



FWD CANNOT REPORT 'D ALREADY -
EXCEEDED DEADLINE -

* NO VIDEO *

Letter of Claims Request for direct settlement.

We are submitting a claim on behalf of our customer CHOW CHEN SERN
NRIC S7003528F insured of vehicle SJY 5054L against
your insured vehicle number SLT 1300E (AIG)
On the accident dated on 22-10-18 (ddmmyyy) along WATSON DR.

Dated this 20 NOV 2018
(day) of _____ (month) 2018 .

Charmaine Kong
Volkswagen Group Singapore
Accident Claims Dept.
charmaine.kong@vw.com.sg
DID : 63057176/ 63057299
HP: 92361399

VGS Singapore
 247
 Alexandra Road
 159934 Singapore

Phone No. +65 6305 7299
 Fax No. +65 6474 3643
 E-Mail service@vw.com.sg

VGS Singapore, 247, 159934 Singapore

CHOW CHOEN SERN
 518 JELAPANG ROAD
 #15-263
 Singapore, 670518
 Singapore

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

Service Quote

Customer No. CV008683
 Quote No. SER/QUO/1801836
 QuoteDate 01/11/18
 Salesperson Jessica Boudville
 Page 1

THIS IS NOT AN OFFICIAL TAX INVOICE

Make	Model Description	Mileage	Service Advisor
Volkswagen Passeng	JETTA SPORT 1.4 TSI DSG 118KW	74,495	Cheong Pearlyn
License No.	VIN	Initial Registration	Sales Advisor
SJY5054L	WVWZZZ1KZAM095755	08/09/10	Jessica Boudville
Engine Code	Labor Type	Engine No.	Model Code
	M2	CAV 159482	1K23Q5

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 NUMBER PLATE	B&P NUMBER PLATE -NETT	1	pcs		80.00
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				5,760.00
P 1K0807183	LHS BUMPER BRACKET INNER	1	Pieces		27.30
P 1K0807184	RHS BUMPER INNER BRACKET	1	Pieces		27.30
P 1K0807217AAGRU	FRONT BUMPER Predecessor 1K0807217E GRU	1	Pieces		1,133.86
P 1K0807285B 9B9	FRT NUMBER PLATE HOLDER	1	Pieces		36.73
P 1K0807889B	LH BUMPER BRACKET OUTER	1	Pieces		24.92
P 1K0807890B	RHS BUMPER OUTER BRACKET	1	Pieces		24.92
P 1K5807109E	FRT CROSS MEMBER Use Predecessor 1K5807109B	1	Pieces		507.74
P 1K5807248B	FRONT BUMPER FOAM Use Predecessor 1K5807248A	1	Pieces		58.03
P 1K5853653C 9B9	FRONT CENTER GRILLE Use Predecessor 1K5853653A 9B9	1	Pieces		487.03
P 1K5853761A 2ZZ	FRONT GRILLE CHROME	1	Pieces		857.72
P 1KM898653	GRILLE REPAIR KIT	1	Pieces		552.47
P 3C0853600A MQH	VW SIGN Use Predecessor 1K5853600 MQ	1	Pieces		141.68
	Sum carried forward				9,639.70

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

VGS Singapore
247
Alexandra Road
159934 Singapore

Phone No. +65 6305 7299
Fax No. +65 6474 3643
E-Mail service@vw.com.sg

VGS Singapore, 247, 159934 Singapore

CHOW CHOEN SERN
518 JELAPANG ROAD
#15-263
Singapore, 670518
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Continued 9,639.70

Sum Item 3,879.70

Sum Labor 5,760.00

Sum Item 3,879.70

Total SGD 9,639.70

7% GST 9,639.70 674.78

Total SGD Incl. GST 10,314.48

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	23/10/2018 18:33
Date Of Accident	22/10/2018 13:35
Exact Location Of Accident	ALONG WATTEN DR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY5054L
Insured/Policyholder	
Name Of Registered Owner	CHOW CHOEN SERN
NRIC No	S7003528F
Email Address	COOLSTEAM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90092372
Alternative Phone No	OFFICE-90092372

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2018-00011260
Cover Note Number	

Driver

Name of Driver	CHOW CHOEN SERN
NRIC No	S7003528F
Date Of Birth	08/02/1970
Occupation	INDOOR
Date Of Driving Pass	16/12/1991
Driving Experience	26 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	+65-90092372
Fax Number	
Contact Number	OFFICE-90092372
EEmail Address	COOLSTEAM@GMAIL.COM

Address HDB PANGSHAN VALLEY, 518 JELAPANG ROAD
#15-263

Postcode 670518

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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

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

My vehicle SJY5054L was park along Watten dr. When I was walking back to collect my vehicle, I witness the other party SLT1300E reversing and collided onto the front of my vehicle. We manage to exchange our particulars and took some pictures, no injuries was involved.

