ASS	IGNMENT
rom: Date:	Veh No: SFM 898L Yr Regn: 2022 July
stimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
D / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
o Inspect Vehicle No:	Make: And A Sport Backs 1984
t Workshop m/s	Colour Blue A/C: Insured / Std / NI / NA
	Sp.Reading 8848 . T/Radio: Insured / Std / NI / NA
sured:	Eng/No:
olicy No.	C/No: WAUZZZF 5 x MA = 048 350
laims No.	Gen. Cond Good / Fair / Poor / Burnt
um Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
ake of Veh:	Modi: Nil /S/Rim / STD A/Rim or
	Tyre Size: F: 2 45/40R18
(Policy Condition)	R: 245/40RL8
emark: 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 Hunkask.
al. or Market Value:	<u>Front</u> <u>Rear</u>
AC Accident Rport: Consistent? : Yes or No	R/Bal. Mm R/Bal. OC mm
IA / PR Seen: Consistent? : Yes or No	L/Bal. 96 mm L/Bal. 06 mm
st. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 11/11/22
um Sum: % 3 Val.: Yes or No	Survey held at
A / REV / REP. / 24 HRS	Des. of Damages Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	r
ate:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction	
00000	
MV : 2451C.	
PV: 118.6K	
Nett: 126.4K.	
te/Time, File Pass to? : Preli. Report -	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Fee:
ate/Time, File Return to?	Transportation:
	Tarioportation.
Add Fe	e: :Site Insp (\$)_s+Rs_si

Bonning Prairie & B FD fe 700

SP1422B70004 / PREMIUM AUTOMOBILES PTE LTD [408699] ENTRY DATE & TIME: 07/11/2022 13:58 (SGT) SUBMITTED BY: FOONG CHIN FONG VERSION: 1 (07/11/2022 13:58 (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

07/11/2022 13:58 (SGT) Date of Submission Both Reported by 05/11/2022 12:30 (SGT) Date of Accident Holland Rd, Singapore **Exact Location of Accident** Additional Location Information

Singapore

DETAILS OF OWN VEHICLE

SFM898L Vehicle Registration Number

INSURED/POLICYHOLDER

Country/State of Loss

No Is company? LOH TECK KWANG Name Of Registered Owner SXXXX351C NRIC No BRYAN@KIMSOONLEE.COM **Email Address** (Phone) +65-91818855 Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

Audi Manufacturer Model A5 SPORTBACK 2.0 TFS

Variant 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

CC

Auto Transmission 1984

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number AIG Asia Pacific Insurance Pte. Ltd. 7220077874

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

LOH TECK KWANG SXXXX351C 21/10/1982 Indoor

Private use

Private car

Yes

Date Of Driving Pass 30/01/2009 Driving experience 13 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-91818855 Alt. Phone Number **Email Address** BRYAN@KIMSOONLEE.COM Address **BLK 83 WEST COAST DRIVE** Address complement #01-07 Postcode 127999 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? 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 JANE ANG Gender Female PASSENGER 2 Name LOH YI JUN 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 ON 5TH NOV 2022 @1230HR, I WAS TRAVELLING TOWARDS ORCHAR ROAD @HOLLAND ROAD. MERCS VEHICLE NO SJZ63M STOPPED SUDDENLY & I PRESSED HAND ON MY BRAKES AND THIS RESULTED MY VEHICLE SKIDDED & HIT REAR OF SJZ63M AND HE HIT TO SLH8842A. I ALIGHTED AND CONFIRMED WITH 2 DRIVERS ON WHETHER THEY OR THEIR PASSENGERS WAS INJURED AND THEY CONFIRMED NONE. ATTACHMENT(S) Are accident photos available for attachment? Yes

Yes

Was there any video captured by Car Camera?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJZ63M
Vehicle Manufacturer	
Vehicle Model	C63
Vehicle Variant	
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	JOHAN MEGA
Contact Number	(Phone) +65-96707007
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	matata te
Details of property damaged in accident	Marcel Company Company
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer	SLH8842A Audi
Vehicle Model	Q5
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 7. By the ladgement 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;
- (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

