

(08/11/11) Wef

ASS. REC. BY: Pone

REF:

CC3/AIG22012437/Rqp3

699A

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / T / WS / TP RES / OD RES / EVA / INV / MVTo inspect Vehicle No: SCR 17at Workshop no/s PREMIUMof 24, Bendi StreetInsured: AIG

Policy No. _____

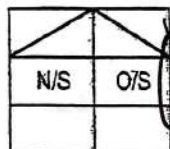
Claims No. _____

Sum Insured: _____ Excess: TBA 0/-

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 175K

IDAC Accident Report Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Date / Time Action / Instruction

REPAIR LIMIT - 169K

21/12/22 Submit Preli. Report. as the vehicle can repair at AIG authorised wksp.

Date/Time, File Pass to?

1) 21/12 Typist

Date/Time, File Return to?

2) _____

Report Format :

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

Veh No: SCR 174Yr Regn: 2019 / 09Type: Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Audi A6 D81HN 2.0 TFSI cc 1984Colour: BLUE A/C: Insured / Std / NI / NASp. Reading: 54632 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: W4UZZ2P20L N014 639

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: NI / 5 Rim / STD A/Rim orTyre Size: F: 245/452R19

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 09/12/22D.O.I. 12/12/22Survey held at PREMIUMDes. of Damages: Fnt / Rear / O/S / N/S / U/C / Rooftop or

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



Preli. Report



Final Report

Days Of Repair: 5

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

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

Photos

Others

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/1108/2022/EQ
DATE : 9-Dec-22
WIP : 54201

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

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 : MDM FENELLA TANG OI YOKE
ADDRESS : 21 PECK HAY ROAD
#12-04
SINGAPORE 228314
TELEPHONE : HP +65 81114661
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : 1900171773
VEHICLE NO : **SCR 17 Y**
MODEL CODE : AUDI A6 DESIGN 2.0 TFSI S
MODEL YEAR : 29/10/2019
ENGINE NO : DLH 065750
CHASSIS NO : WAUZZZF20LN014639
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 9-Dec-22
PLACE OF ACCIDENT : 21 PECK HAY ROAD AT THE RESIDENCE CARPARK AREA

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 SCR 17 Y

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER RHS FRONT DOOR AND RHS REAR DOOR'S MULTI-LOCK SYSTEM AND POWER WINDOW DEVICES. INSPECT FOR DAMAGES.	S/N \$ 800.00 /	
2	TO DISMANTLE AND RENEW RHS FRONT DOOR AND RHS REAR DOOR. TO REPAIR RHS REAR FENDER. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 2,800.00 / 1250	
3	TO RESPRAY RHS FRONT DOOR, RHS REAR DOOR, RHS REAR FENDER, FUEL FILLER CAP, TWO DOOR HANDLES AND RHS WING MIRROR COVER.	\$ 4,000.00 / 1900	
4	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00 /	
TOTAL LABOUR CHARGES		: \$ 7,792.00	



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. SCR 17 Y

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	FRONT DOOR - RH <i>bt</i>	1	\$ 4,489.00	
2	FRONT DOOR OUTER SEAL - RH <i>ne</i>	1	\$ 191.00	
3	FRONT DOOR CATCH - RH <i>?</i>	1	\$ 134.00	
4	FRONT DOOR OUTER SEAL - RH LOWER <i>ne</i>	1	\$ 213.00	
5	FRONT DOOR HANDLE CHROME TRIM PLATE - RH <i>scr</i>	1	\$ 109.00	
6	FRONT DOOR HANDLE SENSOR - RH <i>?</i>	1	\$ 278.00	
7	FRONT DOOR SLIDE VALVE - RH <i>?</i>	1	\$ 15.00	
8	FRONT DOOR HANDLE - RH <i>?</i>	1	\$ 389.00	
9	FRONT DOOR CHROME PANEL CAP - RH UPPER <i>mis</i>	1	\$ 100.00	
10	REAR DOOR UNDERLAY - RH <i>ne</i>	1	\$ 7.00	
11	FRONT DOOR UNDERLAY - RH <i>ne</i>	1	\$ 6.00	
12	FRONT DOOR MOUNTING BAR - RH <i>?</i>	1	\$ 145.00	
13	FRONT DOOR HANDLE EXTERIOR PERIPHERAL LIGHT - RH <i>?</i>	1	\$ 81.00	
14	FRONT DOOR LOCK CYLINDER - RH <i>?</i>	1	\$ 581.00	
15	FRONT EXTERIOR WING MIRROR MOUNTING - RH <i>can</i>	1	\$ 3,069.00	
16	FRONT WING MIRROR GLASS - RH <i>can</i>	1	\$ 1,752.00	
17	FRONT WING MIRROR CAP - RH <i>mis</i>	1	\$ 348.00	
18	FRONT WINDOW SLOT SEAL CHROME TRIM STRIP - RH OUTER <i>scr</i>	1	\$ 224.00	
19	REAR DOOR <i>bt</i>	1	\$ 4,489.00	
20	REAR DOOR SEAL BRACKET <i>X</i>	1	\$ 169.00	
SUB TOTAL SPARE PARTS		:	\$ 16,789.00	