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 SLT1300E

Vehicle Make/Model/Colour KIA / NIRO G979 / WHITE

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver RAHAYU BINTI BUANG

NRIC/Passport Number

Contact Number 91012791

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

ACCIDENT STATEMENT (2000 characters)

My vehicle SJY5054L was park along Watten dr. When I was walking back to collect my vehicle, I witness the other party SLT1300E reversing and collided onto the front of my vehicle. We manage to exchange our particulars and took some pictures, no injuries was involved.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
MUHAMMAD SUMARDI BIN MOHD AFFANDI



MARS Officer

Registered Owner or Driver's Signature

Job Complete Date/Time

23 October 2018 at 3:39 PM

Date/Time:

23 October 2018 at 3:39 PM

EMAIL ATTACHED

Susan

From: cool steam <coolsteam@gmail.com>
Sent: Wednesday, 24 October 2018 7:56 AM
To: Susan
Cc: group@ajaxmars.com
Subject: Re: SJY 5054 L

Dear Susan,
Thank you for your response.
Kindly compile my report and together with my pictures taken; and forward me a complete copy please. Thank you
Regards
CS Chow

On Wed, 24 Oct 2018, 02:39 Susan, <susan@ajaxmars.com> wrote:

Dear Sir/Madam,

We acknowledged receipt of your email. We will forward the pictures to the insurance company for their perusal.

Thank you.

