



Letter of Claims Request for direct settlement.

We are submitting a claim on behalf of our customer NURULHUDA BINTI ABDUL HALIM
NRIC _____ insured of vehicle SLK 5682 G against
your insured vehicle number QJK 75294 (AXA)
On the accident dated on 10.3.18 (ddmmyyy) along TAMPINES AVE 10.

Dated this 12 MAR 2018 (day) of _____ (month) 2018 .

Charmaine Kong
Volkswagen Group Singapore
Accident Claims Dept.
charmaine.kong@vw.com.sg
DID : 63057176/ 63057299
HP: 92361399

PDI TUAS

PDI TUAS

NURULHUDA BINTE ABDUL HALIM
60 ELIAS ROAD
#06-02
Singapore, 519938
Singapore

Phone No.
Fax No.
E-Mail

VAT Registration No. M20098505-2
Tax No. 199101494Z

Service Quote

Customer No. CV039372
Quote No. SER/QUO/1800424
QuoteDate 12/03/18
Salesperson Reeve Hiah
Page 1

THIS IS NOT AN OFFICIAL TAX INVOICE

| | | | |
|--------------------|--------------------------------|-----------------------------|------------------------|
| Make | Model Description | Mileage | Service Advisor |
| Volkswagen Passeng | TiguanGP 1.4 TSI 118kW DSG6BMT | 47,346 | Kong Charmaine |
| License No. | VIN | Initial Registration | Sales Advisor |
| SLS5682G | WVGZZZ5NZEW001090 | 23/07/13 | Reeve Hiah |
| Engine Code | Labor Type | Engine No. | Model Code |
| | 1H | CTH 081870 | 5N22QY |

| No. | Description | Qty. | UoM | Unit Price | Amount |
|--------------------|--|------|---------|------------|------------------|
| P B&P ALEX LABOUR | LABOUR | 4 | UNIT | | 3,360.00 |
| P B&P ALEX LABOUR | LABOUR TO REPLACE EXHAUST | 1 | UNIT | | 840.00 |
| P B&P ALEX PAINT | SPRAY PAINT | 1 | UNIT | | 800.00 |
| P B&P NUMBER PLATE | B&P NUMBER PLATE -NETT | 1 | pcs | | 80.00 |
| P B&P DIAG | PROGRAMMING & CALIBRATION | 1 | Time Un | | 480.00 |
| P B&P MECH | COMPULSORY TO DO AFTER AC ELECT WIRING & MECH COMPO | 1 | Time Un | | 280.00 |
| | Nett | | | | |
| | Sum Labor | | | | 5,840.00 |
| P 1J5943021D | LICENCE PLATE LAMP | 1 | Pieces | | 40.11 |
| P 1S0919275C GRU | SENSOR | 2 | Pieces | | 350.18 |
| | Predecessor 1S0919275C | | | | |
| P 1T0919133C 9B9 | PARKING SENSOR O RING | 2 | Pieces | | 1.30 |
| P 5N0253609AR | SILENCER/EXHUAUST | 1 | Pieces | | 1,786.90 |
| P 5N0807305 | RR BUMPER REINFORCEMENT | 1 | Pieces | | 480.96 |
| P 5N0807393E | BUMPER BRACKET LH | 1 | Pieces | | 23.80 |
| | Use Predecessor 5N0807393B | | | | |
| P 5N0807394D | BUMPER BRACKET RH | 1 | Pieces | | 23.80 |
| | Use Predecessor 5N0807394B | | | | |
| P 5N0807421G GRU | REAR BUMPER COVER | 1 | Pieces | | 1,138.50 |
| P 5N0807441 9B9 | TOWING COVER | 1 | Pieces | | 21.58 |
| | Do Not Unblock-Check Eugene Ng | | | | |
| P 5N0807521T 9B9 | SPOILER | 1 | Pieces | | 398.19 |
| | Do Not Unblock-Check Eugene Ng | | | | |
| P 5N0919397 | SENSOR BRACKET | 1 | Pieces | | 13.36 |
| | Sum carried forward | | | | 10,118.68 |

Payments to: - BBN: - Acc.-No.:

PDI TUAS

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NURULHUDA BINTE ABDUL HALIM
60 ELIAS ROAD
#06-02
Singapore, 519938
Singapore

Phone No.
Fax No.
E-Mail

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| Engine Code | Labor Type | Engine No. | Model Code |
| | 1H | CTH 081870 | 5N22QY |

| Continued | | | | 10,118.68 |
|--------------|----------------------------|----------|--|-----------------|
| P 5N0919398 | SENSOR BRACKET | 1 Pieces | | 13.36 |
| P 5N0919491D | SENSOR BRACKET | 2 Pieces | | 29.58 |
| P 5N0919491E | SENSOR BRACKET | 2 Pieces | | 29.58 |
| | Use Predecessor 5N0919491C | | | |
| P 5N0919503E | INNER SENSOR BRACKET (REA | 2 Pieces | | 29.56 |
| P 5N0941072 | REVERSING LIGHT RH | 1 Pieces | | 75.95 |
| P 5N0945106 | REFELCTOR REAR RH | 1 Pieces | | 52.53 |
| P D 180KU2A1 | 2KADHESIVE | 1 Pieces | | 89.84 |
| P D 822150A1 | BONDAGENT | 1 Pieces | | 64.27 |
| | Sum Item | | | 4,663.35 |

| | |
|----------------------------|------------------|
| Sum Labor | 5,840.00 |
| Sum Item | 4,663.35 |
| Total SGD | 10,503.35 |
| 7% GST | 10,503.35 735.23 |
| Total SGD Incl. GST | 11,238.58 |

Explanations

P = Proportionately Charged

Payment Terms No Credit

Payments to: - BBN: - Acc.-No..:

MS16
WINNER
VS
AXA
OUT

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 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 ability.
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 Report 12/03/2018 08:13
Date Of Accident 10/03/2018 12:20
Exact Location Of Accident TAMPINESE AVE 10
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLS5682G
Insured/Policyholder
Name Of Registered Owner NURULHUDA BINTE ABDUL HALIM
NRIC No S7930485I
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-91066014
Alternative Phone No OFFICE-91066014
Vehicle Particulars
Manufacturer VOLKSWAGEN
Model TIGUANGP 1.4 TSI 118KW DSG6BMT

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? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number A 29048258 AVW

Cover Note Number

Driver

Name of Driver NAZRUL RASHIDI BIN MOHD
NRIC No S7839148J
Date Of Birth 12/12/1978
Occupation INDOOR
Date Of Driving Pass 20/07/2009
Driving Experience 8 YEARS AND 7 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-96717860
Fax Number
Contact Number
E-Mail Address NOEMAIL

| | |
|---|----------------------|
| Address | 60 ELIAS ROAD #06-02 |
| Postcode | 519938 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

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 this accident? | NO |
| Number of vehicles involved in the accident | |
| Was any body injured in the Accident? | NO |
| Was any injured conveyed to hospital by ambulance? | NO |
| Was any other material or property damaged? | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO |
| Number of Passengers (Including Driver) | 2 |
| Passenger 1 | NAME: : NADINE NAZRUL RASHIDI GENDER: : FEMALE |

Details of Police Action

| | |
|---|----|
| Was the accident reported to the police? | NO |
| If Yes, Please state which Police Station | |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

| | |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | NO |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-------------------------------------|-------------|
| Vehicle Registration Number | SJK7529U |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | HO KUN KEE |
| NRIC/Passport Number | S0322483Z |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

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 lodgment 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:

