Letter of Claims Request of direct settlement.

We are	submitting a clai	m on behalf	of our custome	See-	7oh	Yuit	Mei
	51496572						against
your in	sured vehicle nur	nber GW	8512H	(Ald	, a ·)
On the	accident dated or	9/8/20	(ddmmy)	yy) along	g		
<u>N</u>	o 2 Bradde	11 Road			_*		
Dated 1	this 1/3 (d	ay) of	(month) 20	18			



Volkswagen Group Singapore 1 Kampong Ampat Singapore 368314 DID: 69223502 HP: 93867833

shushi.tang@vw.com.sg



PDI TUAS

SEE-TOH YUIT MEI 253 LOYANG RISE Singapore, 507348 Singapore

PDI TUAS

Phone No. Fax No. E-Mail

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

Service Quote

Customer No.

CV024871

Quote No.

SER/QUO/1801294

QuoteDate

11/08/18

Salesperson

Grace Sng

Page

1

THIS IS NOT AN OFFICIAL TAX INVOICE

Make

Volkswagen Passeng

License No.

SFL1196C Engine Code **Model Description**

Polo GP 1.2 BMT DSG SR LED

VIN

WVWZZZ6RZGU028637

Labor Type 1L Mileage 21,963

Initial Registration

05/02/16 Engine No.

Engine No. CJZ 763327 Service Advisor

Ong Germaine Sales Advisor

Grace Sng
Model Code

6C13EZ

No.	D	escription	Otv	UoM U	nit Price		Amount
110.	D .	23011ption	Qty.	OOM O	ilit i iloc		Amount
P B&P MACP L	ABOUR LA	ABOUR	3	UNIT			2,520.00
P B&P MACP F	PAINT SE	PRAY PAINT	3	UNIT			2,400.00
P B&P DIAG		ROGRAMMING & CALIBRATION OMPULSORY TO DO AFTER AC		Time Un			480.00
P B&P MECH	CI Ne	HECK WIRE HARNESS, ECU, S ett	1	Time Un			280.00
	Su	ım Labor					5,680.00
P 6C0819448	9B9 LI	NING FOR FENDER RH	1	Pieces			15.87
P 6R0821105H		ENDER LH edecessor 6R0821105G	1	Pieces			654.04
P 6R0821141B		RT LHS FENDER BRACKET se Predecessor 6R0821141A	1	Pieces			66.09
P 6R0853274A	9B9 TF	RIM RH	1	Pieces			19.29
	Sı	ım Item					755.29
				Sum Labor Sum Item			5,680.00 755.29
				Total SG	iD.	0.405.00	6,435.29
				7% GST	LOST	6,435.29	450.47
				Total SGD Ir	ici. GST		6,885.76



PDI TUAS

SEE-TOH YUIT MEI 253 LOYANG RISE Singapore, 507348 Singapore

PDI TUAS

Phone No. Fax No. E-Mail

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

Service Quote

Customer No.

CV024871

Quote No.

SER/QUO/1801294

QuoteDate

11/08/18 Grace Sng

Salesperson Page

2

THIS IS NOT AN OFFICIAL TAX INVOICE

Make

Volkswagen Passeng

License No. SFL1196C

Engine Code

Model Description

Polo GP 1.2 BMT DSG SR LED

VIN

WVWZZZ6RZGU028637

Labor Type

1L

Mileage 21,963

Initial Registration 05/02/16

Engine No. CJZ 763327 Service Advisor

Ong Germaine Sales Advisor Grace Sng

Model Code 6C13EZ

Explanations

P = Proportionately Charged

Payment Terms

No Credit

Payments to:

- BBN: - Acc.-No...

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 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.

	ACCIDENT STATEMENT
Date Of Report	09/08/2018 22:51
Date Of Accident	09/08/2018 19:00
Exact Location Of Accident	NO 2 BRADDELL RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SFL1196C
Insured/Policyholder	
Name Of Registered Owner	SEE-TOH YUIT MEI
NRIC No	S1496572F
Email Address	SIDNEYTJX@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91526810
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	POLO-1.2 TSI (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5087808941-01

Driver

Cover Note Number

Name of Driver TEO JUN XIANG SIDNEY

NRIC No S9339661H Date Of Birth 20/10/1993 Occupation **INDOOR** Date Of Driving Pass 28/06/2013

Driving Experience 5 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-91526810

Fax Number

adeline 3ty M @ gmail.com Contact Number

EMail Address SIDNEYTJX@GMAIL.COM Address

253 LOYANG RISE

Postcode

507348

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

RELATIVE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLIDED INTO PARKED VEHICLE

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 1

Details of Police Action

Was the accident reported to the police?

Number of Passengers (Including Driver)

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

GW8512H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver CHOONG CHEE SENG

NRIC/Passport Number

S1474337E

Contact Number

91398176

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. 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 Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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)

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:
 - processing, hendling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (a) 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 losurers' lawyers/faw firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Perposes; 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.

Philipholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

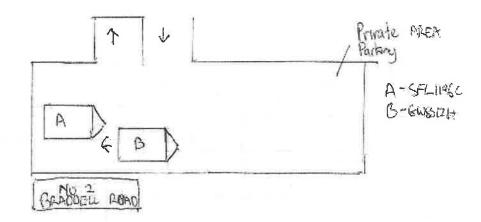
Reporting Centre Personnel's Signature

Name: 15:65Ar

NRIC/FIN No : 5851021614

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

1	כמו	having	diame	- at	no 2 1	Saudille 11	Road	when)	notice
thide	B	reverse	\$ as	fided a	ndo mu	ve hi	le Me	y yahic	ķ	15
ţ	faired	0 4 6-20	25 × 10 mm	ti za velik	was ward my	L. Taranta			A CONTRACTOR	7 P 17 10 10 10

DECLARATION

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

Paticyholder's Signature Date & Time: Driver's Signature

(If driver is not the policyholder) Date & Time: $\bigcup \mathcal{A} / \bigcup \mathcal{A} / \mathcal{A} \otimes \mathcal{A}$

Repositing Centre Personnel's Signature

Name: JESTAM NRIC/FIN No.: 55724404



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1496572F

SEE-TOH YUIT MEI



司徒月微

Date of Birth 27-06-1961 F

SINGAPORE

PASS DATE Motor Cars and Motor Tractors the weight of Class 3 29 May 1984 which unladen does not exceed 2500 kilograms

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

NP 428A



NRIC No S1496572F

Blood Group Date of issue 16-08-1992

0473895