Best regards,

Susan

Email: susan@ajaxmars.com

AJAX MARS Pte Ltd

120 Lower Delta Road

#08-08 Cendex Centre

Singapore 169208

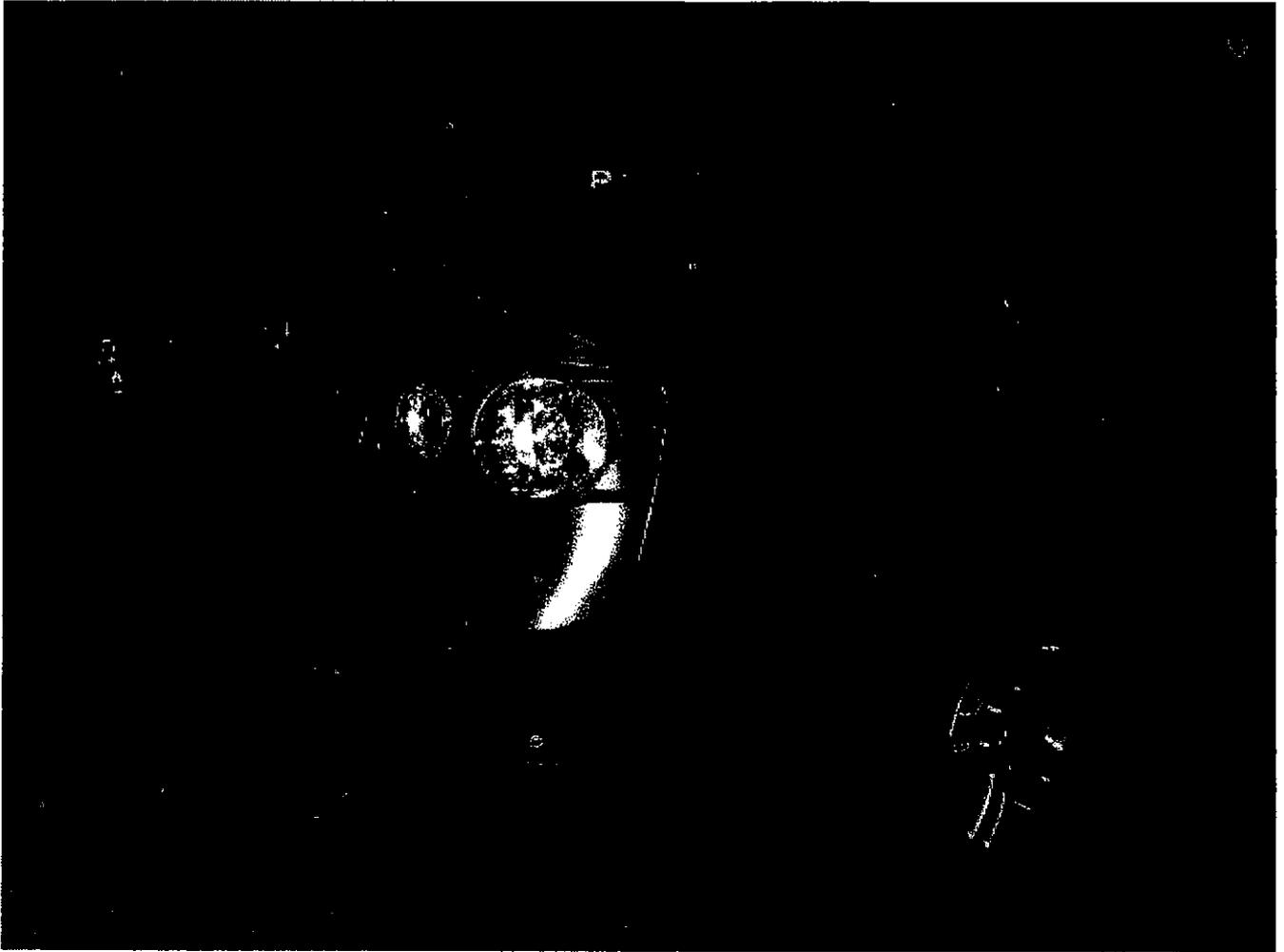
