

Letter of Claims Request of direct settlement.

We are submitting a claim on behalf of our customer Law Ying You boveen	
NRIC <u>\$74391237</u> insured of vehicle <u>\$JN87848</u>	against
your insured vehicle number had august . (to)	
On the accident dated on 19318 (ddmmyyyy) along Caprik	
746 Loray An 200	
Dated this (day) of 3 (month) 20 [8	



Volkswagen Group Singapore

1 Kampong Ampat

Singapore 368314

DID: 69223502

HP: 93867833

shushi.tang@vw.com.sg

PDI TUAS

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LAU YING YING DOREEN (LIU YINGYING DOREEN) 18 CANTONMENT CLOSE #26-63 Singapore, 080018 Singapore

Phone No. Fax No. E-Mail

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

Service Quote

Customer No.

CV024668

Quote No.

SER/QUO/1800478

QuoteDate

20/03/18

Salesperson

Jerrome Chan

Page

THIS IS NOT AN OFFICIAL TAX INVOICE

Make

Volkswagen Passeng

License No.

SJN8784B **Engine Code** **Model Description**

JETTA A6 1.4 TSI DSG 90KW CL

WVWZZZ16ZDM086226

Labor Type

M4

Mileage 37,115

Initial Registration

11/02/14 Engine No. CAX D36924 Service Advisor

Tang Shu Shi Sales Advisor Jerrome Chan

Model Code 1623G5

	No.	Description	Qty.	UoM	Unit Price	Amount
Р	B&P MACP LABOUR	LABOUR	3	UNIT		2,520.00
Р	B&P MACP PAINT	SPRAY PAINT	3	UNIT		2,400.00
Р	B&P DIAG	PROGRAMMING & CALIBRATION COMPULSORY TO DO AFTER AC	1	Time Un		480.00
Р	B&P MECH	ELECT WIRING & MECH COMPO Nett	1	Time Un		280.00
		Sum Labor				5,680.00
Р	1K9853675B GQF	TSI EMBLEM	1	Pieces		45.53
Р	1K9853687A 739	JETTA EMBLEM	1	Pieces		48.36
Ρ	5C6807394B	RHR BUMPER BRACKET Use Predecessor 5C6807394	1	Pieces		90.21
Р	5C6807421 GRU	REAR BUMPER	1	Pieces		919.83
Р	5C6853630E ULM	VW SIGN Use Predecessor 5C6853630 ULM	1	Pieces		81.19
Р	5C6945096E	RHR OUTER TAILLIGHT	1	Pieces		432.13
		Sum Item				1,617.24

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Jerrome Chan **Model Code**

1623G5

Sum Labor Sum Item

5,680.00 1,617.24

Total 7% GST

SGD

7,297.24

7,297.24 510.82

Total SGD Incl. GST

7,808.06

Explanations

P = Proportionately Charged

Payment Terms

No Credit

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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	20/03/2018 16:13
Date Of Accident	19/03/2018 17:00
Exact Location Of Accident	296 LORONG AH SOO
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJN8784B
Insured/Policyholder	
Name Of Registered Owner	LAU YING YING DOREEN
NRIC No	S7439123J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97352331
Alternative Phone No	OFFICE-97352331
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	JETTA A6 1.4 TSI DSG 90KW CL
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	A80425459 AVW
Cover Note Number	
Driver	

Name of Driver LAU YING YING DOREEN

 NRIC No
 \$7439123J

 Date Of Birth
 25/11/1974

 Occupation
 INDOOR

 Date Of Driving Pass
 14/04/1999

Driving Experience 18 YEARS AND 11 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-97352331

Fax Number

Contact Number OFFICE-97352331

EMail Address NOEMAIL

Address BLK 18 CANTOMENT CLOSE

#26-63

Postcode 080018

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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 0

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBD2490K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver XU XIBIN
NRIC/Passport Number S27286111

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 16

Sketch Plan Pg. 1

SKETCH PLAN

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- 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:

- 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)
 - (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, involces, 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
- 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.
- 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:

Name 8 1030002 NRIC/FIN No.:

OLKSWAGEN G和OUP GAPORE

sonnel

Sketch Plan #2 Pg. 1

SKETCH PLAN

SJN 8 7848

Int His List Lorny

GBD 24490 K.

(ony 19493 mg

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My	car was parked at my work place. Alony was trying to
DAV	Kin the lot behind my lar. When news trying to reverse
114	to hope, he trocked into my right rear.
	security guard of my make place caught him.
- }	We got no contact no and details . He admitted to it.
7	his inadent happened at abt 5pm, 19 Mar 2018, at
2	96 Loveng Ah Soo S 53 6742 - Witness's contact =
	Kanthasamy [SZ750540 F
C	antact details of dinver of Lory
Mv	Xu Xibin
	S2728611I
	HP: 91871368
	BIK 41 , Chai Chee St. #14-22, S(461041)
	Company of long dover
	Andi Construction Pte LEd.
	627A Aljuned Rd #05-11 Biztech centre S(389802)
	7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Han 20 Mg/24/8

Policyholder's Signature 4pm Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: VOLKSWACEN
GROUP
SING APORE

Reporting Centre Personnel's Signature
Neget 030002



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 80425459 AVW

Excess: SGD500

Windscreen Excess: SGD100

1. Index Mark and Registration Number of Vehicle

SJN8784B

Name of Policyholder

Lau Ying Ying Doreen

Effective Date of the Commencement of Insurance for the purposes of the Act

11/02/2018

Date of Expiry of Insurance

10/02/2019

5. Persons or Classes of Persons entitled to drive*

Lau Ying Ying Doreen

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.
- Limitations as to use*

Use only for social domestic and pleasure purposes and for the $\operatorname{Policyholder}$'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

for Chief Executive Officer

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7439123J



LAU YING YING DOREEN (LIU YINGYING DOREEN)

刘

CHINESE Date of birth 25-11-1974 Country of birth SINGAPORE

871391234

DRIVING LICENCE

Licence Number: S7439123J LAU YING YING DOREEN (LIU YINGYING DOREEN)

Birth Date: 25 Nov 1974 issue Date 28 Mar 2003



17-12-2004

APT BLK 18 CANTONMENT CLOSE #26-63 SINGAPORE 080018

NRIC No: \$7439123J

Date: 22/12/2010

No: 6678333

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

PASS DATE

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

NP 428A

