



MSG (WINNER) 24/5/18 A 4/5/18 VIDEO X

**Letter of Claims
Request for direct settlement.**

We are submitting a claim on behalf of our customer XIA LIXIN

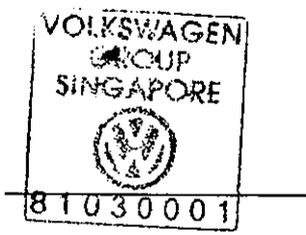
NRIC _____ insured of vehicle SLT 8475M against

your insured vehicle number SLB 4947P. (AIG)

On the accident dated on 29.5.18 (ddmmyyy) along BUYONG ROAD.

_____.

Dated this 30 MAY 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

XIA LIXIN
 156 PRINCE CHARLES CRESCENT
 #13-16 TOWER A
 Singapore, 159015
 Singapore

Phone No.
 Fax No.
 E-Mail

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

Service Quote

Customer No. CV039148
 Quote No. SER/QUO/1800877
 QuoteDate 30/05/18
 Salesperson Daniel Wee
 Page 1

THIS IS NOT AN OFFICIAL TAX INVOICE

Make	Model Description	Mileage	Service Advisor
Volkswagen Passeng	Passat 1.8 TSI Highline17HUD	2,111	Cheong Pearlyn
License No.	VIN	Initial Registration	Sales Advisor
SLT8475M	WVWZZZ3CZHE148073	14/11/17	Daniel Wee
Engine Code	Labor Type	Engine No.	Model Code
	1P	CJS 200392	3G24JZ

No.	Description	Qty.	UoM	Unit Price	Amount
P B&P ALEX LABOUR	LABOUR	3	UNIT		2,520.00
P B&P ALEX PAINT	SPRAY PAINT	3	UNIT		2,400.00
P B&P DIAG	PROGRAMMING & CALIBRATION COMPULSORY TO DO AFTER AC	1	Time Un		480.00
P B&P MECH	CHECK WIRE HARNESS, ECU, S Nett	1	Time Un		280.00
	Sum Labor				5,680.00
P 3G0807049	BUMPER BRACKET LHS	1	Pieces		53.70
P 3G0807177	BUMPER RETATINER LHS	1	Pieces		91.95
P 3G0807217K GRU	FRONT BUMPER	1	Pieces		1,668.15
P 3G0998493	SENSOR BRACKET	1	Pieces		80.79
P 5Q0919133 9B9	SENSOR O RING	1	Pieces		1.98
P D 180KU2A1	2KADHESIVE	1	Pieces		103.66
P D 822150A1	BONDAGENT	1	Pieces		74.16
	Sum Item				2,074.39
				Sum Labor	5,680.00
				Sum Item	2,074.39
				Total SGD	7,754.39
				7% GST	542.81
				Total SGD Incl. GST	8,297.20

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

PDI TUAS

PDI TUAS

XIA LIXIN
156 PRINCE CHARLES CRESCENT
#13-16 TOWER A
Singapore, 159015
Singapore

Phone No.
Fax No.
E-Mail

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

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Volkswagen Passeng	Passat 1.8 TSI Highline17HUD
License No.	VIN
SLT8475M	WVWZZZ3CZHE148073
Engine Code	Labor Type
	1P

Mileage
2,111
Initial Registration
14/11/17
Engine No.
CJS 200392

Service Advisor
Cheong Pearlyn
Sales Advisor
Daniel Wee
Model Code
3G24JZ

Explanations

P = Proportionately Charged

Payment Terms No Credit

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

Shw Jaw.