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

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SCR 17 Y

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
21	REAR DOOR WEATHER STRIP - RH <i>re-</i>	1	\$	191.00	
22	REAR DOOR SEAL BRACKET - RH <i>re- ?</i>	1	\$	169.00	
23	REAR DOOR STONE CHIP PROTECTION FILM - RH <i>X</i>	1	\$	138.00	
24	REAR DOOR OUTER SEAL - RH UPPER <i>re-</i>	1	\$	206.00	
25	REAR DOOR OUTER SEAL - RH LOWER <i>re-</i>	1	\$	166.00	
26	REAR DOOR CATCH - RH <i>?</i>	1	\$	134.00	
27	REAR DOOR HANDLE - RH <i>re- ?</i>	1	\$	389.00	
28	REAR DOOR HANDLE CHROME TRIM PLATE - RH <i>scr-</i>	1	\$	109.00	
29	REAR DOOR CHROME PANEL CAP - RH UPPER <i>X</i>	1	\$	100.00	
30	REAR WINDOW SLOT SEAL TRIM STRIP - RH OUTER <i>X</i>	1	\$	211.00	
31	SUNDRIES <i>?</i>		\$	500.00	
TOTAL SPARE PARTS		:	\$	19,102.00	
TOTAL LABOUR CHARGES		:	\$	7,792.00	
GRAND TOTAL		:	\$	26,894.00	

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

SURVEYED DATE

AUTHORISED DATE

EXCESS COST

LIABILITY

REMARKS

: RASUL - Hp 90010068
: 12/12/22 @ 1600
: 5 days
: EXCESS: TBA
: Revert
: Resy 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	09/12/2022 15:04 (SGT)
Reported by	Driver
Date of Accident	09/12/2022 01:20 (SGT)
Exact Location of Accident	21 Peck Hay Rd, Singapore 228311
Additional Location Information	21 PECK HAY ROAD AT THE RESIDENCE CARPARK AREA
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCR17Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	FENELLA TANG OI YOKE
NRIC No	SXXXX699A
Email Address	FENELLA.TANG@GMAIL.COM
Mobile Phone No	(Phone) +65-81114661
Alternative Phone No	(Home) +65-66407597

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A6
Variant	DESIGN 2.0 TFSI S
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	1900171773

DRIVER

Name of Driver	WOON KOCK KUAN
NRIC No	SXXXX096C
Date Of Birth	08/01/1958
Occupation	Outdoor

Date Of Driving Pass
 Driving experience
 Gender
 Mobile Number
 Alt. Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

16/06/1976
 46 YEARS AND 6 MONTHS
 Male
 (Phone) +65-84440017
 (Home) +65-66407597
 PATRICKWOON17@GMAIL.COM
 21 PECK HAY ROAD
 #12-04
 228314
 No
 Spouse
 No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Side Swipe
 Clear
 Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
 Number of vehicles involved in the accident
 Was anybody injured in the Accident?
 Was any injured conveyed to hospital by ambulance?
 Was any other vehicle or property damaged?
 Number of Passengers (Including Driver)
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?
 Translator's name
 Translator's ID
 Translator's phone number
 Translator's email
 Original language used in the statement

No
 2
 No
 -
 Yes
 1
 No
 -
 -
 -
 -

DETAILS OF POLICE ACTION

Was the accident reported to the police?
 Was notice of intended Prosecution given?
 If yes, against whom?

