ASS. REC'D BY: Steve / AIG

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S
	X

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: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SMB 377Y Yr Regn: 16/12/20

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Audi RS3 c.c 1395

Colour Grey A/C: Insured / Std / NI / NA

Sp.Reading 26587 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WAUZZZF32M1046753

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modi : Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 255/40ZR20

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Continental

Front		Rear	
R/Bal.	4 mm	R/Bal.	4 mm
L/Bal.	4 mm	L/Bal.	4 mm
D.O.A.	2/10/21	D.O.I.	5/10/22

Survey held at Premium

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

Frnt LH & RH

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	MK-163K

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Preli. Report

☐ : Final Report

Report Format : _____

Lump Sum / I.B.I: ($ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

Survey Fee:	
Transportation: ___$ x RS.___SI	
Photos	
Others	
TOTAL	

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/0851/2022/EQ
DATE	:	4-Oct-22
WIP	:	44491

VEHICLE IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 5/10/2022

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	:	MS CHUA HUI LEE
ADDRESS	:	BLK 422 SERANGOON CENTRAL #08-356 SINGAPORE 550422
TELEPHONE	:	HP +65 96727796
TYPE OF CLAIM	:	OWN DAMAGE CLAIM
POLICY NO	:	2070173151-01
VEHICLE NO	:	**SMG 377 Y**
MODEL CODE	:	AUDI Q3 SPORTBACK 1.4 TFS
MODEL YEAR	:	16/12/2020
ENGINE NO	:	CZD C20424
CHASSIS NO	:	WAUZZZF32M1046753
MILEAGE	:	-
DATE IN	:	-
ESTIMATED BY	:	JOHNNY BOO / ALLAN WU
ACCIDENT DATE	:	2-Oct-22
PLACE OF ACCIDENT	:	BRADDELL ROAD, JUNCTION OF CROUCHER ROAD

PREMIUM AUTOMOBILES

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TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SMG 377 Y

S/N	NATURE OF JOBS			ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR, HEADLIGHT WASHER ASSY AND FRONT PARKING AID.	S/N	$	480.00	/
2	TO REMOVE AND TRANSFER LHS HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N	$	400.00	X
3	TO DISMANTLE AND RENEW FRONT BUMPER, LHS FRONT FENDER AND LHS HEADLIGHT. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED. $500 X 2		$	2,400.00	1000
4	TO RESPRAY FRONT BUMPER, LHS FRONT FENDER AND FRONT WHEEL ARCH TRIMS. (lower trim) 550 X 3		$	3,000.00	1650
5	TO REMOVE AND RENEW LHS FRONT WHEEL SUSPENSON WITH SUBFRAME.	S/N	$	2,400.00	?
	TOTAL LABOUR CHARGES		:	**$ 8,680.00**	

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

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SMG 377 Y

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
6	TO RENEW ALL FOUR RIM. TO CARRY OUT PRE/POST WHEEL ALIGNMENT.	S/N $	640.00	/
7	TO REMOVE AND REINSTALL BODYKIT FOR THE AFFECTED PANELS.	S/N $	780.00	780
8	TO CARRY OUT PRE/POST DIAGNOSTIC CHECK.	S/N $	384.00	/
	TOTAL LABOUR CHARGES	: **$**	**10,484.00**	