*MSIG (claims)
vs*

ATG only

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 30/05/2018 11:48
Date Of Accident 29/05/2018 15:55
Exact Location Of Accident ALONG ~~P~~UYONG ROAD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLT8475M
Insured/Policyholder
Name Of Registered Owner XIA LIXIN
NRIC No G3242748R
Email Address XLX2068@HOTMAIL.COM
Mobile Phone No (LOCAL) +65-91283658
Alternative Phone No OFFICE-91283658
Vehicle Particulars
Manufacturer VOLKSWAGEN
Model PASSAT 1.8 TSI HIGHLINE17HUD
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 A29051369 AVW
Cover Note Number
Driver
Name of Driver XIA LIXIN
NRIC No G3242748R
Date Of Birth 24/12/1961
Occupation INDOOR
Date Of Driving Pass 17/03/2016
Driving Experience 2 YEARS AND 2 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-91283658
Fax Number
Contact Number OFFICE-91283658
Email Address XLX2068@HOTMAIL.COM

Address 156 PRINCE CHARLES CRESENT
13-16, TANGLIN VIEW TOWER A

Postcode 159015

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 SIDE SWIPE

Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident 2

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) 1

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

MORE DETAILS PLEASE REFER TO SEKETCH PLAN

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Remarks/ Reasons: SIZE FILE EXCEEDED,UNABLE TO UPLOAD

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLB4947P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver LEE YEE SHIEN,GIBSON

NRIC/Passport Number S9229228B

Contact Number 81381102

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:

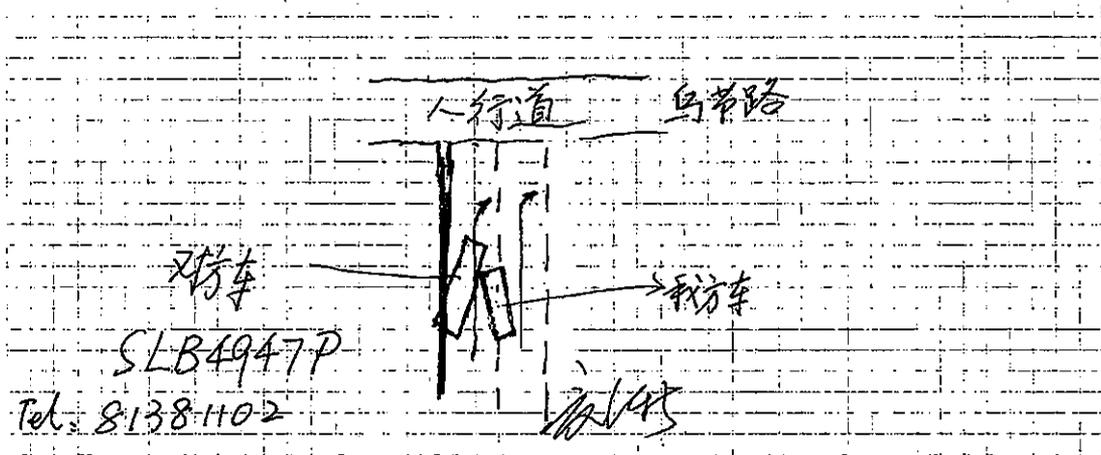
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

时间 = 2018年5月29日下午3:57分

地点: 在PUYONG RD 陈伟

经过: 当我打左侧变道灯示意后向左侧变道时, 从左侧后方突然有一辆车快速卡入超越我, 造成两车互有损伤, 我车是^{车头}左边, 对方是左身右侧 (请参阅视频和图片)。我是在可以变道处规范变道, 而对方是在不可变道处变道且速度过快, 理应负全责。

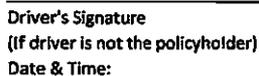
DECLARATION

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



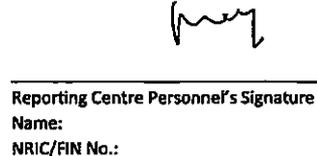
Policyholder's Signature

Date & Time:



Driver's Signature
(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



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

VW DRIVEEASY

THE SCHEDULE

Policy Number	Period of Insurance	Place of Issue
A 29051369 AVW	14/11/2017 to 13/11/2018	SINGAPORE
Name and Address of Insured		Date of Issue
Xia Lixin 156 Prince Charles Crescent #13-16 Tanglin View Tower A Singapore 159015		22/11/2017
		Account Number
		156346
Premium	GST	Total Due
SGD2,029.47	SGD142.06	SGD2,171.53

