

# Letter of Claims Request of direct settlement.

We are submitting a claim on behalf of our customer	Siah	Teng Sia	
NRIC <u>\$70341365</u> insured of vehicle _	SJM	3611E	against
your insured vehicle number SKD 3923R	(	AIG ASIA	PAUPIC)
On the accident dated on 18/15/2018 (ddmm	nyyyy) al	long	
Thomson Road Before Jalan Ang	Klong		
<b>S</b>	J		

Dated this \_\_\_\_(8 \_\_\_\_(day) of \_\_\_\_10 \_\_\_(month) 20\_\_\_[9 \_\_\_.



Volkswagen Group Singapore

1 Kampong Ampat

Singapore 368314

DID: 69223502

HP: 93867833

shushi.tang@vw.com.sg

### SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

Contact Number EMail Address

- 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 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. 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.

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	18/10/2018 16:33
Date Of Accident	18/10/2018 13:50
Exact Location Of Accident	THOMSON ROAD BFR JALAN ANGKLONG
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJM3611E
Insured/Policyholder	
Name Of Registered Owner	SIAH TENG SIA
NRIC No	S7034136J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94889615
Alternative Phone No	OFFICE-94889615
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	GOLF 1.0 TSI 81 KW TRENDLINE
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	A29091144AV2
Cover Note Number	
Driver	
Name of Driver	WONG JOON NOI
NRIC No	S7043754F
Date Of Birth	01/12/1970
Occupation	INDOOR
Date Of Driving Pass	03/12/1991
Driving Experience	26 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94591899
Fax Number	
Contact Number	

**NOEMAIL** 

17 WOODLANDS AVENUE 6 Address

#08-17 SINGAPORE

Postcode Was driver an employee of the Insured's Company NO

**SPOUSE** 

If No, Relationship of the Driver with the Insured Vehicle Registration Number of Driver's Own

Vehicle

738997

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR DRY Road Surface

Other Information

NO Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

3

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: SIAH YAM NI

GENDER: **FEMALE** 

Passenger 2

NAME: SIAH QUAY AW

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?

If Yes, against whom?

NO

**Circumstances of Accident** 

REFER TO SKETCH PLAN

Attachment(s)

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

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SKD3923R Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR HENRY LIM Name of Driver

NRIC/Passport Number

Contact Number 96783923

Address Postcode

## AIG ASIA PACIFIC INSURANCE PTE. LTD.

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

### **SKETCH PLAN**

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- 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.
- 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)
  - (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
- (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
- 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: |8|10 \>018

Reporting Centre Personnel's Signature Name: FLVI

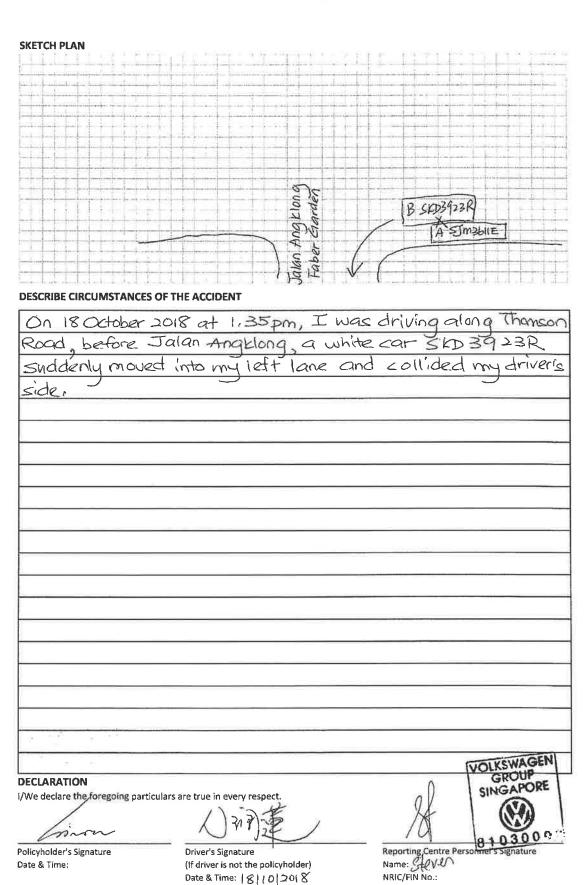
81030

VOLKSWAGEN

GROUP NGAPORE

NRIC/FIN No .:

## Sketch Plan #2 Pg. 1



(If driver is not the policyholder) Date & Time: |8|10|20|8

Date & Time:



MSIG Insurance (Singapore) Pte, Ltd. 4 Shenton Way, It 21-01, SCX Centre 2, Singapore 068807 Tel +55 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 DriveEasy2 Comprehensive

Certificate No. A 29091144 AV2

Excess: SGD2,000

Windscreen Excess: SGD100

 Index Mark and Registration Number of Vehicle SJM3611E

2. Name of Policyholder

Siah Teng Sia

 Effective Date of the Commencement of Insurance for the purposes of the Act 26/07/2018

4. Date of Expiry of Insurance

25/07/2020

5. Persons or Classes of Persons entitled to drive\*

Siah Teng Sia Siah Heng Ni

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).

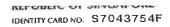
I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.
Approved Insurers

for Chief Executive Officer

FDWC201808061649

## Sketch Plan #4 Pg. 1







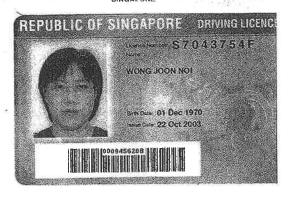
WONG JOON NOI

表 润 莲

CHINESE

Cate of 84th Sex 01-12-1970 F Country of Sein SINGAPORE







NRIC No. S7043754F

Blood Group Date of issue 18-08-1994

17 WOODLANDS AVENUE 6 #08-17 SINGAPORE 738997

NRIC No: S7043754F

Oate: 22/06/2016

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

03 Dec 1991

NP 428A

## Sketch Plan #5 Pg. 1