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

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMG 377 Y

S/N	PARTS DESCRIPTION	QTY		DAMAGED PARTS & PRICES S/NETT	REMARKS
1	FRONT BUMPER X R (Crossmember check)	1	$	1,585.00	
2	FRONT BUMPER CLOSING ELEMENT - LH ?	1	$	66.00	
3	FRONT BUMPER CLOSING ELEMENT ?	1	$	212.00	
4	FRONT BUMPER SPOILER ✓ CUT	1	$	850.00	
5	FRONT BUMPER AIR GUIDE GRILLE - LH ?	1	$	171.00	
6	FRONT BUMPER TRIM - LH ?	1	$	182.00	
7	FRONT PARKING AID SENSOR SUPPORT - LH X	1	$	29.00	
8	FRONT BUMPER GUIDE SECTION - LH ?	1	$	43.00	
9	FRONT FENDER - LH ✓ OO	1	$	1,445.00	
10	FRONT FENDER ATTACHMENT PARTS X	1	$	66.00	
11	FRONT FENDER BRACE - LH ?	1	$	98.00	
12	FRONT FENDER BRACKET - LH ?	1	$	39.00	
13	HEADLIGHT MOUNTING - LH X	1	$	132.00	
14	HEADLIGHT - LH X	1	$	5,952.00	
15	LIFY CYLINDER - LH X	1	$	231.00	
16	LIFY CYLINDER HOSE X	1	$	92.00	
17	FRONT WHEEL ARCH COVER - LH / RH ✓ FOR RR	(2)	$	1,132.00	
18	FRONT WHEEL HOUSING LINER - LH ?	1	$	260.00	
19	FRONT WHEEL HOUSING LINER COVER - LH X	1	$	18.00	
20	FRONT ASSEMBLY CARRIER ?	1	$	753.00	
	SUB TOTAL SPARE PARTS	:	**$**	**13,356.00**	

ALL CHARGES ARE NOT INCLUSIVE OF GST
LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED
SPARE PARTS ARE SPECIAL NETT.

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

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMG 377 Y

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES S/NETT	REMARKS
21	BONDED RUBBER BUSHES - UPPER / LOWER ?	1	$ 179.00	
22	LOWER ARM CONTROL - LH ?	1	$ 512.00	
23	FRONT WHEEL BEARING HOUSING - LH ?	1	$ 753.00	
24	FRONT WHEELHUB BEARING - LH ?	1	$ 550.00	
25	GUIDE JOINT- LH LOWER ?	1	$ 145.00	
26	COUPLING ROD ?	1	$ 105.00	
27	GAS SHOCK ABSORBER ?	1	$ 338.00	
28	FRONT DRIVE SHAFT - LH ?	1	$ 1,521.00	
29	STEERING RACK ?	1	$ 6,118.00	
30	STEERING TRACK ROD - LH ?	1	$ 99.00	
31	FRONT STEERING TIE ROD END - LH ?	1	$ 126.00	
32	LHS FRONT RIM / CVI (Provide Accessory letter)	S/N	$ 2,000.00	
33	RHS FRONT RIM / CVI (Provide Accessory letter)	S/N	$ 2,000.00	
34	LHS REAR RIM X	S/N	$ 2,000.00	
35	RHS REAR RIM / CVI (Provide Accessory letter)	S/N	$ 2,000.00	
36	FRONT BUMPER COVER SPOILER ?	S/N	TBC	
37	SUNDRIES ?		$ 800.00	
	TOTAL SPARE PARTS	:	**$ 32,602.00**	
	TOTAL LABOUR CHARGES	:	**$ 10,484.00**	
	GRAND TOTAL	:	**$ 43,086.00**	

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

NAME	:	Steve (LKK)
SURVEYED DATE	:	5/10/22, 3:30 pm
AUTHORISED DATE	:	
EXCESS COST	:	OD - N/ AL
LIABILITY	:	
REMARKS	:	EXP ? PIP, ... , 5 days (not include ...)
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. 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

Autokinetics

Auto Kinetics LLP
23 Tannery Lane
Singapore 347785
Tel: +65 9185 3389
Biz Reg No: T11LL0595F