RISK NUMBER 1 VW DRIVEEASY

OCCUPATION
Senior Correspondent

SCOPE OF COVER Comprehensive

INTEREST INSURED

REGISTRATION NO. SLT8475M	SUM INSURED	MARKET VALUE
MAKE/MODEL Volkswagen Passat B8 1.8 TFSI	INCL. COE/PARF YES	
ENGINE NUMBER CJS200392	OFF-PEAK CAR NO	
CHASSIS NUMBER WVVZZZ3CZHE148073	NO CLAIM DISCOUNT NIL	
YEAR OF MFG 2017	NCD PROTECTOR NOT COVERED	
CAPACITY 1798 C.C.	EXCESS SGD1,500	
SEATING CAPACITY 5 (INCL. DRIVER)	ANNUAL PREMIUM SGD2,029.47	
WINDSCREEN UNLIMITED		

ACCESSORIES Aircon, radio/cassette/compact disc player, in-vehicle unit, rust-proofing and other accessories that are factory fitted.

AUTHORISED DRIVERS
 Xia Lixin
 Any other person provided he is driving on the Insured's order or with the Insured's permission.

LIMITATION AS TO USE



MSIG

MSIG Insurance (Singapore) Pte. Ltd.
 11 Raffles Quay # 21-01 SGX Centre 2, Singapore 048877
 Tel: +65 6827 7888, Fax: +65 6827 7800
 Cr. Reg. No. L0017212G GST Reg. No. 20-0417212G

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.

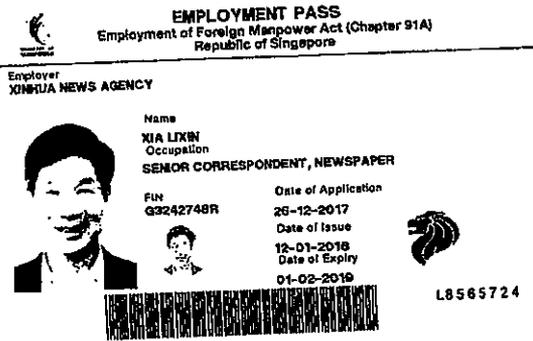
Form M.X.1 Individual Ownership	VW DRIVEEASY Comprehensive
Certificate No. A 29051369 AVK	→ Excess : SGD1,500 ← Windscreen Excess : SGD100 ←T
1. Index Mark and Registration Number of Vehicle SL78475M	
2. Name of Policyholder Xia Lixin	
3. Effective Date of the Commencement of Insurance for the purposes of the Act 14/11/2017	
4. Date of Expiry of Insurance 13/11/2018	
5. Persons or Classes of Persons entitled to drive* Xia Lixin 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

