

ASS. REC. BY:

REP:

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

Bal. or Market Value: 340k

IDAC Accident Rpt: _____ 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKG 8152A Yr Regn: 2022 MarchType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Audi E-tron c.c. ✓Colour: Beige A/C: Insured / Std / NI / NASp. Reading: 7668 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WAU222GE1N B026893Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orMod: Nil / S/Rim / STD A/Rim orTyre Size: F: 265/45R21R: 265/45R21BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front _____ Rear _____

R/Bal. ob mm R/Bal. ob mmL/Bal. ob mm L/Bal. ob mmD.O.A. _____ D.O.I. 01/11/22Survey held at Premises

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

Rees N/S

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

Date / Time Action / Instruction

DD AIG

MV:

PV: 119.51K

Nett:

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

1) _____
Date/Time, File Return to?☐ : Final Report

Resurvey No. of Trip: _____

2) _____

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Insp (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

Report Format:

I hereby declare that the information provided is true and correct.

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	26/10/2022 16:05 (SGT)
Reported by	Both
Date of Accident	17/10/2022 12:00 (SGT)
Exact Location of Accident	45 Tg Rhu Rd, Singapore 436899
Additional Location Information	SINGAPORE SWIMMING CLUB BASEMENT CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG8152A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHEAH ELEANOR @HSIEN YUN-HUNG ELEANOR
NRIC No	SXXXX385D
Email Address	CHEAH20@GMAIL.COM
Mobile Phone No	(Phone) +65-82646423
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	ETRON
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	0

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220033857

DRIVER

Name of Driver	CHEAH ELEANOR @HSIEN YUN-HUNG ELEANOR
NRIC No	SXXXX385D
Date Of Birth	20/01/1964
Occupation	Indoor

Date Of Driving Pass	02/09/1981
Driving experience	41 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-82646423
Alt. Phone Number	-
Email Address	CHEAH20@GMAIL.COM
Address	4 RAMSGATE ROAD
Address complement	-
Postcode	437451
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	Collided into Parked Vehicle
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
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

MY CAR REVERSED INTO A STATIONARY VEHICLE. NO ONE WAS INSIDE THE PARKED VEHICLE AT THE CAR PARK. LATE REPORT: BECAUSE I FLEW TO SEOUL THAT DAY ON 17/10/2022. ONLY CAME BACK TO SINGAPORE ON 25/10/2022.

ATTACHMENT(S)

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


DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKT3578U
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	BHARAT VASHDEV KHALANI

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

SKETCH PLANIMPORTANT NOTICE

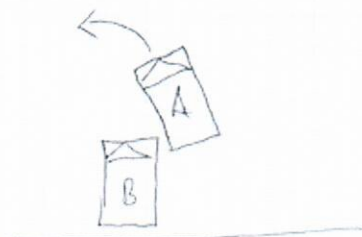
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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 26/10/22

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

Witnessed by Reporting Centre
Personnel Tony Fong

Sketch Plan



A - SKG 8152A

B - SKJ 3578U

Describe Circumstances of the Accident


My car reversed into stationary vehicle - No one inside parked vehicle at car park.

Late Report : Because I flew to Seoul that day, on 17/10/22.


Only came back to Spire on 25/10/22

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time
20/10/22

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


Witnessed by Reporting Centre Personnel
Tony Fong

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/0937/2022/EQ
DATE : 28-Oct-22
WIP : 47724

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 1/11/2022

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 CHEAH ELEANOR @HSIEN YUN-HUNG ELEANOR
ADDRESS : 4 RAMSGATE ROAD
SINGAPORE 437451

TELEPHONE : HP +65 82646423
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : 7220033857
VEHICLE NO : **SKG 8152 A**
MODEL CODE : AUDI E-TRON SPORTBACK ADV
MODEL YEAR : 31/3/2022
ENGINE NO : EAS 154122
CHASSIS NO : WAUZZZGE1NB026893
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 17-Oct-22
PLACE OF ACCIDENT : SINGAPORE SWIMMING CLUB BASEMENT
CARPARK

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

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SKG 8152 A

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER REAR PARKING AID AND REAR LID KICK SENSOR.	S/N \$	360.00	✓
2	TO DEACTIVATE AND REACTIVARE HIGH VOLTAGE SYSTEM FOR VEHICLE.	S/N \$	480.00	3/2 ✓
3	TO DISMANTLE AND RENEW REAR BUMPER. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$	1,350.00	600
4	TO RESPRAY REAR BUMPER, REAR LOWER SPOILER AND BOTH REAR WHEEL ARCH TRIMS.	\$	3,000.00	1800 Wheel Arc X 2 = 400
5	TO RENEW LHS REAR RIM AND CARRY OUT WHEEL ALIGNMENT.	S/N \$	280.00	X.
6	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$	192.00	✓
TOTAL LABOUR CHARGES		:	\$ 5,662.00	