Tel: (65) 6333 2222 Fax: (65) 6849 9155

<http://www.ajaxadusters.com>

Accident Photo



Accident Photo



Accident Photo



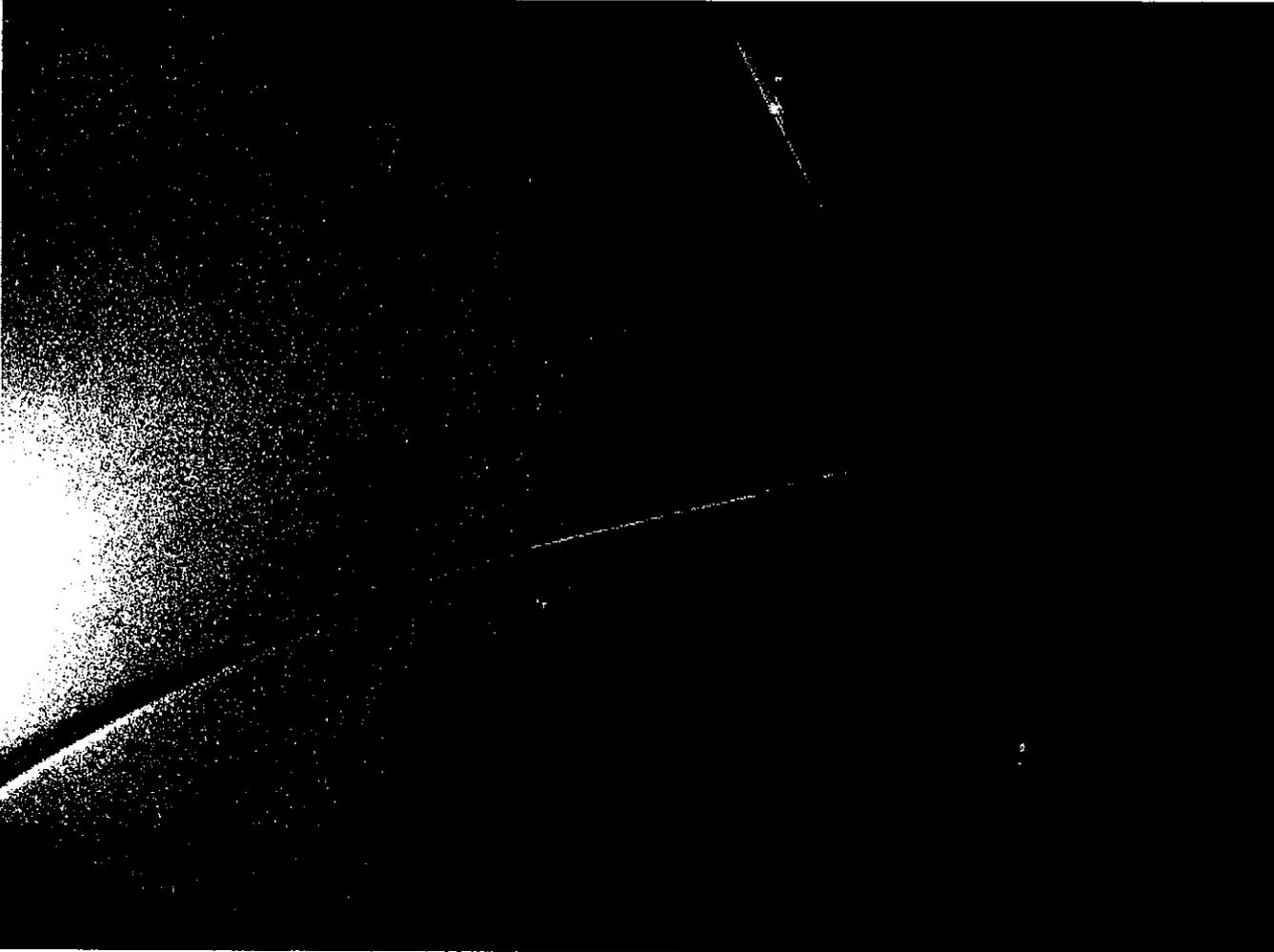
Accident Photo