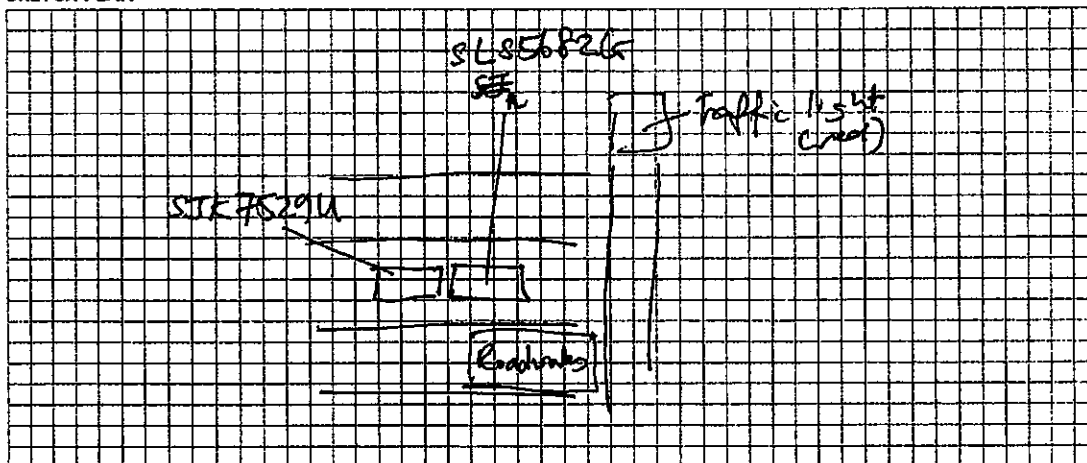
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 12/3/18

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Around 1220h on 10/3/2018, my vehicle ~~SF~~ SL55682G came to a stop at the traffic light (red), along Tampines Avenue 10. A car, Toyota Allion SLK7529U, trucked into the back of the car, moments after I stopped.

DECLARATION

I/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: 12/3/18

8.15 pm am
A

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



MSIG

MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1
Individual Ownership

VW DRIVEEASY
Comprehensive

Certificate No. A 29048258 AVW

Excess : SGD500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle
SLS5682G
2. Name of Policyholder
Nurulhuda binte Abdul Halim
3. Effective Date of the Commencement of insurance for the purposes of the Act
10/11/2017
4. Date of Expiry of Insurance
22/01/2019
5. Persons or Classes of Persons entitled to drive*
Nurulhuda binte Abdul Halim
Nazrul Rashidi
Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to use*
Use only for social domestic and pleasure purposes and for the Policyholder's business.
The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered Inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT VOLKSWAGEN CENTRE SINGAPORE.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

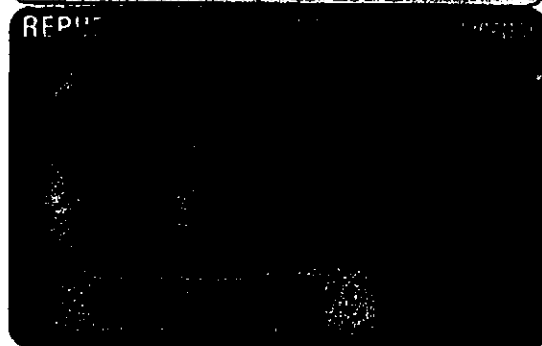
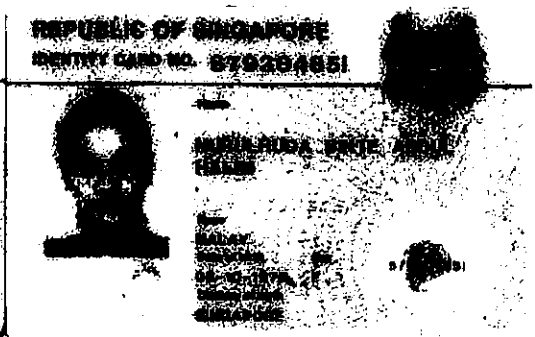
MSIG Insurance (Singapore) Pte. Ltd.
Approved Insurers

Dune

for Chief Executive Officer

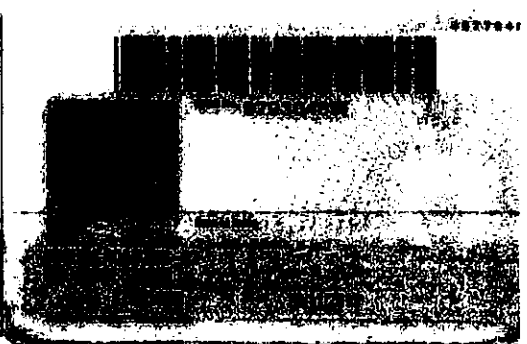
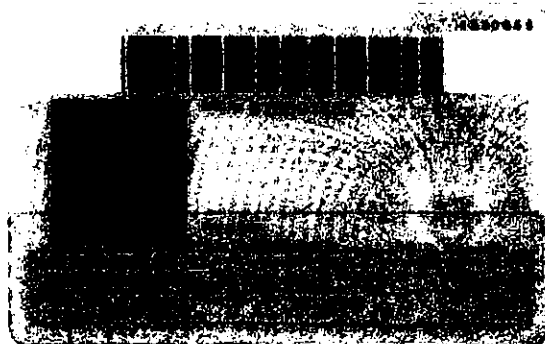
Sketch Plan #4