for Chief Executive Officer

Sketch Plan #5 Pg. 1



Sketch Plan #6 Pg. 1

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg

EFFECTIVE DATE

17 Mar 2016

NP 428A



VISIT PASS
Immigration Regulations

Name
XIA LIXIN



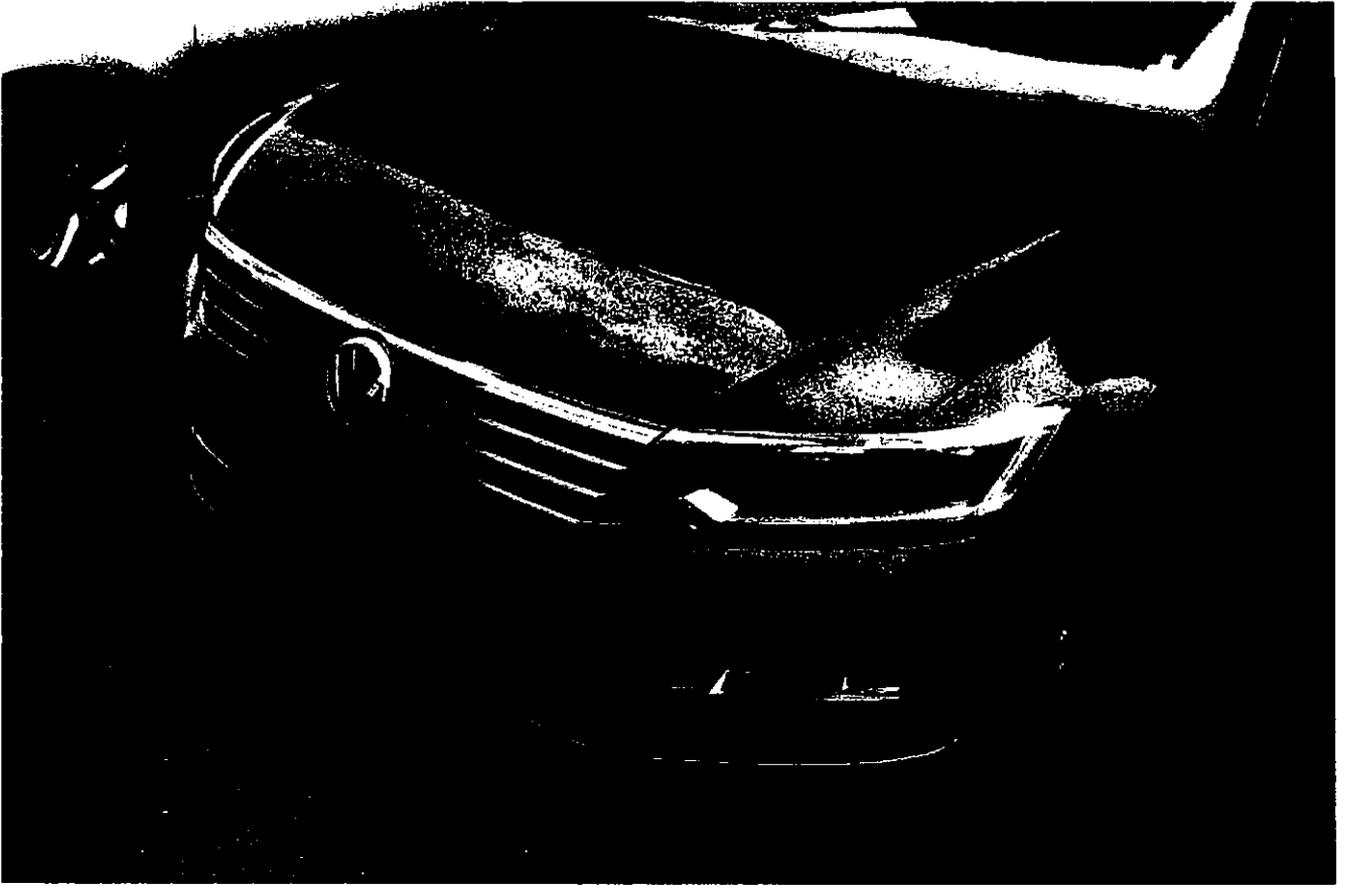
Date of Birth	Sex	Nationality
24-12-1961	M	CHINESE
FIN	Date of Issue	Date of Expiry
G3242748R	12-01-2018	01-02-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