Accident Photo



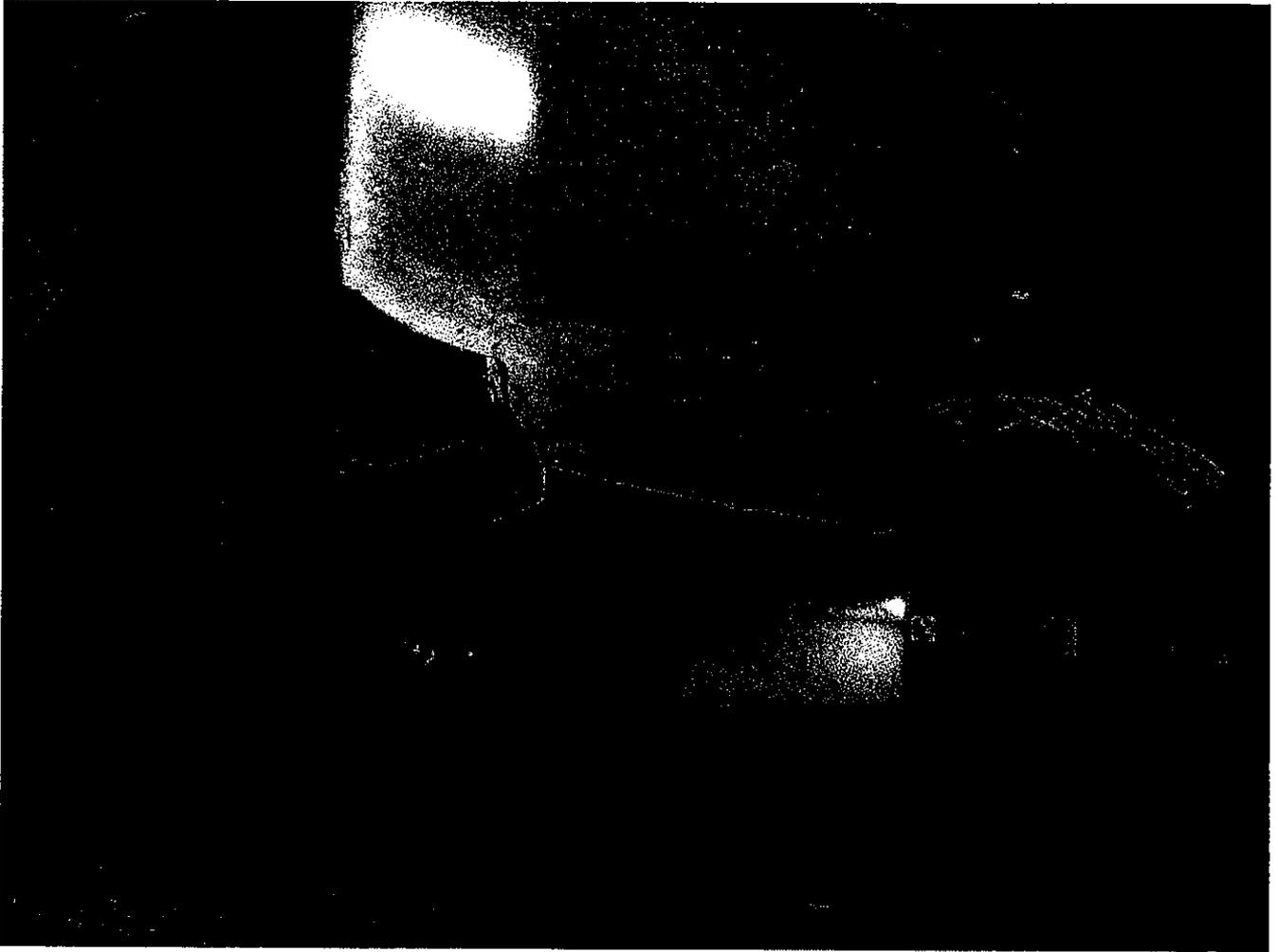
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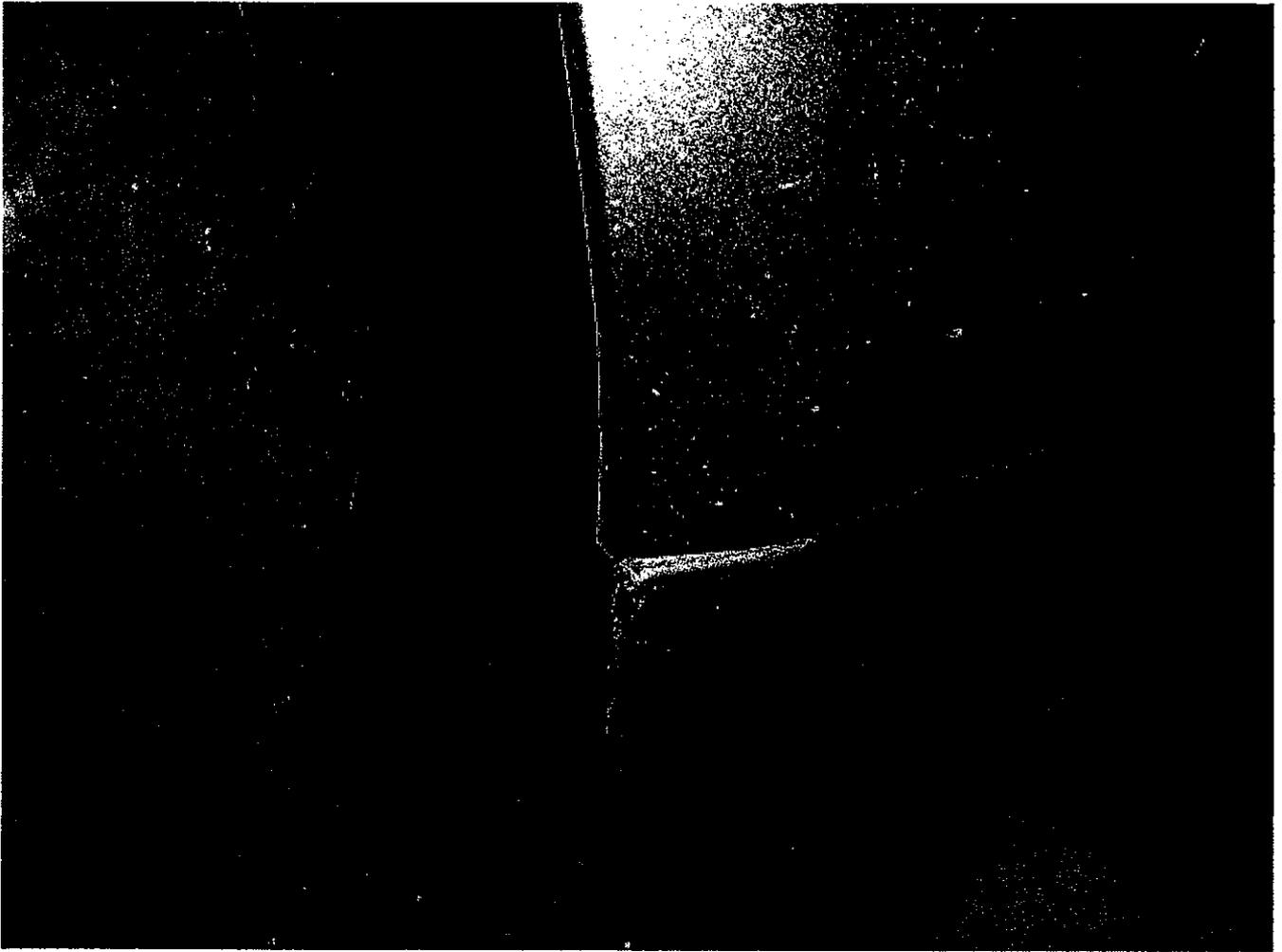
Accident Photo