Email: sales@autokinetics.sg
Web: www.autokinetics.sg

Quotation
AK04221Q

Date: 4/10/2022

Name: Audi Service Centre

Contact No: 6388 2323

Car Reg: SMG 377 Y
Car Make: Audi Q3 Sportback

Address: 55 Ubi Rd 1, Singapore 408699

No	Item/ Description	Quantity	Unit Price	Subtotal
1	**RRT Custom Design 20" Forged Wheel** - Front: **20x9 ET38** - Rear: **20x9 ET38** - PCD: **5x112** - Centrebore: 57.1 - Colour: Full Gloss Black Remarks: to fit Black Audi RS caps *Payment terms: 50% upon confirmation and issuance of Purchase Order, remaining 50% upon delivery of rims.*	3	2000.00	6000.00
			TOTAL AMT (SGD)	6000.00

Authorised Signature:

Autokinetics
Auto Kinetics LLP (T11LL0595F)
290 Macpherson Road, S348611

Terms and Conditions

1 PayNow transaction to UEN: T11LL0595F

2 Error and Omission Excepted

3 All cheques should be crossed and made payable to " ***Auto Kinetics LLP*** *"*

SP1422A30006 / PREMIUM AUTOMOBILES PTE LTD [408699]
ENTRY DATE & TIME: 03/10/2022 18:25 (SGT)
SUBMITTED BY: FOONG CHIN FONG
VERSION: 1 (03/10/2022 18:25 (SGT))

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 Actual 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	03/10/2022 18:25 (SGT)
Reported by	Driver
Date of Accident	02/10/2022 17:05 (SGT)
Exact Location of Accident	Braddell Rd, Singapore
Additional Location Information	BRADDELL ROAD, JUNCTION OF CROUCHER ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG377Y

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHUA HUI LEE
NRIC No	SXXXX221E
Email Address	WOFFGANG@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-96727796
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q3
Variant	SPORTBACK 1.4 TFS
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1395

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070173151-01

DRIVER

Name of Driver	LIM MENG TECK
NRIC No	SXXXX482I
Date Of Birth	18/02/1975
Occupation	Indoor

f Driving Pass	08/08/1994
ıg experience	28 YEARS AND 2 MONTHS
ıder	Male
obile Number	(Phone) +65-90665039
Alt. Phone Number	-
Email Address	WOFFGANG@YAHOO.COM.SG
Address	BLK 422 SERANGOON CENTRAL
Address complement	#08-356
Postcode	550422
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Side Swipe
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)	3
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	-

PASSENGER 1

Name	CHUA HUI LEE
Gender	Female

PASSENGER 2

Name	LIM DAO KAI
Gender	Male

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

I WAS TRAVELLING ALONG BRADDELL ROAD ON 2ND OCTOBER AT AROUND 5 PM. THE WEATHER IS CLEAR AND THE ROAD WAS DRY. MY CAR PLATE NUMBER IS SMG377Y AND I WAS DRIVING IN LANE 3 IN THE DIRECTION OF BARTLEY ROAD. MY CAR SPEED WAS AROUND 50-60KM/HR. SMW5659S WAS DRIVING IN FRONT OF ME ON LANE 3 ALONG BRADDELL ROAD. AS WE ARE NEARING THE CROUCHER ROAD ENTRANCE, SMW5659S SWITCH TO LANE 2 WHILE SLOWING DOWN. AS I DRIVE AND REACH THE CROUCHER ROAD ENTRANCE, SMW5659S SUDDENLY SWERVED FROM LANE 2 TO LANE 3 WITHOUT SIGNALLING. DURING THAT TIME, MY CAR FRONT WAS ALREADY ALONG SIDE BY SIDE WITH SMW5659S DRIVER'S DOOR. AT THAT MOMENT, IT IS TOO LATE FOR ME TO APPLY THE EMERGENCY BRAKE. SMW5659S DRIVER FRONT PANEL, DRIVER DOOR, AND DRIVER WHEEL COLLIDED WITH MY CAR PASSENGER FRONT PANEL AND WHEEL. THE FORCE OF THE COLLISION CAUSED MY CAR TO HIT INTO LANE 3 ROAD CURB. WE THEN MOVED TO THE SIDE OF LANE 1 TO EXCHANGE PARTICULARS. I ASKED AND CHECK NO ONE WAS INJURED IN SMW5659S. MY WIFE HAD MINOR BRUISES BUT THERE IS NO NEED TO REPORT FOR INJURY AT THAT TIME. THIS IS ALL I HAVE TO REPORT. THANK YOU.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMW5659S
Vehicle Manufacturer	Subaru
Vehicle Model	Xv
Vehicle Variant	-
Vehicle Colour	Orange
Vehicle Category	Private car
Name of Driver	JONAS CHOW JIN HENG
Contact Number	(Phone) +65-94369166
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

