



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

We are submitting a claim on behalf of our customer vijayakumar Parameswaran

NRIC 82693997F insured of vehicle 8kw 5779c against

your insured vehicle number SHD6523C. ( India Int. )

On the accident dated on 19.10.2018 (ddmmyyyy) along

TPE Near Layang.

Dated this 23 (day) of 10 (month) 20 18.

\* got medical bill



Volkswagen Group Singapore

1 Kampong Ampat

Singapore 368314

DID: 69223502

HP: 93867833

[shushi.tang@vw.com.sg](mailto:shushi.tang@vw.com.sg)



PDI TUAS

PDI TUAS

VIJAYAKUMAR PARAMESWARAN  
780 PASIR RIS STREET 71  
#07-576  
Singapore, 510780  
Singapore

Phone No.  
Fax No.  
E-Mail

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

## Service Quote

Customer No. CV031170  
Quote No. SER/QUO/1801762  
QuoteDate 22/10/18  
Salesperson Wilson Gwee Sheng  
Page 1

THIS IS NOT AN OFFICIAL TAX INVOICE

Make	Model Description	Mileage	Service Advisor
Volkswagen Passeng	TiguanGP 1.4 TSI 118 DSG6 RECY	54,204	
License No.	VIN	Initial Registration	Sales Advisor
SKW5779C	WVGZZZ5NZGW032497	04/11/15	Wilson Gwee Sheng
Engine Code	Labor Type	Engine No.	Model Code
	1H	CTH 233471	5N22QY

No.	Description	Qty.	UoM	Unit Price	Amount
P B&P MACP LABOUR	LABOUR	4	UNIT		3,360.00
P B&P MACP PAINT	SPRAY PAINT	4	UNIT		3,200.00
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
	<b>Sum Labor</b>				<b>7,320.00</b>
P 1S0919275C GRU	SENSOR Predecessor 1S0919275C	1	Pieces		175.10
P 1T0919133C 9B9	PARKING SENSOR O RING	1	Pieces		0.65
P 5N0807305	RR BUMPER REINFORCEMENT	1	Pieces		538.16
P 5N0807393E	BUMPER SIDE BRACKET LH Use Predecessor 5N0807393B	1	Pieces		38.69
P 5N0807394D	BUMPER SIDE BRACKET RH Use Predecessor 5N0807394B	1	Pieces		38.69
P 5N0807421G GRU	REAR BUMPER ( UPPER )	1	Pieces		1,138.50
P 5N0807521AFGRU	REAR BUMPER ( CENTRE )	1	Pieces		595.45
P 5N0807568 2Z0	REAR BUMPER ( LOWER ) Use Predecessor 5N0807568	1	Pieces		558.91
P 5N0919491D	SENSOR BRACKET OUTER	1	Pieces		17.63
P 5N0919503D	SENSOR BRACKET INNER	1	Pieces		17.63
P 5N0941071	REVERSING LIGHT LH	1	Pieces		87.23
P 5N0941072	REVERSING LIGHT RH	1	Pieces		87.23
P 5N0945105	REFELCTOR REAR LH	1	Pieces		78.22
P 5N0971104AC	SENSOR WIRE HARNESS	1	Pieces		143.60
	<b>Sum carried forward</b>				<b>10,835.69</b>

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



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VIJAYAKUMAR PARAMESWARAN  
780 PASIR RIS STREET 71  
#07-576  
Singapore, 510780  
Singapore

PDI TUAS

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SKW5779C	WVGZZZ5NZGW032497	04/11/15	Wilson Gwee Sheng
Engine Code	Labor Type	Engine No.	Model Code
	1H	CTH 233471	5N22QY
Continued			10,835.69
Sum Item			3,515.69
Sum Labor			7,320.00
Sum Item			3,515.69
Total SGD			10,835.69
7% GST			10,835.69 758.50
Total SGD Incl. GST			11,594.19

### 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 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. 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	19/10/2018 13:26
Date Of Accident	19/10/2018 08:15
Exact Location Of Accident	TPE NEAR LOYANG
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW5779C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	VIJAYAKUMAR PARAMESWARAN
NRIC No	S2693997F
Email Address	WARAN@INDEVLOGISTICS.COM
Mobile Phone No	(LOCAL) +65-98364318
Alternative Phone No	OFFICE-98304318