Accident Photo



Accident Photo

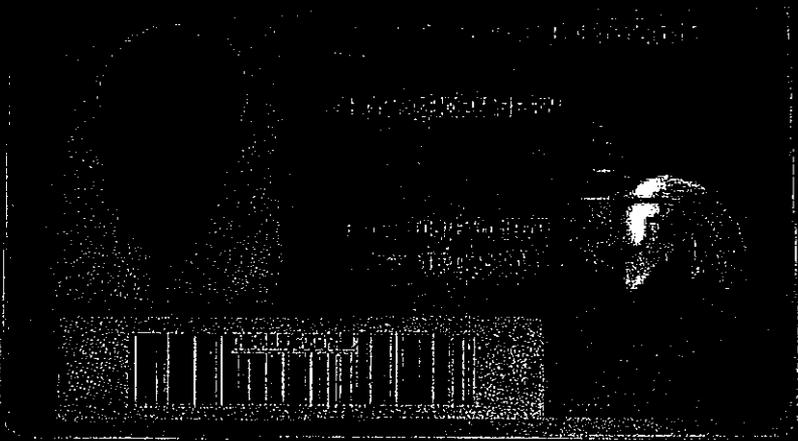


Accident Photo



Driving License

REPUBLIC OF SINGAPORE DRIVING LICENCE



REPUBLIC OF SINGAPORE

Identification No. S7003528F



CHOW CHOEN SEEN

周本生

DRIVER