SL556826



PASSENGERS :
NADINE NAZRUL RASHIDI

CONTACT
982 96717 860



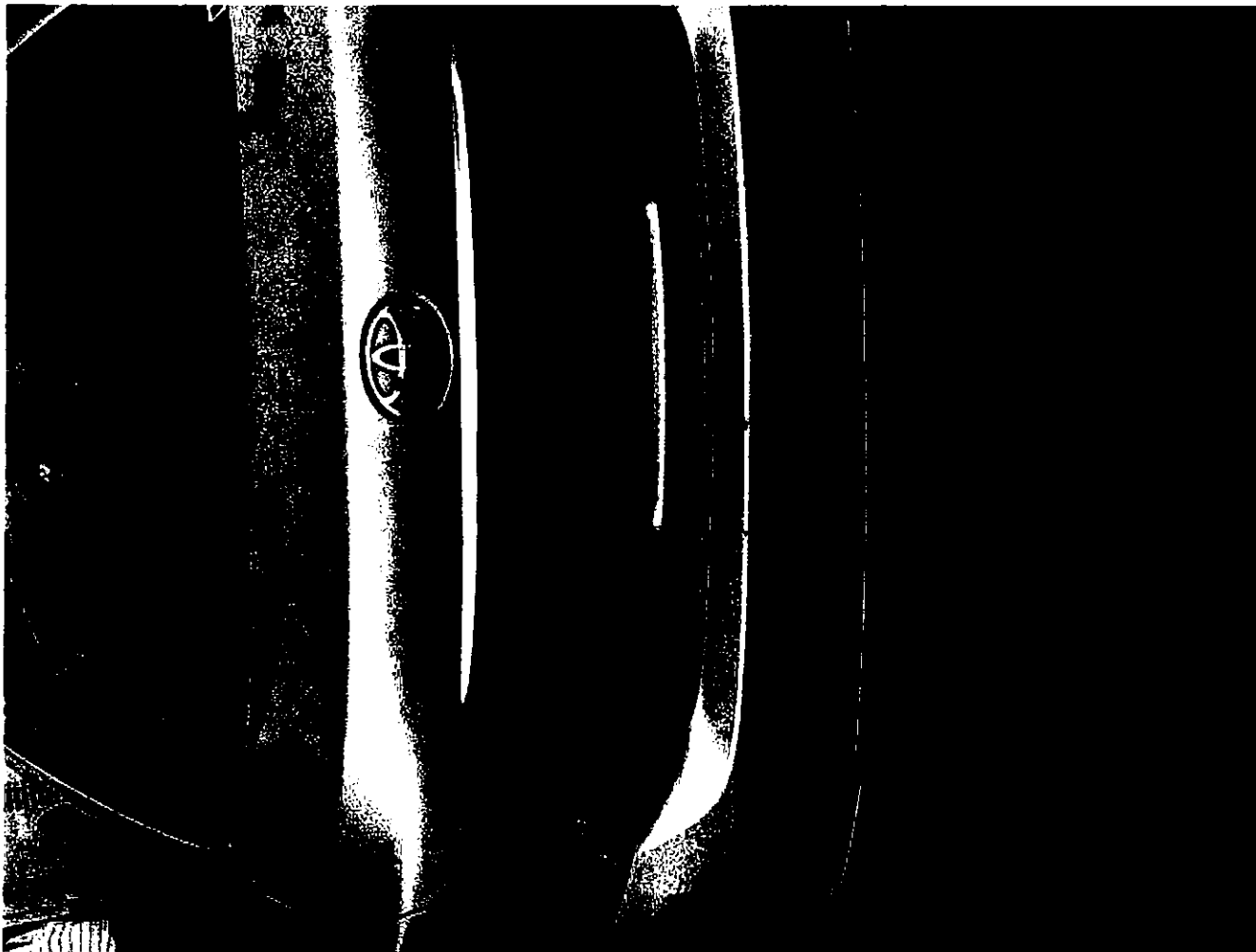
Accident Photo



