SS. FEG. BY:	
AS	SSIGNMENT
rom: Date:	Veh No: SGH 168A. Yr Regn: 2022, August
stimated Cost:	Typer M.Cap / 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: Andi etron 50 a.c -
Workshop m/s	Colour While A/C: Insured / Std / NI / NA
	Sp.Reading \$280 T/Radio: Insured / Std / NI / NA
sured:	Eng/No:
olicy No.	C/No: WAUZZZGE3NBO+41928.
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:	Modí: Nil /S/Rim / STD A/Rim or
	Tyre Size: F: 255/55 R19
(Policy Condition)	R: 255/55R19
mark: The veh had commenced its N/S O/S	
repair at the time of inspection.	ΤΟΥΟΙΎΟΚΟ ΟΓ
al, or Market Value:	Front Rear
AC Accident Rport: Consistent? : Yes or No	R/Bal. O mm R/Bal. O mm
A / PR Seen: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. 06 mm
Repairs:days Res.: Yes or No	D.O.A. D.O.I. 31 01 23
m Sum: % 3 Val.: Yes or No	Survey held at Kenism.
4 / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / Olite: Person Contacted:	
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision
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mv: 2901C	
PV: 137K	
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eTime, File Pass to? : Preli. Report	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Fee:
e/Time, File Return to?	Transportation:
Add F	ee: :Site Insp (\$ )_s+Rs_s
	R: Interview (\$ ) Photos

\$P14231J0001 / PREMIUM AUTOMOBILES PTE LTD [408699] ENTRY DATE & TIME: 19/01/2023 17:51 (SGT) SUBMITTED BY: LIM KEE SIANG VERSION: 1 (19/01/2023 17:51 (SGT))



## SINGAPORE ACCIDENT STATEMENT

#### MPORTANT NOTICE

I. Please report correctly the details of the accident to speed up the claims process.

This Form must be completed by the Policyholder and/or the Actual Driver 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.

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

Reported by

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

19/01/2023 17:51 (SGT)

Both

29/12/2022 19:50 (SGT)

E Coast Rd & Frankel Ave, Singapore

Red-Light Junction of East Coast Rd & Frankel Ave

Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SGH168A

#### INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

**Email Address** 

Mobile Phone No

Alternative Phone No.

Yes

Global Esplanade Pte Ltd

2XXXXXX2400

kimyeow@kenjocorp.com (Phone) +65-97546006

#### VEHICLE PARTICULARS

Manufacturer

Model

Audi

Etron Quattro

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission CC

Private use

Yes

Private car

Auto

#### INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd.

7220094400

### DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Tan Jo-Ann SXXXX939J

19/08/1976

Indoor

Date Of Driving Pass 28/12/1998 Driving experience 24 YEARS Gender Female Mobile Number (Phone) +65-97937254 Alt. Phone Number (Home) +65-64400546 Email Address tja.spore@gmail.com Address 71 Wilkinson Road Address complement Postcode 436761 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Employee 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 - Head to Rear 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) 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 Lucas Soh Gender Male PASSENGER 2 Name Atticus Soh Gender Male PASSENGER 3 Name Justin Tan Gender Male PASSENGER 4 Name Jessie Tan Gender Female 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 the red light junction when the light was still red. I accidentally stepped on the accelerator and the car (SGH168A) surged forward and collided with the vehicle in front (SMW1580K). There was damage to the car bumper of SMW1580K. It was cracked as seen in the picture.

ATTACHMENT(S)

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

Yes No

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

SMW1580K Vehicle Registration Number Vehicle Manufacturer Hyundai Vehicle Model Avante Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver Norazman Bin Mohd Contact Number (Phone) +65-96907484 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

scribe Circu	mstances o	of the Accid	ent				7 7		011 1
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### Declaration

We declare the foregoing particulars are true in every respect.

declare the Tollegonia

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### SKETCH PLAN

### MPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. 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.
- 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, acknow ledge, 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 &