DRIVING

SINGAPORE

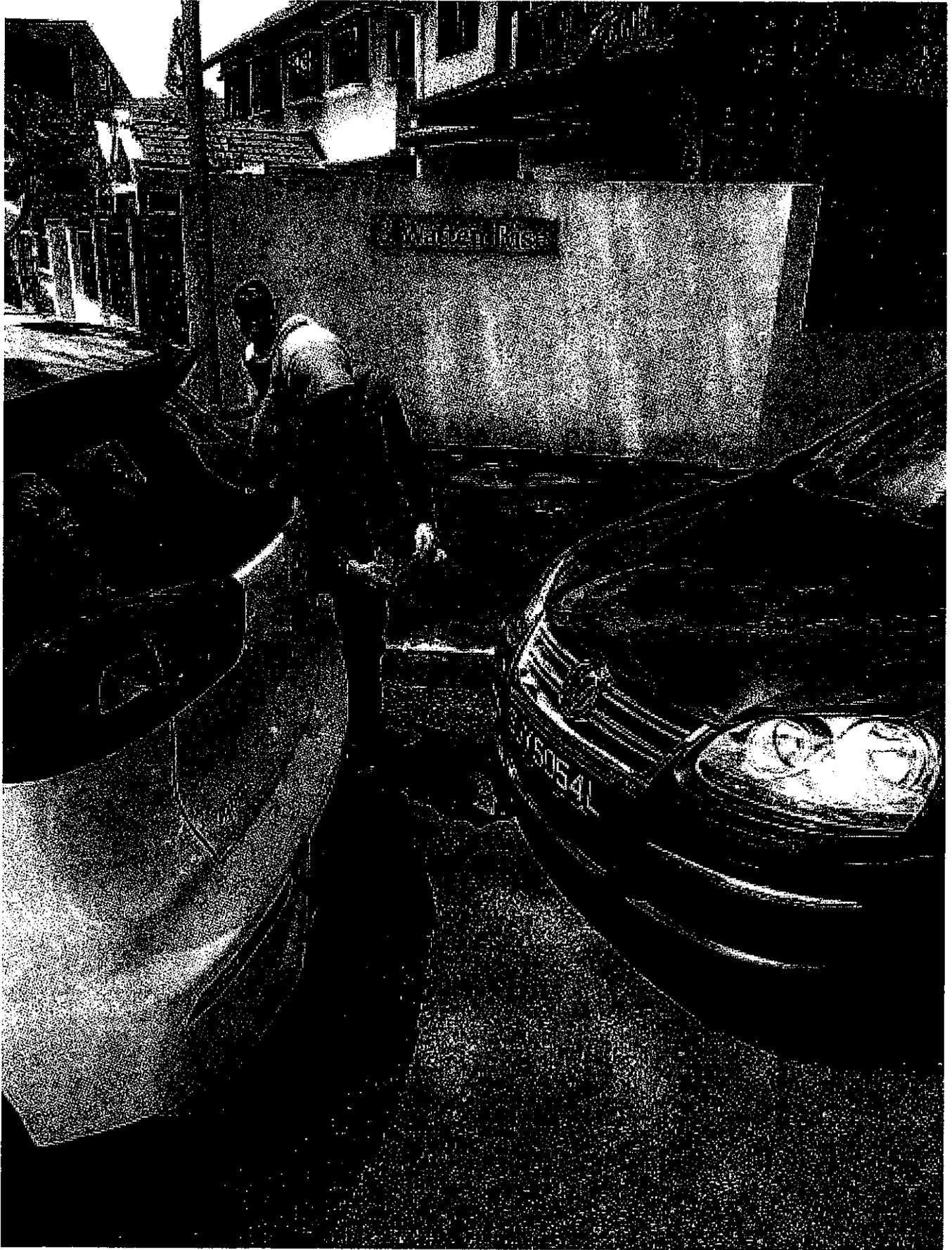
PICS BY INSURED



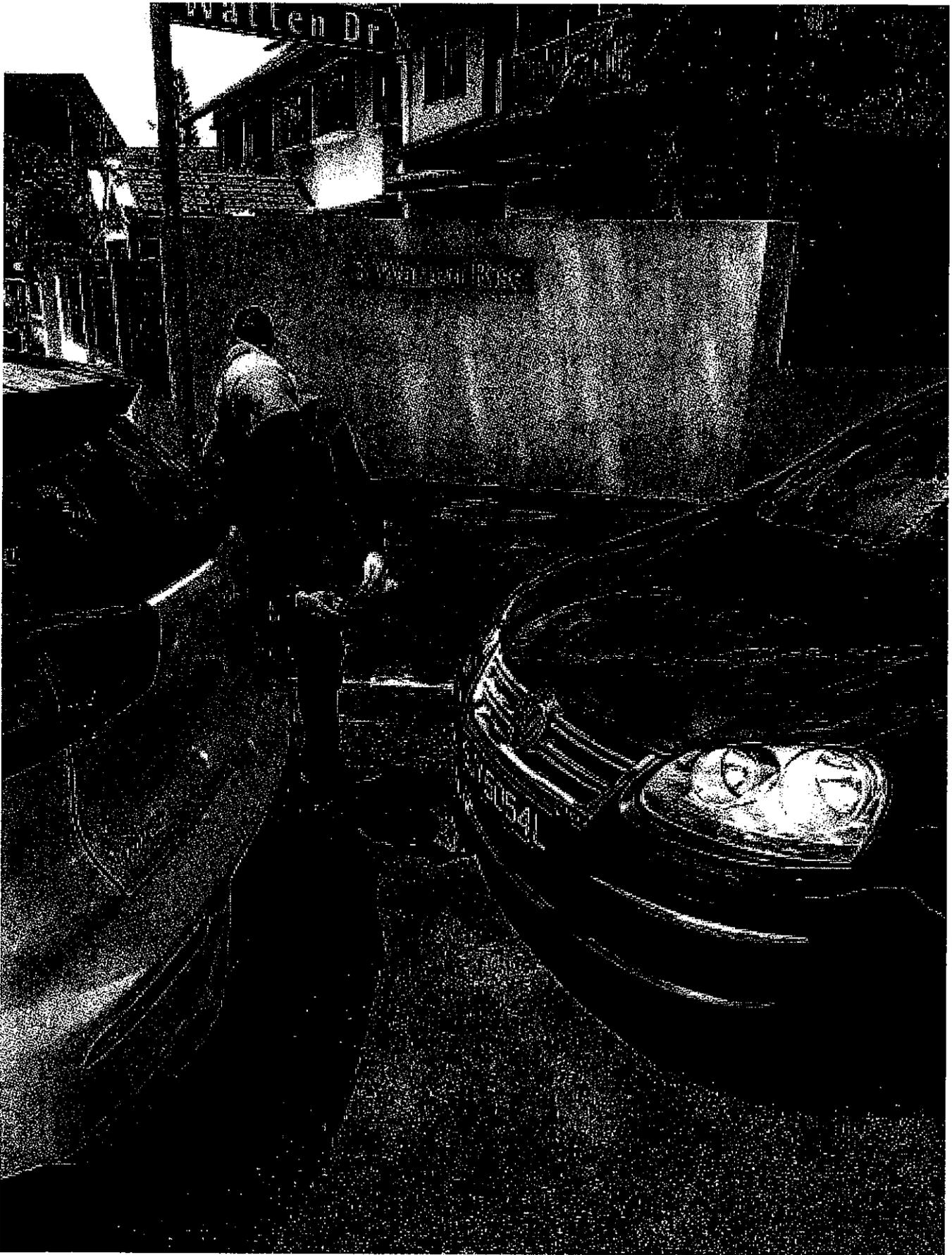
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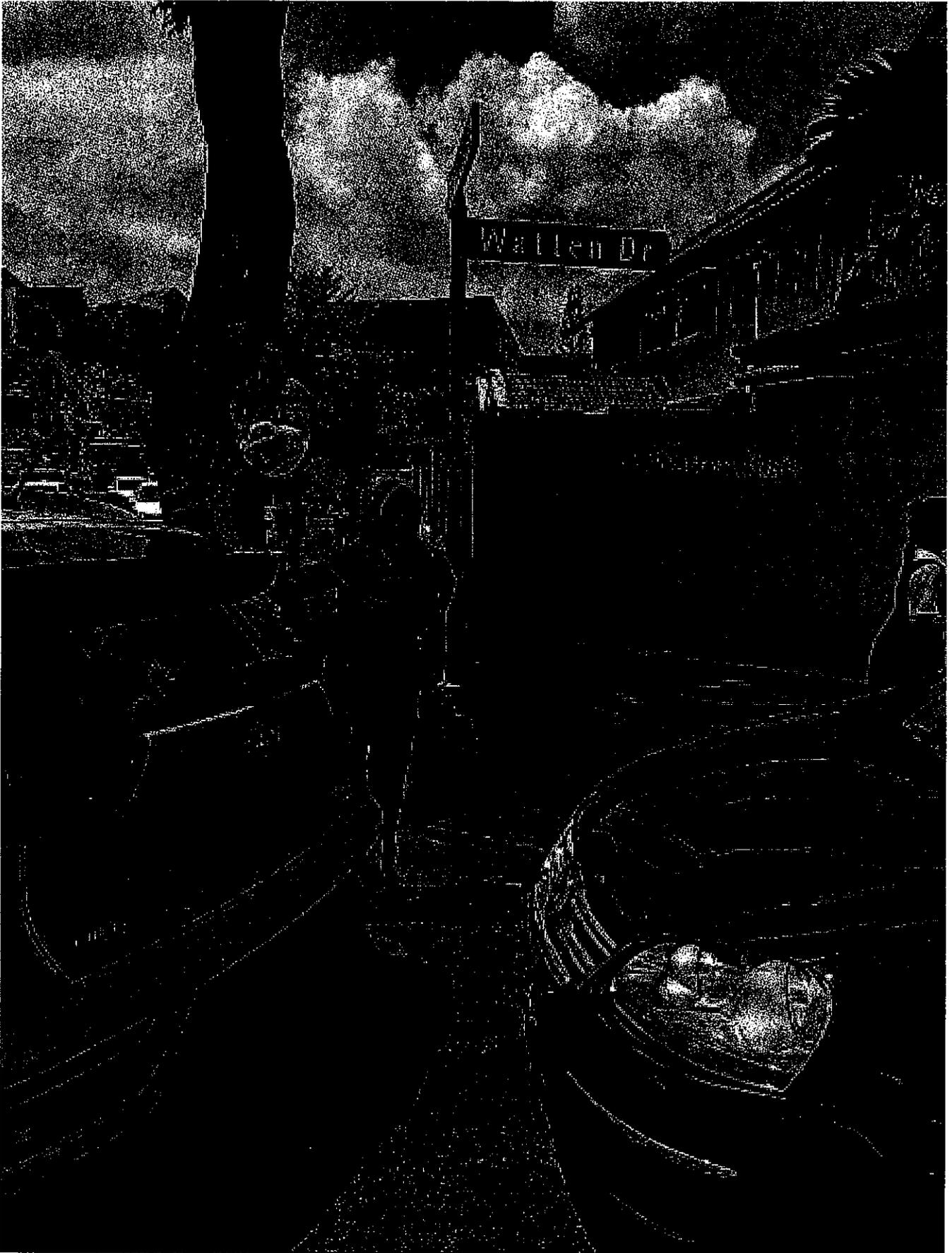
PICS BY INSURED