Accident Photo



Accident Photo



Accident Photo

REPUBLIC OF SINGAPORE DRIVING LICENCE



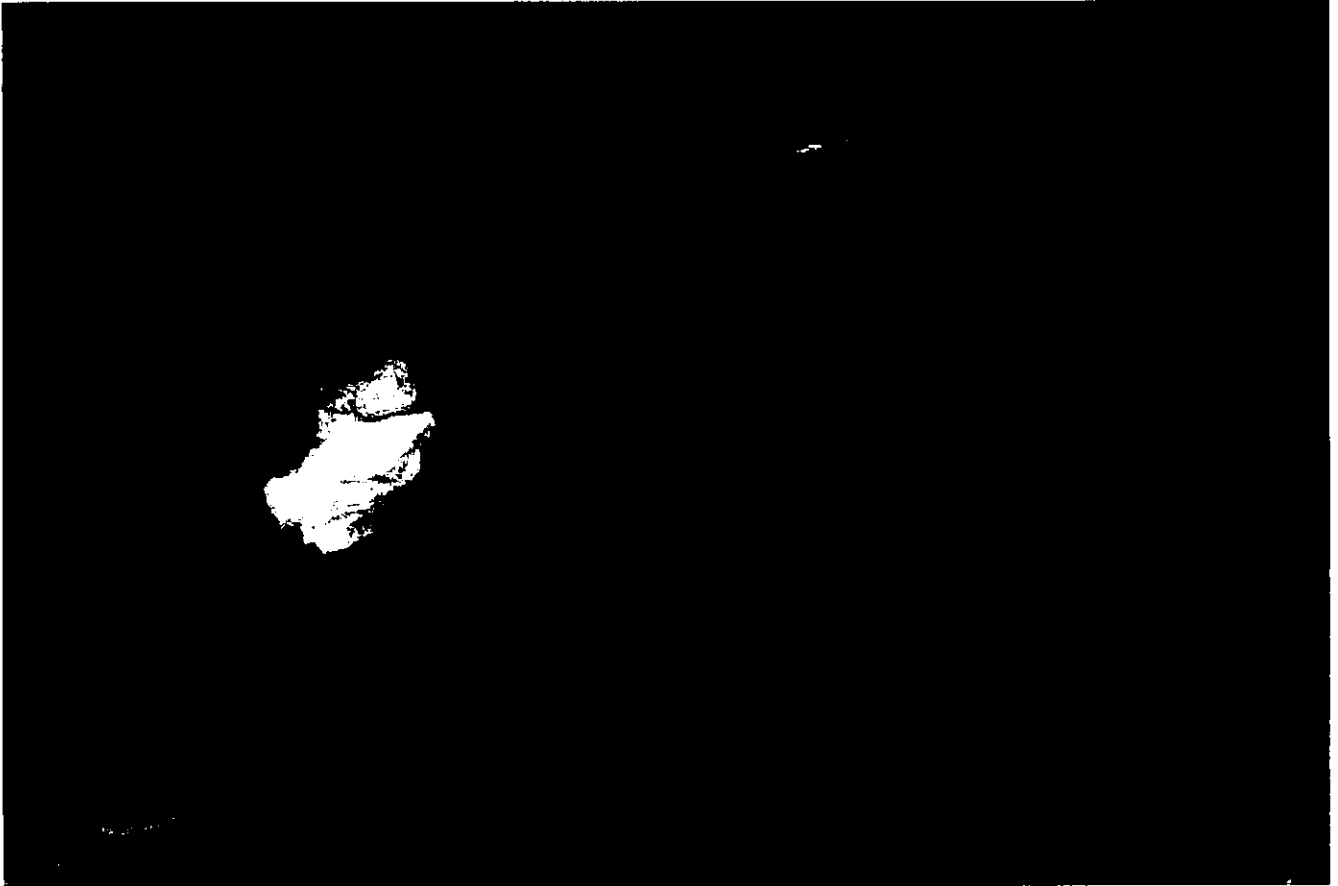