Time

Sketch Pian

Gath 19/1/23

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

Witnessed by Reporting Centre

Personnel

# **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/0092/2023/EQ

DATE

27-Jan-23

WIP

59929

# VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON

### 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

M/S GLOBAL ESPLANADE PTE LTD

ADDRESS

19 KEPPEL ROAD

#03-07

SINGAPORE 089058

TELEPHONE

HP +65 97546006

TYPE OF CLAIM

OWN DAMAGE CLAIM

**POLICY NO** 

7220094400

**VEHICLE NO** 

SGH 168 A

MODEL CODE

AUDI E-TRON 50 QUATTRO GE

MODEL YEAR

29/8/2022

**ENGINE NO** 

FAS 167586

**CHASSIS NO** 

WAUZZZGE3NB041928

MILEAGE

DATE IN

**ESTIMATED BY** 

JOHNNY BOO / ALLAN WU

**ACCIDENT DATE** 

29-Dec-22

PLACE OF ACCIDENT

RED-LIGHT JUNCTION OF EAST COAST ROAD AND FRANKEL AVENUE

# \* PREMIUM AUTOMOBILES



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 SGH 168 A

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 CARRY OUT DE-ERNERGISING HIGH VOLTAGE SYSTEM, DEACTIVATION AND ACTIVATION.	S/N	\$ 480.00	/
3	TO REMOVE AND TRANSFER BOTH HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N	\$ 900.00	<b>X</b> ·
4	TO DISMANTLE AND RENEW FRONT BUMPER AND BOTH HEADLIGHT. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.		\$ 1,350.00	600
5	TO RESPRAY FRONT BUMPER		\$ 1,200.00	600
6	TO CARRY OUT DIAGNOSTIC CHECK.	S/N	\$ 192.00	/
	TOTAL LABOUR CHARGES	:	\$ 4,602.00	

# \* PREMIUM AUTOMOBILES



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. SGH 168 A

### **DAMAGED PARTS & PRICES**

S/N	PARTS DESCRIPTION			S/NETT REMARKS
1	FRONT BUMPER Resid	1	\$	3,066.00 😾
2	FRONT BUMPER TRIM - LH / RH ~ ~ ~	2	\$	138.00 +
3	FRONT BUMPER FIXING PARTS Me w	1	\$	689.00 *
4	FRONT BUMPER CLOSING ELEMENT - CENTER	1	\$	263.00
5	FRONT BUMPER FOAM PART - LH	1	\$	36.00 +
6	FRONT BUMPER GRILLE BRACKET COVER - LH / RH	2	\$	82.00 ?
7	FRONT BUMPER GRILLE INSULATOR - UPPER	1	\$	159.00
8	FRONT BUMPER GRILLE INSULATOR - LOWER	1	\$	133.00 .
9	FRONT BUMPER PLASTIC FOAM STRIP	1	\$	143.00
10	FRONT BUMPER GRILLE - LOWER CENTRE	1	\$	300.00
11	FRONT BUMPER GRILLE - CENTER	1	\$	181.00 ?
12	FRONT BUMPER CLOSING ELEMENT - LOWER HE M	1	\$	248.00 🗶
13	FRONT BUMPER AIR GUIDE - LH / RH XY W	2	\$	214.00 *
14	FRONT BUMPER IMPACT PROTECTION DEL	1	5	953.00 Pholo.
15	FRONT BUMPER SPOILER - LH / RH WE W	2	\$	234.00 🗶
16	RADIATOR AIR GUIDE - LH / RH OUTER 7	2	\$	128.00 📉
17	RADIATOR AIR GUIDE - LH / RH INNER	2	\$	100.00 🗡
18	RADIATOR AIR GUIDE - LH / RH	2	\$	282.00 +
19	RADIATOR GRILLE CONTROL	1	\$	2,466.00
20	RADIATOR GRILLE COVER CAP NH N-	1	\$	149.00 🗶
7.0	SUB TOTAL SPARE PARTS	:	\$	9,964.00
40.7			-	