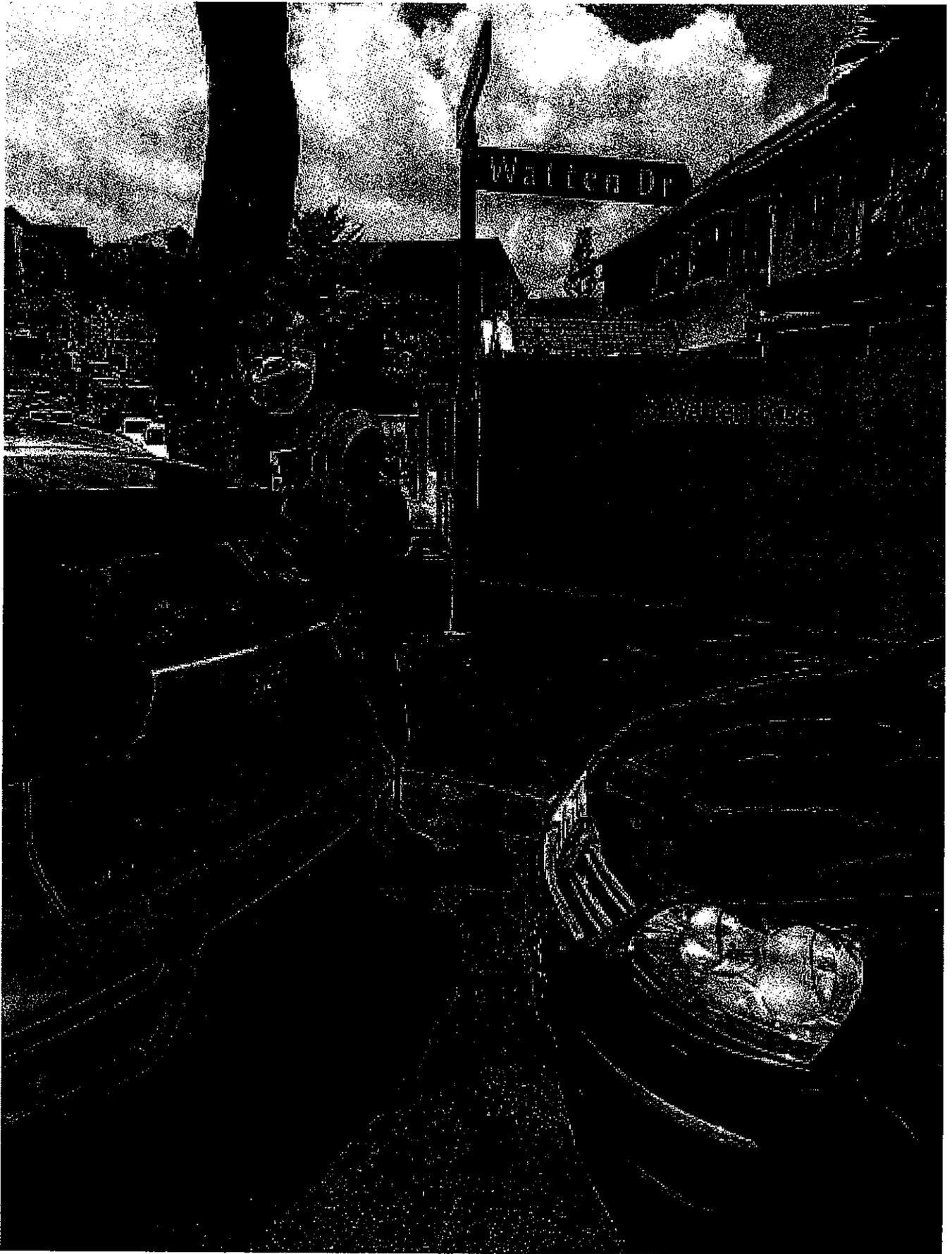
PICS BY INSURED



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Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
5 Raffles Quay #18-00 Singapore 048590
Tel: (65) 6224 0010 Fax: (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 - 17:00
UEN: S042800200 / GST Reg. No.: M400017219

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MBHH18137865 Vehicle Registration No: SJY5054L
Name (as shown in NRIC) : CHOW CHOEN SERN NRIC/FIN/Passport No : S7003528F
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Singapore ()
Contact (Tel) : Mobile No. : 90092372
Email Address : coolsteam@gmail.com
Date of Accident : 22/10/2018 Time of Accident : 13:35
Place of Accident : ALONG WATTEN DR
Insurance Company: FWD SINGAPORE PTE. LTD.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ATTACHED PICS BY INSURED
EMAIL ATTACHED

Policyholder / Driver's Signature
Date:

SUSAN
Reporting Centre Personnel's Signature
Name: F S NEO
NRIC/FIN No.:



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-18-169673
Date of Request: 01/11/2018

Your Ref No: Online Purchase

Volkswagen Centre Singapore
247 Alexandra Road
Singapore 159934

Dear Sir/Madam,

Enquiry Date 01/11/2018
Enquiry By Pearlyn Cheong Pei Fang
TP Vehicle No. SLT1300E
Accident Date 22/10/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLT1300E	AIG Asia Pacific Insurance Pte. Ltd.	19/10/2018-18/10/2019	65-6419-3000

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

 6 Raffles Quay #18-00, Singapore 048580
 Phone: +65 6224 0010 Fax: +65 6224 0030
 Operating Hours: Monday to Friday 9am to 5pm
 GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-169673

Date of Request: 01/11/2018

Your Ref No: Online Purchase

 Volkswagen Centre Singapore
 247 Alexandra Road
 Singapore 159934

Dear Sir/Madam,

 Enquiry Date 01/11/2018
 Enquiry By Pearlyn Cheong Pei Fang
 TP Vehicle No. SLT1300E
 Accident Date 22/10/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

 GIRO
 Cash
 Cheque