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	TIGUAN-1.4 TSI BMT (5N22SY) (A)
Exact Purpose for which vehicle was being used at time of accident	
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	QBE INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	VIJAYAKUMAR PARAMESWARAN
NRIC No	S2693997F
Date Of Birth	25/08/1963
Occupation	INDOOR
Date Of Driving Pass	09/06/2000
Driving Experience	18 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98364318
Fax Number	
Contact Number	OFFICE-98304318
Email Address	WARAN@INDEVLOGISTICS.COM

Address	APT BLK 780 PASIR RIS STREET 71 #07-576
Postcode	510780
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	WET

#### 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
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : HAMIMAH AB HALIM GENDER: : FEMALE

#### 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 THE ATTACHED COPY

#### 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	
Vehicle Make/Model/Colour	SHD6523C
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	YEO SHAN KEONG
NRIC/Passport Number	S1286868E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

Describe Circumstances of the Accident

I WAS TRAVELING TPE HWY TOWARDS CHANGI  
AIRPORT AND NEAR TO LOYANG AVE COMFORT  
TAXI HIT IN THE BACK OF THE CAR.

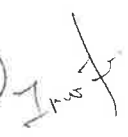
Declaration

We declare the foregoing particulars are true in every respect.

 19/10/15  
Policyholder's Signature / Date &  
Time

Driver's Signature (If driver is not the policyholder) / Date  
& Time



  
Witnessed by Reporting Centre  
Personnel



## Sketch Plan Pg. 2

### SKETCH PLAN

#### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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 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.
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.
  - (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.

  
Policyholder's Signature / Date &  
Time

\_\_\_\_\_  
Driver's Signature (If driver is not the policyholder) / Date  
& Time

  
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

Sketch Plan

LANE 1 ← MICAR JAW TPE HWY  
LANE 2  
LANE 3



Name

**VIJAYAKUMAR PARAMESWARAN**

Race

**SRI LANKAN**

Date of birth

**25-08-1963**

Sex

**M**

**S2693997F**

Country/Place of birth

**SRI LANKA**

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S2693997F**  
Name: **VIJAYAKUMAR PARAMESWARAN**

Birth Date: **25 Aug 1963**  
Issue Date: **21 May 2007**

1001499147K

9369917



NRIC No. **S2693997F**



Nationality

**AMERICAN**

Date of issue

**06-05-2015**

Address

**APT BLK 780 PASIR RIS STREET 71  
#07-576  
SINGAPORE 510780**

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

PASS DATE

**C** Class 3A Motor cars without clutch pedals =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles without clutch pedals =< 2500 kg **09 Jun 2000**

**S2693997F**

**S / No. 9000072546**

**NP 428A**



Licence No: **S2693997F**



**QBE Insurance (Singapore) Pte Ltd**

A member of the worldwide QBE Insurance Group - Unique Entity No. 198401363C

1 Raffles Quay, #29-10 South Tower, Singapore 048583

Tel: 65-6224 6633 Fax: 65-6533 3270

GST Registration No.: M200644018

**Certificate of Insurance**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No. **8-V0014178-MVA-R001** Account Name **JONVIN INSURANCE AGENCY PTE LTD** MCI Type **MX1**

1 Index Mark and Registration Number of Vehicle or Chassis No: **SKW5779C**

2 Name of Policyholder **VIJAYAKUMAR PARAMESWARAN**

3 Effective date of Commencement of Insurance for the purpose of the Regulations **04/11/2017**

4 Date of Expiry **03/11/2018**

5 Person or Classes of Person entitled to drive\*

**(a) The Policyholder**

**. The Policyholder may also drive a motor car not belonging to him/her and not hired to him/her under a hire purchase agreement.**

**(b) Any person who is driving on the Policyholder's order or with his/her permission.**

Provided that the person driving is permitted in accordance with the licensing or other 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 the driving the Motor Vehicle

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage

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 or 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.**

7 Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia) are not to be included under these headings

**I/WE HEREBY CERTIFY that the Policy to which this certificate relates is issued in accordance with the provisions of the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act. 1987 (Malaysia)**

QBE Insurance (Singapore) Pte Ltd

A handwritten signature in black ink, appearing to be 'D. P. S.', written over a horizontal line.

Authorized Signature

Date of Issue: 19/10/2017