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A- 5FM 898L

C-SLH8842A

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	SHI NOV 2012 @ 1240UR , 1 was travelling Cowards	
Orch	and of a House bond, meres white no	
517	63 M Stoped Suddenly & 1 pressed hard on my	
bra	ces and this resulted my rehide skidded & His	
6A	SJZ 63 m and he hit to SUI 884211.	_
1	lighted and confined with I driver on whether-	H
	their passengers was injured and they confirmed	
101	l -	_
		_
		_

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

* 310

Witnessed by Reporting Centre Personnel Tom Fung

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/0984/2022/EQ

DATE

10-Nov-22

WIP

49486

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

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

MR LOH TECK KWANG

ADDRESS

BLK 83 WEST COAST DRIVE

#01-07

SINGAPORE 127999

TELEPHONE

HP +65 91818855

TYPE OF CLAIM

OWN DAMAGE CLAIM

POLICY NO

7220077874

VEHICLE NO

SFM 898 L

MODEL CODE

: AUDI A5 SPORTBACK 2.0 TFS

MODEL YEAR

: 13/7/2022

ENGINE NO

: DEM 032217

LIVOINE IVO

: WAUZZZF5XMA048350

CHASSIS NO MILEAGE

. .

DATE IN

.

ESTIMATED BY

JOHNNY BOO / ALLAN WU

ACCIDENT DATE

5-Nov-22

PLACE OF ACCIDENT

HOLLAND ROAD





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 SFM 898 L

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	\$ 350,00	X,
3	TO DISMANTLE AND RENEW FRONT BUMPER, BONNET AND LHS HEADLIGHT. TO REPAIR LHS FRONT FENDER. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.		\$ 2,500:00	500
4	TO RESPRAY FRONT BUMPER, LHS FRONT FENDER AND BONNET.		\$ 3,000.00	550
5	TO CARRY OUT DIAGNOSTIC CHECK	S/N	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 6,522.00	





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. SFM 898 L

DAMAGED PARTS & PRICES

S/N	PARTS DESCRIPTION	QTY	S/NETT REMARKS
1	FRONT BUMPER Deld	1	\$ 2,493.00
2	FRONT BUMPER SECURING STRIP - LH / RH	2	\$ 79.00 ⁺
3	FRONT BUMPER GRILLE - CENTER	1	\$ 219.00 ←
4		161	\$ 293.00 €
5	FRONT BUMPER AIR GUIDE - LH ZM a	1	\$ 72.00 *
6	FRONT BUMPER CLOSING ELEMENT	1	\$ 293.00 4
7	FRONT BUMPER AIR GUIDE GRILLE - LH	1	\$ 151.00
8	FRONT BUMPER OUTER GRILLE HOLE COVER - LH M ~	1	\$ 54.00 &
9	FRONT BUMPER TRIM - CENTER	1	\$ 127.00 T
10	RADIATOR GRILLE Could	1	ТВС
11	RADIATOR GRILLE COVER CAP MM	1	\$ 141.00
12	RADIATOR GRILLE BRACKET	1	\$ 19.00
13	RADIATOR SECURING PLATE	1	\$ 12.00
14	FRONT "360" CAMERA ?	1	\$ 1,264.00
15	FRONT BUMPER FOAM FILLER PIECE Quid	1	\$ 163.00
16	FRONT BUMPER REINFORCEMENT BEAM BUT	1	\$ 899.00
17	FRONT BUMPER GUIDE SECTION - LH Are w	1	\$ 41.00
18	FRONT BUMPER TOP COVER Hole	1	\$ 143.00
19	CAUTION SIGN STICKER 3	1	\$ 16.00 🗡
20	AIR CONDITIONER STICKER	1	\$ 9.00
	SUB TOTAL SPARE PARTS		\$ 6,488.00

