



## 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 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	08/10/2022 13:13 (SGT)
Reported by	Driver
Date of Accident	18/09/2022 18:30 (SGT)
Exact Location of Accident	700 Lor 1 Toa Payoh, Trellis Tower, Singapore 319773
Additional Location Information	TRELLIS TOWER, 700 TOA PAYOH LORONG 1, BASEMENT CARPARK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCN3909A
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHEONG HON CHOY, DARREN
NRIC No	SXXXX142E
Email Address	DARRENCHEONGG@GMAIL.COM
Mobile Phone No	(Phone) +65-90252393
Alternative Phone No	+65-92364397

#### VEHICLE PARTICULARS

Manufacturer	Audi
Model	A5
Variant	SPORTBACK 2.0 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	1984

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070172452-01

#### DRIVER

Name of Driver	SNG HUI JUAN, JANE
NRIC No	SXXXX738H
Date Of Birth	09/08/1991



Occupation .....	Indoor
Date Of Driving Pass .....	14/03/2012
Driving experience .....	10 YEARS AND 6 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-94792422
Alt. Phone Number .....	-
Email Address .....	JANESNG.HJ@GMAIL.COM
Address .....	TRELLIS TOWER, 700 LORONG 1 TOA PAYOH
Address complement .....	#09-09
Postcode .....	319773
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 .....	Collided into Property
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	1
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	No
Number of Passengers (Including Driver) .....	2
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 .....	CHEONG HON CHOY DARREN
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

AT AROUND 6.30 PM, 18 SEP, I WAS DRIVING INTO MY HOUSE CARPARK. AS I SAW A PARKING LOT, I TRIED TO ANGLE MY CAR IN ORDER TO DO REVERSE PARKING. I MISJUDGED MY TURNING CIRCLE AND COLLIDED WITH A PILLAR (FRONT FIRST). LATE FILING OF ACCIDENT REPORT DUE TO WORK (OVER THE WEEKENDS INCLUDED).

#### ATTACHMENT(S)

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

**SKETCH PLAN**

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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 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;

(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 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 (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

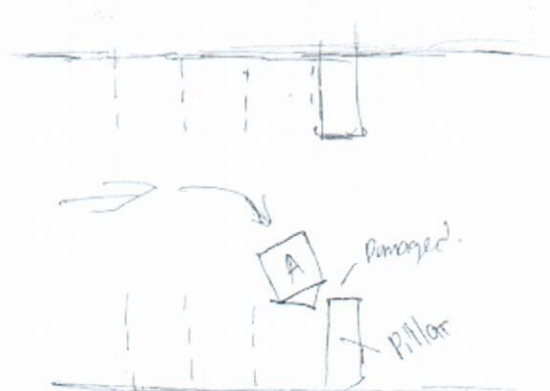
  
8 OCT  
11am  
Policyholder's Signature / Date & Time

  
8 OCT  
11am  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel

**Sketch Plan**

A: SCN3909A



**Describe Circumstances of the Accident**

At around 6.30pm, 18 Sep, I was driving into my house car park. As I saw a parking lot, I tried to angle my car in order to ~~park~~ do reverse parking. I misjudged my turning circle and ~~hit~~ collided into a pillar (front first).

Late filing of accident report due to work (over the weekends included)

**Declaration**

We declare the foregoing particulars are true in every respect.

 8 Oct  
11am

Policyholder's Signature / Date & Time

 8 Oct  
11am

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



Witnessed by Reporting Centre Personnel



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/0869/2022/EQ  
**DATE** : 10-Oct-22  
**WIP** : 45338

**VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 12/10/2022**

**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** : MR CHEONG HON CHOY, DARREN  
**ADDRESS** : TRELIS TOWER, 700 LORONG TOA PAYOH  
#09-09  
SINGAPORE 319773  
**TELEPHONE** : HP +65 90252393  
**TYPE OF CLAIM** : OWN DAMAGE CLAIM  
**POLICY NO** : 2070172452-01  
**VEHICLE NO** : **SCN 3909 A**  
**MODEL CODE** : AUDI A5 SPORTBACK 2.0 TFS  
**MODEL YEAR** : 14/12/2020  
**ENGINE NO** : DEM 025271  
**CHASSIS NO** : WAUZZZF50MA000615  
**MILEAGE** : -  
**DATE IN** : -  
**ESTIMATED BY** : JOHNNY BOO / ALLAN WU  
**ACCIDENT DATE** : 18-Sep-22  
**PLACE OF ACCIDENT** : TRELIS TOWER, 700 TOA PAYOH LORONG 1,  
BASEMENT CARPARK

