	PARTS DESCRIPTION	QTY	S/NETT REMARKS	5
21	AUDI CHROME LOGO	1	\$ 144.00 —	
22	AUDI CHROME EMBLEM " A4 "	1	\$ 104.00	
23	REAR NO PLATE Deviled	S/N	\$ 60.00	
24	SUNDRIES 7	1	\$ 350.00 ?	
	TOTAL SPARE PARTS	:	\$ 12,256.00	
	TOTAL LABOUR CHARGES	:	\$ 6,332.00	
	GRAND TOTAL	:	\$ 18,588.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED

SPARE PARTS ARE SPECIAL NETT.

PREMIUM AUTOMOBILES



55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183

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NAME

SURVEYED DATE

AUTHORISED DATE EXCESS COST

LIABILITY REMARKS

PLEASE NOTE

Adram Li 29/08/22) All Anthonised, 05 lays

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. NORAH 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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC	
Owner ID:	699F	
Vehicle Details and Alexander State of the November 1981	· 1000年11月1日 - 10	I A A A
Vehicle No.:	SMP5338E	
Vehicle to be Exported:	No	
Intended Deregistration Date:	30 Aug 2022	
Vehicle Make:	AUDI	
Vehicle Model:	A4 SEDAN 2.0 TFSI S TRONIC (NAV)	
Primary Colour:	Blue	
Manufacturing Year:	2019	
Engine No.:	CVK084478	
Chassis No.:	WAUZZZF45KA090025	
Maximum Power Output:	140.0 kW (187 bhp)	
Open Market Value:	\$33,720.00	
Original Registration Date:	30 Sep 2019	
First Registration Date:	30 Sep 2019	
Transfer Count:	0	
Actual ARF Paid:	\$39,208.00	
Intended PARF Rebate Details	PROPERTY AND RESIDENCE OF THE ARMOUNT	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	29 Sep 2029	
PARF Rebate Amount:	\$29,406.00	
Intended COE Rebate Details COE Expiry Date:	29 Sep 2029	人员等
COE Category:		
COE Period(Years):	E - Open - all except motorcycle	
OP Paid:	10	
COE Rebate Amount:	\$40,002.00 \$27,342.00	
Total Rebate Amount:	\$27,342.00 \$56,748.00	

The information contained herein is correct as at 30 Aug 2022

