

(DB/1/1 3) wof
ASS. REC. BY: James

REF: CC3/AIG22012387/Rvp3

420F

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SLP 8382
at Workshop m/s PREMIUM
of 24, Bemo 1 Secur
Insured: ASH
Policy No. 2070109311
Claims No. 8110051765SG
Sum Insured: _____ Excess: TAA 800
(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: 17K
IDAC Accident Report: _____ Consistent? : Yes or No
GIA / PR Seen: _____ Consistent? : Yes or No
Est. Repairs: _____ days Res.: Yes or No
Turn Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLP 8382 Yr Regn: 2020 July
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____

Make: Audi A5 S.P 2.0 TFSI S-T cc 1984
Colour Blue A/C: Insured / Std / NI / NA
Sp. Reading 14513 T/Radio: Insured / Std / NI / NA

Eng/No: _____
C/No: WMA222FSOLA018353

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or _____

Brake: In order / Jammed / Leaked / Burnt or _____

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

Tyre Size: F: 285/35R19
R: _____

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

Front		Rear	
R/Bal. <u>6</u>	mm	R/Bal. <u>6</u>	mm
L/Bal. <u>6</u>	mm	L/Bal. <u>6</u>	mm
D.O.A. <u>8/12/22</u>		D.O.I. <u>07/12/22</u>	

Survey held at PREMIUM

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

0/8 FRT

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

Date / Time Action / Instruction

REPAIR LIMIT - 115K

14/2/23 Final fig \$14,306.32 confirmed by email (Red 8144.68, 36%)

Date/Time, File Pass to?

☐ : Prel. Report
☐ : Final Report

Days Of Repair: 5

Resurvey No. of Trip: 1

Survey Fee: _____

Date/Time, File Return to?

1) 1/3/23-typist

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Transportation: _____

Photos _____

Others _____

Report Format : Merimen

Temp Sum / I.B.I. (\$ \$14,306.32)

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/01095/2022/EQ
DATE : 7-Dec-22
WIP : 53753

VEHICLE IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 9/12/2022

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 AW SUAT HUAY
ADDRESS : 87 AMBER ROAD
#14-21
SINGAPORE 439897
TELEPHONE : HP +65 96988729
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : 2070109311-01
VEHICLE NO : **SLP 838 Z**
MODEL CODE : AUDI A5 SPORTBACK 2.0 TFS
MODEL YEAR : 29/7/2020
ENGINE NO : DEM 024112
CHASSIS NO : WAUZZZF50LA018353
MILEAGE : 14,512
DATE IN : 6-Dec-22
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 6-Dec-22
PLACE OF ACCIDENT : ENTRANCE TO THE SHORE RESIDENCES

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLP 838 Z

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 RHS HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N \$ 400.00 250	
3	TO REMOVE AND REINSTALL RHS FRONT DOOR PANEL TRIM. TO REMOVE AND REINSTALL RHS WING MIRROR ASSY TO FACILITATE RESPRAY OF RHS FRONT DOOR.	S/N \$ 280.00 /	
4	TO DISMANTLE AND RENEW FRONT BUMPER, RHS FRONT FENDER AND RHS HEADLIGHT. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 2,400.00 1000	
5	TO RESPRAY FRONT BUMPER, RHS FRONT FENDER AND RHS FRONT DOOR.	\$ 3,000.00 1650	
TOTAL LABOUR CHARGES		: \$ <u>6,560.00</u>	

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLP 838 Z

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
6	TO RENEW RHS FRONT RIM AND CARRY OUT WHEEL ALIGNMENT.	S/N \$ 280.00	X
7	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	/
TOTAL LABOUR CHARGES		: \$ 7,032.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLP 838 Z