Accident Photo



Accident Photo



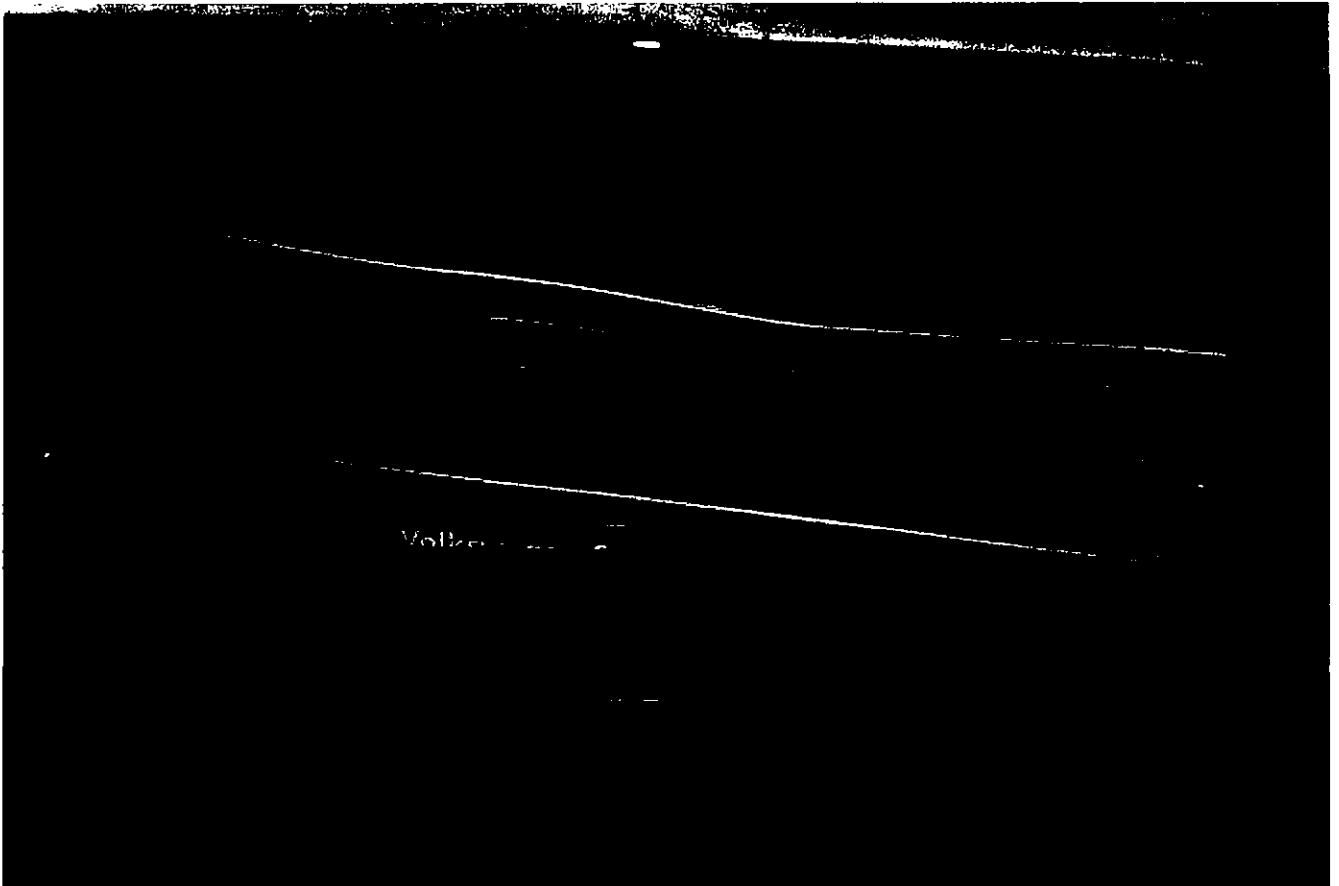
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