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 **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 investigation 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 may 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**")

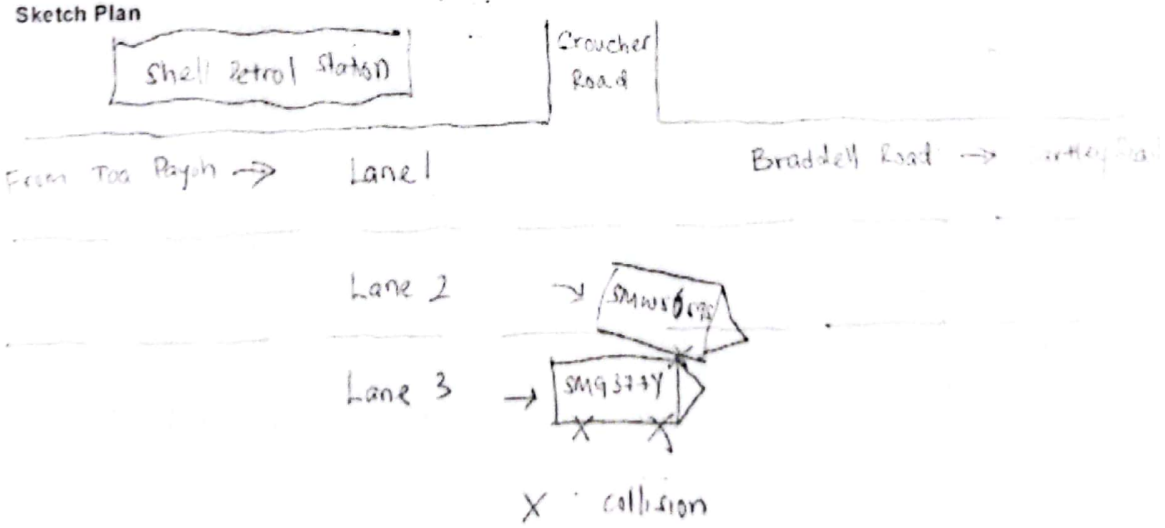
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

10.50 am
03.10.2022

Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel

Sketch Plan



SKETCH PLAN #2

Describe Circumstances of the Accident

I was travelling along Braddel Road on 2nd [illegible] at around 5pm. The weather was clear and the road was dry. My [illegible] is SMH 3774 and I was driving in Lane 3 [illegible] of Bartley Road. My car speed was around 50-60 km/h.

SMW5659S was driving in front of me in Lane 3 along Braddel Road. As we are nearing Croucher Road entrance, SMW [illegible] switch to Lane 2 while slowing down.

As I drive and reach Croucher Road entrance, SMW 659S suddenly swerved from Lane 2 to Lane 3 without signalling. During that time, my car front was already along side with SMW5659S driver's door. At that moment it is too late for me to apply emergency brake.

SMW5659S ~~left~~ driver front panel, driver door and driver wheel collided with my car passenger front panel and wheel. The force of the collision caused my car to hit into Lane 3 road curb.

We then moved to the side of Lane 1 to exchange [illegible]. I asked & check no one was injured in SMW5659S. My wife has minor bruises but there is no need to report for injury at that time.

This is all I have to report. Thank you.

Declaration

I/We declare the foregoing particulars are true in every respect.

10.30am
03.10.2022

Policyholder's Signature / Date & Time

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

Witnessed by Report[illegible] Centre Personnel