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
1	FRONT BUMPER <i>de/</i>	1	\$	2,493.00	
2	FRONT BUMPER SECURING STRIP - LH / RH <i>X</i> <i>Q?</i>	2	\$	79.00	
3	FRONT BUMPER CLOSING ELEMENT - LOWER CENTRE <i>?</i>	1	\$	293.00	
4	FRONT BUMPER AIR GUIDE - RH <i>?</i>	1	\$	72.00	
5	FRONT BUMPER AIR GUIDE GRILLE - RH <i>?</i>	1	\$	151.00	
6	FRONT BUMPER OUTER GRILLE HOLE COVER - RH <i>X</i>	1	\$	54.00	
7	FRONT BUMPER GUIDE SECTION - RH <i>?</i>	1	\$	41.00	
8	FRONT BUMPER TOP COVER <i>X</i>	1	\$	143.00	
9	CAUTION SIGN STICKER <i>X</i>	1	\$	16.00	
10	AIR CONDITIONER STICKER <i>X</i>	1	\$	9.00	
11	FRONT PARKING AID SENSOR - OUTER <i>?</i>	1	\$	266.00	
12	FRONT PARKING AID SEAL RING <i>ne/</i>	4	\$	10.00	
13	FRONT FENDER - RH <i>4/</i>	1	\$	1,189.00	
14	FRONT FENDER ATTACHMENT PARTS <i>X</i>	1	\$	55.00	
15	FRONT FENDER CLOSING ELEMENT - RH <i>rec/</i>	1	\$	83.00	
16	FRONT FENDER BRACKET - RH FRONT <i>ne/</i>	1	\$	41.00	
17	FRONT FENDER RIVET <i>m/</i>	6	\$	23.00	
18	FRONT FENDER BRACE - RH <i>?</i>	1	\$	132.00	
19	FRONT FENDER DEFORMATION ELEMENT BRACKET - RH <i>X</i>	1	\$	55.00	
20	FRONT FENDER BRACKET - RH CENTER <i>X</i>	1	\$	40.00	
SUB TOTAL SPARE PARTS		:	\$	5,245.00	

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. SLP 838 Z

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	FRONT WHEEL HOUSING LINER - RH <i>tom</i>	1	\$	299.00
22	FRONT WHEEL SPOILER <i>ca</i>	1	\$	82.00
23	FRONT WHEEL SPOILER END PLATE - RH <i>?</i>	1	\$	40.00
24	FRONT WHEEL SPOILER STONE CHIP GUARD - RH <i>?</i>	1	\$	57.00
25	FRONT WHEEL SPOILER TRIM BRACKET - RH <i>X</i>	1	\$	27.00
26	FRONT FENDER CHROME TRIM - RH <i>m</i>	1	\$	171.00
27	FRONT DOOR CHROME TRIM - RH <i>m</i>	1	\$	171.00
28	FRONT FENDER LEDGE COVER - LONG <i>?</i>	1	\$	40.00
29	FRONT FENDER LEDGE COVER - RH SHORT <i>?</i>	1	\$	18.00
30	HEADLIGHT COVER - RH <i>?</i>	1	\$	49.00
31	HEADLIGHT - RH <i>ca</i>	1	\$	8,172.00
32	LIFT CYLINDER - RH <i>?</i>	1	\$	217.00
33	LIFT CYLINDER BRACKET - RH <i>?</i>	1	\$	17.00
34	LIFT CYLINDER CORRUGATED PIPE <i>?</i>	1	\$	107.00
35	LIFT CYLINDER CORRUGATED HOSE <i>?</i>	1	\$	53.00
36	LOCK CARRIER BRACKET <i>X</i>	1	\$	154.00
37	RHS FRONT RIM <i>X</i>	S/N	TBC	
38	SUNDRIES <i>?</i>		\$	500.00
TOTAL SPARE PARTS			:	\$ 15,419.00
TOTAL LABOUR CHARGES			:	\$ 7,032.00
GRAND TOTAL			:	\$ 22,451.00

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APPROVED
SPARE PARTS ARE SPECIAL NETT.

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TEL : 6366 2323 FAX : 6841 1183

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

NAME : *Pasir - Hp 9001 0068*
SURVEYED DATE : *09/12/22 @ 1650*
AUTHORISED DATE :
EXCESS COST : *5 days*
LIABILITY : *Revert*
REMARKS : *EXCESS: TRA*
Resurvey before print

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

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	06/12/2022 16:24 (SGT)
Reported by	Both
Date of Accident	06/12/2022 09:30 (SGT)
Exact Location of Accident	Amber Rd, Singapore
Additional Location Information	ENTRANCE TO THE SHORE RESIDENCES
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP838Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AW SUAT HUAY
NRIC No	SXXXX480F
Email Address	ELYNAW23@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-96988729
Alternative Phone No	-

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	2070109311-01

DRIVER

Name of Driver	AW SUAT HUAY
NRIC No	SXXXX480F
Date Of Birth	23/11/1978
Occupation	Indoor