ALL CHARGES ARE NOT INCLUSIVE OF GST

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

Thelo





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. SGH 168 A

### **DAMAGED PARTS & PRICES**

5/N	PARTS DESCRIPTION	QTY		S/NETT	REMARKS
21	RADIATOR GRILLE BRACKET	1	\$	111.00	
22	RADIATOR GRILLE SECURING PLATE	1	\$	99.00 7	
23	RADIATOR GRILLE COVER	1	\$	74.00	
24	RADIATOR GRILLE CLOSING ELEMENT	1	\$	262.00	
25	RADIATOR GRILLE COVER - LH / RH	2	\$	130.00	
26	FRONT "360" CAMERA	1	\$	1,115.00	
27	FRONT BUMPER REINFORCEMENT BEAM	1	\$	1,536.00 +	
28	FRONT BUMPER CROSS MEMBER	1	\$	491.00	
29	FRONT BUMPER GUIDE SECTION - LH / RH	2	\$	106.00	
30	FRONT BUMPER SHUTTER AIR BRACKET 7	1	5	509.00	
31	FRONT BUMPER BRACKET - LH / RH	2	5	184.00	
32	FRONT BUMPER TOP COVER 2	1	\$	125.00	
33	FRONT BUMPER COVER	1	\$	126.00	
34	FRONT PARKING AID SENSOR - INNER 7	2	\$	598.00	
35	FRONT PARKING AID SENSOR - OUTER	2	\$	598.00 →	
36	HEADLIGHT - LH / RH 7	2	\$	18,354.00 🔎	
37	LIFT CYLINDER - LH / RH AM	2	\$	548.00	
38	LIFT CYLINDER HOSE	1	\$	115.00	
39	RADIATOR AIR GUIDE - LH / RH	2	\$	78.00 🗡	
40	RADIATOR AIR GUIDE - UPPER / LOWER	2	\$	89.00 +	
	SUB TOTAL SPARE PARTS		\$	25,248.00	

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. SGH 168 A

### DAMAGED PARTS & PRICES

S/N	PARTS DESCRIPTION	QTY	 S/NETT	REMARKS
41	RADIATOR AIR GUIDE - UPPER / LOWER REAR	2	\$ 187.00	+
42	HEADLIGHT SEAL - LH / RH	2	\$ 126.00	×
43	FRONT WHEEL COVER - LH / RH	2	\$ 686.00	
44	FRONT NO PLATE HEL	S/N	\$ 60.00	
45	SUNDRIES ?		\$ 400.00	X.
	TOTAL SPARE PARTS	:	\$ 36,671.00	
	TOTAL LABOUR CHARGES	:	\$ 4,602.00	21
	GRAND TOTAL	- :	\$ 41,273.00	

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

Adrian ( )

we Anthorsed, 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:	Company
Owner ID:	924W
Vehicle Details	SGH168A
Vehicle No.:	No No
Vehicle to be Exported:	
Intended Deregistration Date:	01 Feb 2023
Vehicle Make:	AUDI
Vehicle Model:	E-TRON 50 QUATTRO
Primary Colour:	White
Manufacturing Year:	2022
Engine No.:	
Chassis No.:	WAUZZZGE3NB041928
Maximum Power Output:	287.0 kW (384 bhp)
Open Market Value:	\$64,035.00
Original Registration Date:	29 Aug 2022
First Registration Date:	29 Aug 2022
Transfer Count:	0
Actual ARF Paid:	\$42,263.00
Intended PARF Rebate Details	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Aug 2032
PARF Rebate Amount:	\$31,697.00
Intended COE Rebate Details	
COE Expiry Date:	28 Aug 2032
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$114,001.00
COE Rebate Amount:	\$105,301.00
Total Rebate Amount:	\$136,998.00

The information contained herein is correct as at 01 Feb 2023

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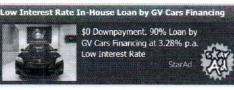
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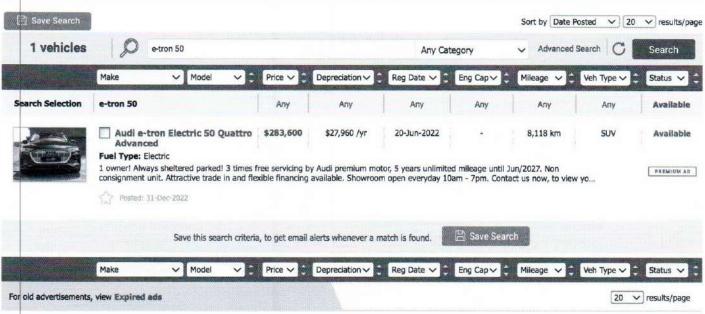


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