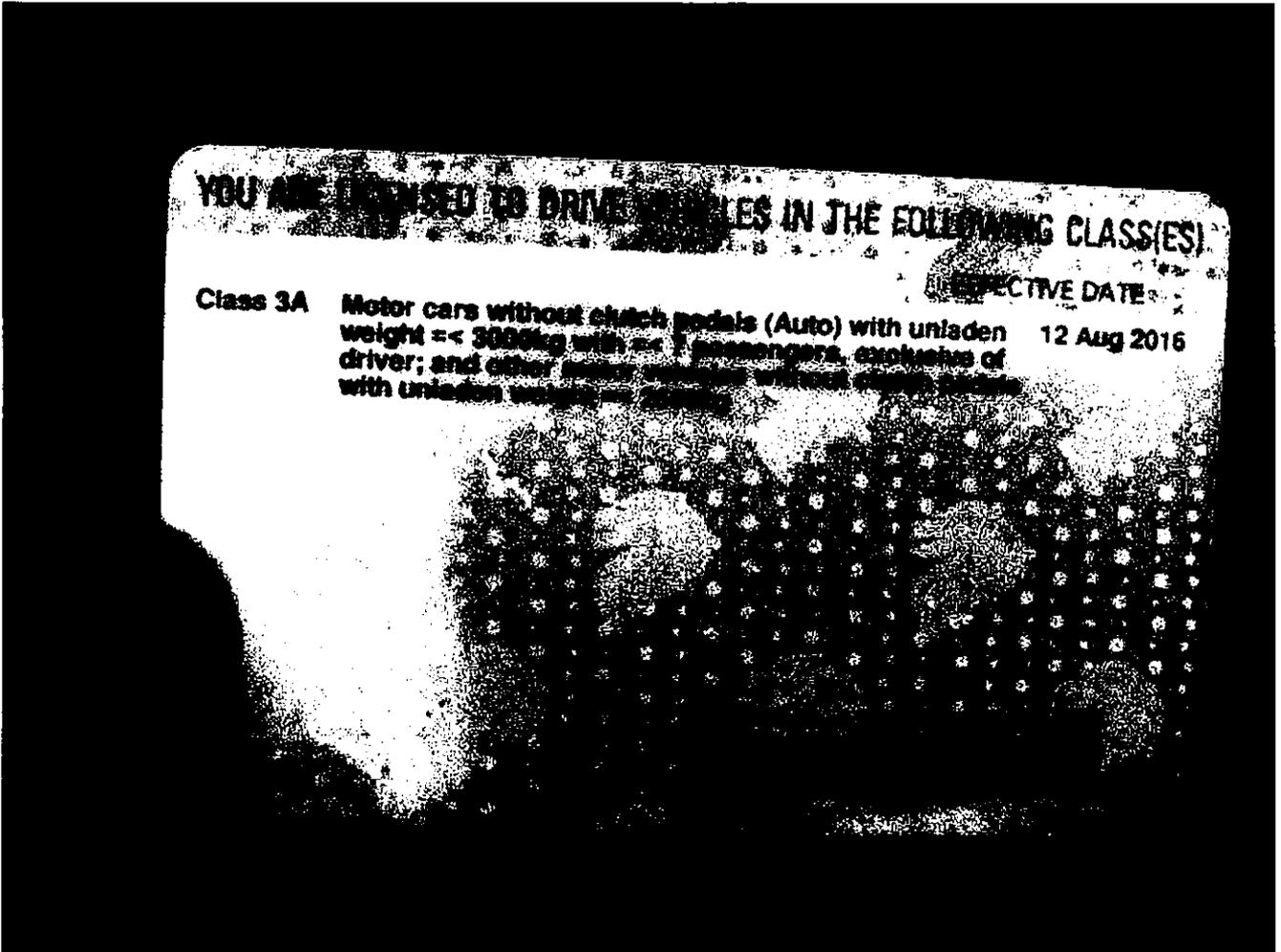


Accident Photo



Accident Photo





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

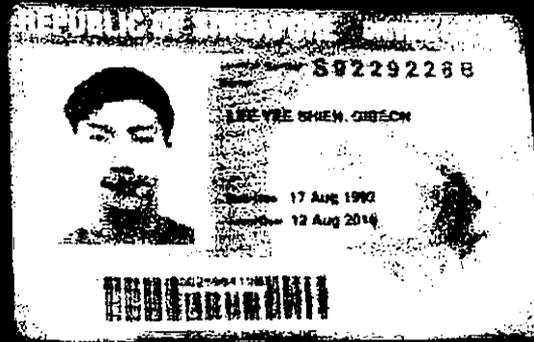
RESPECTIVE DATE 12 Aug 2016

Class 3A Motor cars without clutch pedals (Auto) with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight =< 3000kg