Date Of Driving Pass	26/09/2001
Driving experience	21 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96988729
Alt. Phone Number	-
Email Address	ELYNAW23@YAHOO.COM.SG
Address	87 AMBER ROAD
Address complement	#14-21
Postcode	439897
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	Collision - Major/Minor Rd
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?	Yes
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

I WAS SLOWLY FILTERING OUT FROM MY CONDO EXIT. I WANTED TO TURN RIGHT TO THE MINOR ROAD AFTER SEEING NO TRAFFIC OBSTRUCTION. WHILE I WAS TURNING OUT, THE CAR SUDDENLY BRAKE TO STOP TO ATTEMPT TO TURN RIGHT INTO THE CONDO. I DIDN'T HAVE SUFFICIENT TIME TO REACT AND STOP THE CAR AND I LIGHTLY HIT ONTO HIS SIDE REAR OF THE CAR (LEFT SIDE).

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	SMY9798L
Vehicle Manufacturer	Toyota
Vehicle Model	Noah
Vehicle Variant	-
Vehicle Colour	White
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)

TAN YEOW KOON
(Phone) +65-88698338

1

SKETCH PLAN

IMPORTANT NOTICE

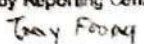
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts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

11/12/22

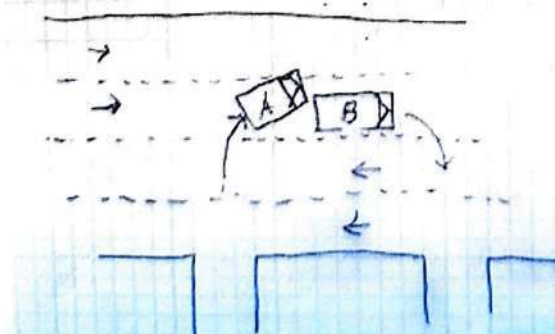
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel 

Sketch Plan



A - SLP838Z

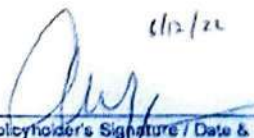
B - SMY9798L

Describe Circumstances of the Accident


I was slowly filtering out from my undo exit.
I wanted to turn right to the main road after clearing
no traffic obstruction.
While I was turning out, ~~sudden~~ the car suddenly
brake to stop to attempt to turn right into
the undo.
I didn't have sufficient time to react and stop the
car & ~~and~~ and I lightly hit onto his side rear
of the car (left side).

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date &
Time 6/12/22

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


Witnessed by Reporting Centre
Personnel Tony Fong

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 480F

Vehicle Details

Vehicle No.: SLP838Z
Vehicle to be Exported: No
Intended Deregistration Date: 11 Dec 2022
Vehicle Make: AUDI
Vehicle Model: A5 SPORTBACK 2.0 TFSI S TRONIC (110 KW)
Primary Colour: Blue
Manufacturing Year: 2020
Engine No.: DEM024112
Chassis No.: WAUZZZF50LA018353
Maximum Power Output: 110.0 kW (147 bhp)
Open Market Value: \$39,127.00
Original Registration Date: 29 Jul 2020
First Registration Date: 29 Jul 2020
Transfer Count: 0
Actual ARF Paid: \$46,778.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 28 Jul 2030
PARF Rebate Amount: \$35,083.00

Intended COE Rebate Details

COE Expiry Date: 28 Jul 2030
COE Category: B - Car above 1600cc or 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$35,001.00
COE Rebate Amount: \$26,702.00
Total Rebate Amount: \$61,785.00

Audi A5 Sportback 2.0A TFSI S-tronic Design

- Overview
- Financial
- Accessories
- Similar
- Research
- Photos
- Map



Price	\$166,988		
Depreciation ⓘ	\$20,170 /yr View models with similar depre	Reg Date	30-Jan-2020 (7yrs 1mth 18days COE left)
Mileage	57,000 km (19.9k /yr)	Manufactured ⓘ	2019
Road Tax ⓘ	\$1,194 /yr	Transmission	Auto
Dereg Value ⓘ	\$61,377 as of today (change)	OMV ⓘ	\$38,530
COE ⓘ	\$37,705	ARF ⓘ	\$45,942
Engine Cap	1,984 cc	Power	140.0 kW (187 bhp)
Curb Weight ⓘ	1,535 kg	No. of Owners	1