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. SFM 898 L

DAMAGED PARTS & PRICES

S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	LOCK CARRIER BRACKET Cont a	1	\$ 154.00	/
22	FRONT BUMPER SUPPORT - LH / RH	2	\$ 64.00	
23	FRONT PARKING AID SENSOR - INNER / OUTER Me	2	\$ 531.00 (
24	FRONT PARKING AID SEAL RING 7	4	\$ 10.00	
25	FRONT PARKING AID SEAL RING (New	4	\$ 16.00	
27	FRONT PARKING AID SEAL RING	4	\$ 10.00	
28	HORN HIGH TONE - LH 2	1	\$ 134.00	
29	HORN BRACKET - LH	1	\$ 33.00	
30	BONNET MC	1	\$ 3,491.00	
31	BONNET IMPACT PROTECTION - CENTER / LH / RH	3	\$ 93.00	
32	BONNET STRIKER - LH 7	1	\$ 56.00	
33	BONNET LOCK	1	\$ 228.00 *	
34	BONNET BOWDEN CABLE - CENTER	1	\$ 64.00 +	
35	BONNET RELEASE LEVER	1	\$ 15.00 +	
36	BONNET RELEASE CABLE COVER	1	\$ 11.00	
37	BONNET BOWDEN CABLE - CENTER	1	\$ 64.00 [†]	
38	HEADLIGHT - LH	1	\$ 8,172.00	
39	LIFT CYLINDER - LH	1	\$ 217.00 +	
40	LIFT CYLINDER BRACKET - LH	1	\$ 17.00 🗸	
	SUB TOTAL SPARE PARTS		\$ 13,380.00	

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. SFM 898 L

DAMAGED PARTS & PRICES

S/N	PARTS DESCRIPTION	QTY	 S/NETT	REMARKS
41	LIFT CYLINDER CORRUGATED PIPE MC	1	\$ 107.00	+
42	OUTSIDE TEMPERATURE SENSOR BRACKET	1	\$ 21.00	
43	RADIATOR AIR GUIDE - LH / RH INNER 7	2	\$ 72.00	
44	RADIATOR AIR GUIDE - LH / RH OUTER	2	\$ 38.00 +	*
45	RADIATOR AIR GUIDE - UPPER / LOWER	2	\$ 44.00 🗶	
46	FRONT WHEEL HOUSING LINER - LH Mu	1	\$ 299.00	
47	FRONT WHEEL SPOILER - LH	1	\$ 82.00 C	
48	FRONT NO PLATE and	S/N	\$ 150.00	- Paray.
49	SUNDRIES 7		\$ 400.00	,
	TOTAL SPARE PARTS	:	\$ 21,081.00	
	TOTAL LABOUR CHARGES	:	\$ 6,522.00	
	GRAND TOTAL	:	\$ 27,603.00	

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

SURVEYED DATE

AUTHORISED DATE

EXCESS COST

LIABILITY REMARKS

Adoin G 11/11/22 Me Arthorised, 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

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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	351C
Vehicle Details	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
Vehicle No.:	SFM898L
Vehicle to be Exported:	Yes
Intended Deregistration Date:	14 Nov 2022
Vehicle Make:	AUDI
Vehicle Model:	A5 SPORTBACK 2.0 TFSI S TRONIC (110 KW)
Primary Colour:	Blue
Manufacturing Year:	2021
Engine No.:	DEM032217
Chassis No.:	WAUZZZF5XMA048350
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$36,524.00
Original Registration Date:	13 Jul 2022
First Registration Date:	13 Jul 2022
Transfer Count:	0
Actual ARF Paid:	\$43,134.00
Intended PARE Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	12 Jul 2032
PARF Rebate Amount:	\$32,350.00
Intended CCE Rebate Details	
COE Expiry Date:	12 Jul 2032
COE Category:	B - Car-Details at OneMotoring
COE Period(Years):	10
QP Paid:	\$107,800.00
COE Rebate Amount:	\$86,240.00
Total Rebate Amount:	\$118,590.00

The information contained herein is correct as at 14 Nov 2022





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harazatika konus	Car Model 🗘	Price 🕏	Dealer	Built in	User Rating 🗘
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				15	results/page

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