No
 No
 -

CIRCUMSTANCES OF ACCIDENT

A TAXI DRIVER WAS DRIVING IN FRONT OF ME AS HE WAS STOPPING HIS CAR ON THE RIGHT SIDE OF THE CARPARK WHICH IS ONLY MEANT FOR RESIDENTS ONLY. I GUESS THE PASSENGER ASKED HIM TO DRIVE INSIDE TO ALIGHT INSTEAD OF THE DROP-OFF POINT OUTSIDE THE CARPARK. SEEING THE TAXI ALREADY STOPPING, I INITIATE A HIGH BEAM TO LET THE DRIVER AND PASSENGER AWARE THAT I AM PASSING BY THEM. AS SOON AS I PASSED BY THE PASSENGER DAVID SHIN OPENED THE DOOR AND HIT MY WING MIRROR AND THE CAR DOOR PANEL. DAVID SHIN IS MY NEIGHBOUR STAYING AT #05-02, MOBILE NUMBER 92333794.

ATTACHMENT(S)

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

Yes
 No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant

SHD9166E
 Toyota
 -
 -

Vehicle Colour	Red
Vehicle Category	Taxi
Name of Driver	NYIU YAM
Contact Number	(Phone) +65-97677713
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

TIC
n T
y M
cle
er /
nju
rec
er:
e/l
ck
ne
m
nt
al l
C
y)
sc
cic
em
es
OS
arts
isc
abc
ain
owi

This

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 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

9/12/22

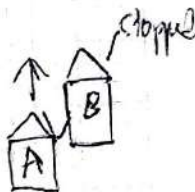
Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan

A: SCR 17Y
B: SHD 9166 E

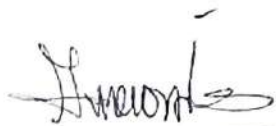


Describe Circumstances of the Accident

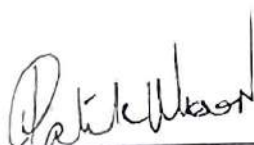
Taxi^{driver} was driving in front of me as he was stopping his car on the right side of the carpark which is only ~~for~~ meant for residence only. I guess the passenger asked him to drive inside to alight instead of the drop off point outside the carpark. Seeing the taxi already stopping I initiate high beam to let driver and passenger aware that I am passing by them. As soon as I passed by the passenger David Shin opened the door and hit my wing mirror and the car door panel. David Shin is my neighbour staying at #05-02, mobile number 92333794.

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



Witnessed by Reporting Centre Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	699A

Vehicle No.:	SCR17Y
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Dec 2022
Vehicle Make:	AUDI
Vehicle Model:	A6 DESIGN 2.0 TFSI (180 KW)
Primary Colour:	Blue
Manufacturing Year:	2019
Engine No.:	DLH065750
Chassis No.:	WAUZZZF20LN014639
Maximum Power Output:	180.0 KW (241 bhp)
Open Market Value:	\$44,096.00
Original Registration Date:	29 Oct 2019
First Registration Date:	29 Oct 2019
Transfer Count:	0
Actual ARF Paid:	\$53,735.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Oct 2029
PARF Rebate Amount:	\$40,301.00

COE Expiry Date:	28 Oct 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$36,001.00
COE Rebate Amount:	\$24,745.00
Total Rebate Amount:	\$65,046.00

The information contained herein is correct as at 13 Dec 2022

OK

Audi A6 Mild Hybrid 2.0A TFSI S-tronic Design

Overview

[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

Price	\$175,000		
Depreciation ⓘ	\$21,910 /yr View models with similar depre	Reg Date	14-Oct-2019 (6yrs 10mths COE left)
Mileage	63,000 km (19.9k /yr)	Manufactured ⓘ	2019
Road Tax ⓘ	\$1,194 /yr	Transmission	Auto
Dereg Value ⓘ	\$62,362 as of today (change)	Fuel Type	Petrol-Electric
COE ⓘ	\$36,001	OMV ⓘ	\$41,660
Engine Cap	1,984 cc	ARF ⓘ	\$50,324
Curb Weight ⓘ	1,715 kg	Power	180.0 kW (241 bhp)
Type of Vehicle	Luxury Sedan	No. of Owners ⓘ	1