Accident Photo



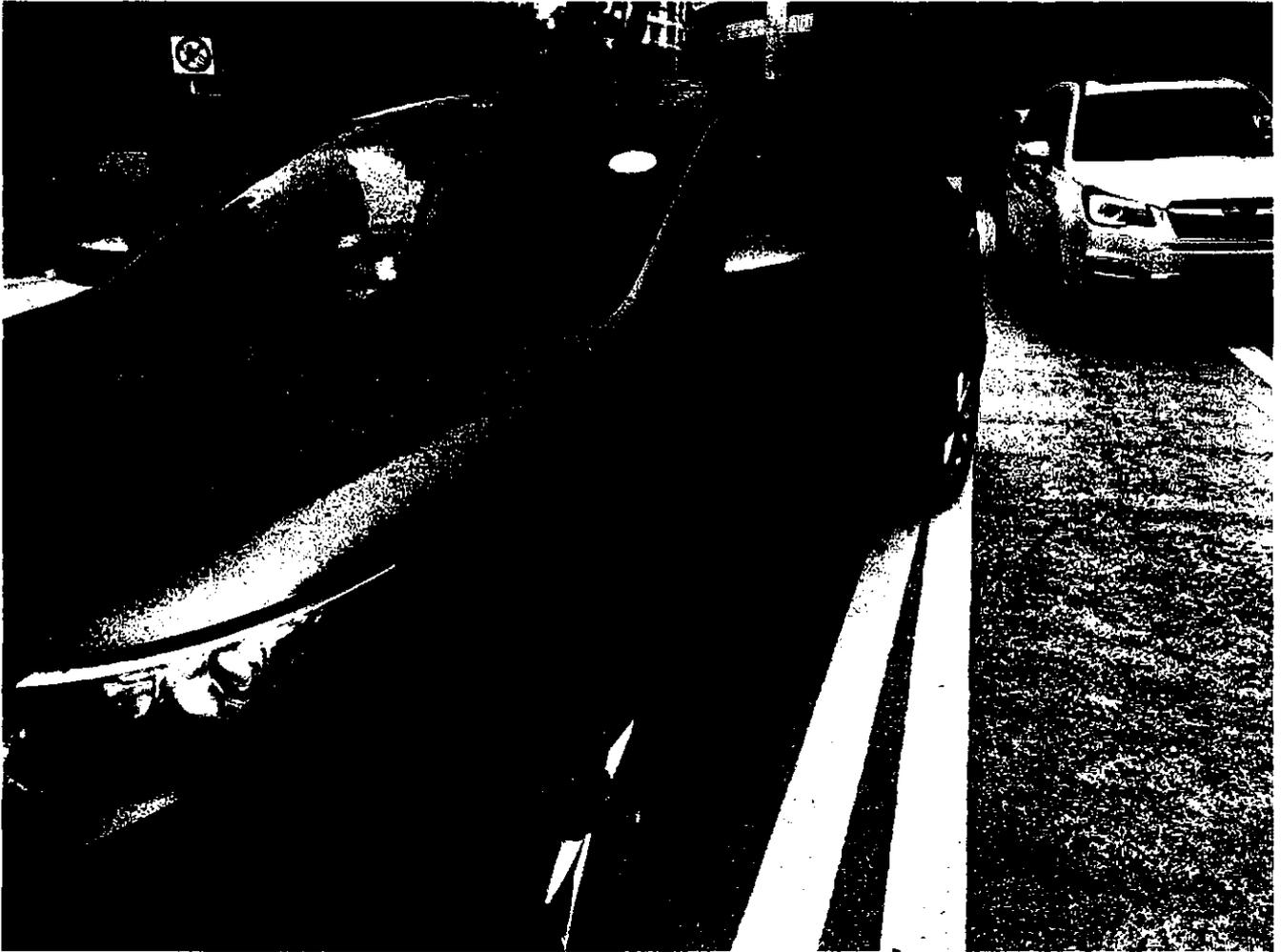
Accident Photo



Accident Photo



Accident Photo



Accident Photo