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**ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SCN 3909 A**

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE 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 \$	<del>400.00</del>	250
3	TO DISMANTLE AND RENEW FRONT BUMPER, LHS FRONT FENDER AND LHS HEADLIGHT. RE-ORGANIZE FRONT CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$	<del>2,400.00</del>	1000
4	TO RESPRAY FRONT BUMPER AND LHS FRONT FENDER.	\$	<del>1,900.00</del>	1100
5	TO CARRY OUT DIAGNOSTIC CHECK	S/N \$	192.00	✓
<b>TOTAL LABOUR CHARGES</b>		:	<b>\$ 5,372.00</b>	

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**MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SCN 3909 A**

			DAMAGED PARTS & PRICES		
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS	
1	FRONT BUMPER <i>Def d</i>	1	\$ 2,493.00	-	
2	FRONT BUMPER CLOSING ELEMENT - LOWER CENTRE <i>he n</i>	1	\$ 293.00	+	
3	FRONT BUMPER AIR GUIDE - LH <i>ne n</i>	1	\$ 72.00	+	
4	FRONT BUMPER AIR GUIDE GRILLE - LH <i>lit</i>	1	\$ 151.00	✓	
5	FRONT BUMPER TRIM - LH <i>he n</i>	1	\$ 54.00	+	
6	FRONT BUMPER GUIDE SECTION - LH <i>ne n</i>	1	\$ 41.00	+	
7	FRONT FENDER - LH <i>Buckled.</i>	1	\$ 1,189.00	✓	
8	FRONT FENDER ATTACHMENT PARTS	1	\$ 55.00	+	
9	FRONT FENDER CLOSING ELEMENT - LH	1	\$ 83.00	+	
10	FRONT FENDER BRACKET - LH REAR	1	\$ 65.00	+	
11	FRONT FENDER BRACKET - LH CENTER	2	\$ 79.00	+	
12	FRONT FENDER BRACE - LH	1	\$ 132.00	+	
13	FRONT FENDER RIVET	10	\$ 38.00	?	
14	FRONT FENDER LEDGE COVER - SHORT	1	\$ 18.00	?	
15	FRONT FENDER LEDGE COVER - LONG	1	\$ 40.00	?	
16	FRONT FENDER CHROME TRIM - LH <i>ne</i>	1	\$ 171.00	✓	
17	FRONT WHEEL SPOILER <i>ne n</i>	1	\$ 82.00	+	
18	FRONT WHEEL SPOILER STONE CHIP GUARD - LH <i>ne n</i>	1	\$ 57.00	+	
19	HEADLIGHT - LH <i>lit</i>	1	\$ 8,172.00	✓	
20	FRONT PARKING AID SENSOR - OUTER <i>he ne</i>	1	\$ 266.00	X	
<b>SUB TOTAL SPARE PARTS</b>		:	<b>\$ 13,551.00</b>		

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



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**MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SCN 3909 A**

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	FRONT PARKING AID SENSOR - SIDE	1	\$ 266.00	+
22	FRONT PARKING AID SEAL RING	6	\$ 15.00	+
23	SUNDRIES		\$ 300.00	?
<b>TOTAL SPARE PARTS</b>		:	<b>\$ 14,132.00</b>	
<b>TOTAL LABOUR CHARGES</b>		:	<b>\$ 5,372.00</b>	
<b>GRAND TOTAL</b>		:	<b>\$ 19,504.00</b>	

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TEL : 6366 2323 FAX : 6841 1183

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

NAME : *Adrian Lj*  
SURVEYED DATE : *12/10/22*  
AUTHORISED DATE :  
EXCESS COST :  
LIABILITY :  
REMARKS : *Not Authorized, 04 Days.*

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

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: