

Volkswagen Centre Singapore



Biz Reg. No. 53103069E
GST No. M20098505-2

Letter of Claims Request for direct settlement.

We are submitting a claim on behalf of our customer YANG CHUN
NRIC 573649275 insured of vehicle PJW 866D against
your insured vehicle number SHC 3994B (INDIA)
On the accident dated on 2-10-18 (ddmmyyyy) along TRAFFIC
JUNCTION ALONG SHEARES AVE & MARINA BLVD.

03 OCT 2018
Dated this _____ (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

YANG CHUN
31 SIN MING WALK
Singapore, 573920
Singapore

Phone No.
Fax No.
E-Mail

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

Service Quote

Customer No. CV040312
Quote No. SER/QUO/1801645
QuoteDate 03/10/18
Salesperson MELVYN SEAH
Page 1

THIS IS NOT AN OFFICIAL TAX INVOICE

Make	Model Description	Mileage	Service Advisor
Volkswagen Passeng	Sharan GP 2.0 TSI HL LOW	7,847	Kong Charmaine
License No.	VIN	Initial Registration	Sales Advisor
SJW866D	WVWZZZ7NZJV021755	28/03/18	MELVYN SEAH
Engine Code	Labor Type	Engine No.	Model Code
	1O	DED 022935	7N24MY

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 1S0919275C	SENSOR Predecessor 1S0919275	2	Pieces		269.36
P 1T0919133C 9B9	PARKING SENSOR O RING	2	Pieces		1.30
P 7N0807251A	FOAM INSERT Use Predecessor 7N0807251	1	Pieces		112.63
P 7N0807305A	BUMPER CENTER BRACKET Use Predecessor 7N0807305	1	Pieces		683.28
P 7N0807375	BUMPER BRACKET LH	1	Pieces		68.28
P 7N0807376	BUMPER BRACKET RH	1	Pieces		68.28
P 7N0807417E GRU	REAR BUMPER COVER	1	Pieces		1,024.10
P 7N0807521C 9B9	SPOILER Use Predecessor 7N0807521B 9B	1	Pieces		284.01
P 7N0807863	STRIP	1	Pieces		158.73
P 7N0919491	SENSOR BRACKET	2	Pieces		37.32
P 7N0919491A	SENSOR BRACKET	2	Pieces		37.32
P 7N0919491B GRU	SENSOR BRACKET	1	Pieces		18.66
P 7N0919492B GRU	SENSOR BRACKET	1	Pieces		18.66
P D 180KU2A1	2KADHESIVE	1	Pieces		89.84
	Sum carried forward				8,551.77

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

PDI TUAS

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YANG CHUN
31 SIN MING WALK
Singapore, 573920
Singapore

Phone No.
Fax No.
E-Mail

VAT Registration No. M20098505-2
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SJW866D	WVWZZZ7NZJV021755
Engine Code	Labor Type
	10

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7,847	Kong Charmaine
Initial Registration	Sales Advisor
28/03/18	MELVYN SEAH
Engine No.	Model Code
DED 022935	7N24MY

		Continued	8,551.77
P D 822150A1	BONDAGENT	1 Pieces	64.27
	Sum Item		2,936.04
		Sum Labor	5,680.00
		Sum Item	2,936.04
		Total SGD	8,616.04
		7% GST	8,616.04 603.12
		Total SGD Incl. GST	9,219.16

Explanations

P = Proportionately Charged

Payment Terms No Credit

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

MSIG (WINNER)

Vs

INDIA

DIRECT

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	02/10/2018 16:07
Date Of Accident	02/10/2018 11:50
Exact Location Of Accident	TRAFFIC JUNCTION ALONG SHEARES AVE&MARINA BLVD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJW866D
Insured/Policyholder	
Name Of Registered Owner	YANG CHUN
NRIC No	S7364987J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96569287
Alternative Phone No	OFFICE-96569287

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	TOURAN
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	50506763
Cover Note Number	

Driver

Name of Driver	YANG CHUN
NRIC No	S7364987J
Date Of Birth	05/02/1973
Occupation	INDOOR
Date Of Driving Pass	23/01/2008
Driving Experience	10 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96569287
Fax Number	
Contact Number	OFFICE-96569287
EMail Address	NOEMAIL

Address	31 SIN MING WALK
Postcode	573920
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.	YES
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : UNKNOWN
	GENDER: : MALE

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 ATTACHED

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	SHC3094B	SHC 3994B -
Vehicle Make/Model/Colour		
Details Of Properties		
Vehicle Category	TAXI	
Name of Driver	CHU JIN DYI	
NRIC/Passport Number	S1588017A	
Contact Number	90262570	
Address		
Postcode		
Insurance Company Name		
Nature Of Damage		
No. Of Passenger (Including Driver)		

SKETCH PLAN


IMPORTANT NOTICE

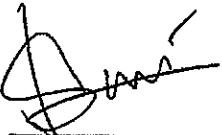
1. Please report correctly the details of the accident to speed up the claims process.
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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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:

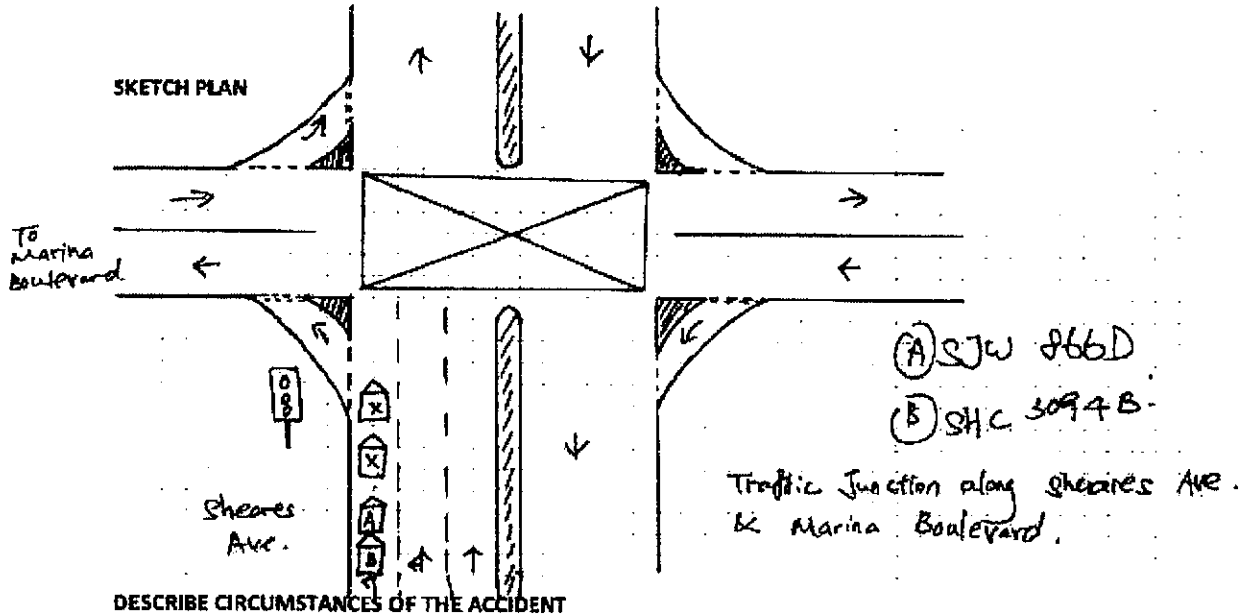
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 02-10-2018 @ about 11:50am, I was driving my car (SJW 866D) along Sheares Ave in the left most lane with 2 passengers (my daughter & my maid). Upon reaching the traffic junction ahead, the vehicles in front of me was stop so I slow down & stop waiting for traffic light turn green in my favour. Suddenly I felt an impact from behind, when I came out to inspect my car & I realized that a taxi (SHC 3094B) did not stop in time and collided onto rear portion of my car. Hence I hereby lodge this report to claim against Veh B (SHC 3094B)'s Insurance for my accident damages. Me & my passengers will go to see doctor if feel any uncomfortable after this.

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: 02/10/2018
1:10 pm

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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7364987J



Name

YANG CHUN

杨 春

Race

CHINESE

Date of birth

05-02-1973

Sex

F

57364987J

Country of birth

CHINA

9130586



NRIC No. S7364987J

Nationality

CHINESE

Date of issue

14-06-2011

31 SIN MING WALK
SINGAPORE 573920

NRIC No: S7364987J

Date: 31/12/2015



MSIG Insurance (Singapore) Pte. Ltd.
4 Shenlion 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

MOTOR INSURANCE COVER NOTE

Cover Note No. 50506763

The Insured named in the Schedule below having proposed for insurance in respect of the Motor Vehicle described in the Schedule below the risk is hereby HELD COVERED in the terms of the Company's usual form of Policy applicable thereto for the period as stated below unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE


Agent No. : 156346
Name of Insured : YANG CHUN
Make and Description of Vehicle : VOLKSWAGEN SHARAN 2.0 TSI DSG HL
Vehicle Registration No. :
Year of Manufacture : 2017
Engine No. : DED022935
Chassis No. : WWWZZZ7NZJV021755
Capacity : 1,984 Cubic Capacity
Cover Type : Comprehensive
Sum Insured (SGD) : Market Value
Period of Insurance : One year from Date of Registration of the vehicle with LTA
Excess (SGD) : As Agreed
Finance Company : DBS BANK LIMITED

I/We hereby certify that this Cover Note is issued in accordance with the Provisions of the Motor Vehicles (Third Party Risks & Compensation) Act (Cap. 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

Not valid unless countersigned by the
Company's Authorised Representative


Winner Consultancy Pte. Ltd.

MSIG Insurance (Singapore) Pte. Ltd.
Authorised Insurers


Amy Ler
Senior Vice President, Agencies

Date of Issue : 26/03/2018

This Cover Note is valid for 30 days from the date of issue.