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. SKG 8152 A

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	REAR BUMPER <i>Repair</i>	1	\$ 1,914.00	+
2	REAR BUMPER TRIM - CENTER <i>Neu</i>	1	\$ 580.00	+
3	REAR BUMPER SPOILER <i>cut</i>	1	\$ 1,688.00	✓
4	REAR BUMPER DIFFUSER <i>Neu</i>	1	\$ 1,167.00	+
5	REAR BUMPER SECURING STRIP - UPPER / LOWER <i>Neu</i>	2	\$ 386.00	+
6	REAR BUMPER REFLECTOR - LH <i>Green</i>	1	\$ 152.00	+
7	REAR BUMPER GUIDE SECTION - LH	1	\$ 71.00	+
8	REAR BUMPER LOCKING MECHANISM - LH <i>?</i>	1	\$ 19.00	+
9	REAR BUMPER CLOSING ELEMENT - LH	1	\$ 79.00	+
10	REAR PARKING AID SENSOR - LH <i>Neu</i>	1	\$ 292.00	+
11	REAR PARKING AID SEAL RING	4	\$ 10.00	+
12	REAR WHEEL COVER - LH / RH <i>Neu</i>	2	\$ 726.00	✓
13	REAR ALUMINIUM RIM - LH <i>Neu</i>	1	\$ 3,910.00	+
14	SUNDRIES <i>?</i>		\$ 300.00	?
TOTAL SPARE PARTS			\$ 11,294.00	
TOTAL LABOUR CHARGES			\$ 5,662.00	
GRAND TOTAL			\$ 16,956.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

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

NAME : *Adrian Ly*
SURVEYED DATE : *01/11/22*
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS : *Not Authorised, 03 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

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

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	385D
Vehicle Details	
Vehicle No.:	SKG8152A
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Nov 2022
Vehicle Make:	AUDI
Vehicle Model:	E-TRON SPORTBACK ADVANCED 50 QU
Primary Colour:	Beige
Manufacturing Year:	2022
Engine No.:	-
Chassis No.:	WAUZZZGE1NB026893
Maximum Power Output:	287.0 kW (384 bhp)
Open Market Value:	\$71,882.00
Original Registration Date:	31 Mar 2022
First Registration Date:	31 Mar 2022
Transfer Count:	0
Actual ARF Paid:	\$56,388.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 Mar 2032
PARF Rebate Amount:	\$42,291.00
Intended COE Rebate Details	
COE Expiry Date:	30 Mar 2032
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$82,001.00
COE Rebate Amount:	\$77,151.00
Total Rebate Amount:	\$119,442.00

The information contained herein is correct as at 02 Nov 2022

OK





to

New E-tron Electric 50 Qu 71 KWh (A) Cars for Sale (2 vehicles)

Sort by Most Popular

15 results/page

Car Model	Price	Dealer	Built in	User Rating
Audi e-tron Electric				
 <input type="checkbox"/> 50 qu 71 kWh (A) <small>NEW VARIANT</small> <input type="checkbox"/> 50 qu Advanced 71 kWh (A) <input type="checkbox"/> 55 qu Advanced 95 kWh (A)	\$369,000 <small>\$34,800 /yr ?</small> \$397,960 <small>\$36,900 /yr ?</small> \$460,475	Premium Automobiles • 4.6km/kWh 308bhp Two-stage planetary gearbox with single gear (A) • 4.4km/kWh 308bhp Two-stage planetary gearbox with single gear (A) • 4.3km/kWh 355bhp Two-stage planetary gearbox with single gear (A)	Belgium 3 User Reviews	★★★★★ 3 User Reviews
Audi e-tron Sportback Electric				
 <input type="checkbox"/> 50 qu Advanced 71 kWh (A)	\$398,461 <small>\$37,100 /yr ?</small>	Premium Automobiles • 4.5km/kWh 308bhp Two-stage planetary gearbox with single gear (A)	Belgium No Ratings yet	<input type="button" value="Rate it!"/>

Car Model	Price	Dealer	Built in	User Rating
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15 results/page

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