

SERVICE ESTIMATE

96332 - C00001 SL: SERVICE SALES - PC

Ms Tan Wei Ling

Blk 63-A Lengkok Bahru

#13-372

Singapore 151063

GST Reg.No:M28920628X

Inv.No. . : B&P 0 Page 1

Inv.date. : 04/12/2018

WIP No. . : 41370

Veh.In/Out: 03/12/2018

*Tel.No. . : Mobile: 97631280

Reg.No. . : SLZ344D

Reg.date . : 20/04/2018

Mileage . : 0

Chassis No: YV1MV28L0J2488390

Closed by : Derek Oh Siong Wee

Svc Consultant :

Remarks : Ms Tan Wei Ling

Op.No	Description	Mech Qty	Price	Disc%	Pkg	Amount	G
802	TO REPLACE FRONT LH DOOR,FRT	0	4800.00	0		4,800.00	S
	LH WING MIRROR ASSY,REAR LH						
	DOOR,REAR LH DOOR TRIM,REAR						
	LH FENDER,ETC						
800	TO PUTTY SPRAY PAINT ON FRT	0	3500.00	0		3,500.00	S
	LH DOOR,REAR LH DOOR,REAR LH						
	FENDER,ETC						
802	TO TRANSFER REAR LH DOOR PARTS	0	250.00	0		250.00	S
280	TO CHECK WIRING INCLUDE	0	450.00	0		450.00	S
	RESETTING OF ALL ELECTRICAL						
	MODULES						
	DOOR PANEL REAR LH V	1.0 EA	1850.70	10		1,665.63	S
	GUIDE MOULDING BLACK	1.0 EA	132.20	10		118.98	S
	DOOR SEAL LOWER LHR	1.0 EA	121.30	10		109.17	S
	WEATHERSTRIP REAR LH	1.0 EA	61.90	10		55.71	S
	GUIDE MOULDING BLACK	1.0 EA	115.00	10		103.50	S
	DOOR SEAL LOWER LHF	1.0 EA	121.30	10		109.17	S

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Ms Tan Wei Ling
Blk 63-A Lengkok Bahru
#13-372

Singapore 151063

Closed by : Derek Oh Siong Wee
Svc Consultant :
Remarks : Ms Tan Wei Ling

GST Reg.No: M28920628X
Inv.No. : B&P 0 Page 2
Inv.date : 04/12/2018
WIP No. : 41370
Veh.In/Out: 03/12/2018
*Tel.No. : Mobile: 97631280
Reg.No. : SL25440
Reg.date : 20/04/2018
Mileage : 0
Chassis No: YV1MV2810J2488390

Op.No	Description	Mech	Qty	Price	Disc%	Pkg	Amount	G
	ADHESIVE TUBE CHENIC	4.0	EA	75.80	10		272.88	S
	BLIND RIVET 4.0*21 P	10.0	EA	3.00	10		27.00	S
	BUMPER CLIP 8x9.5	10.0	EA	5.40	10		48.60	S
	PLASTIC RIVET P/W RA	10.0	EA	6.90	10		62.10	S
	SOUND DEADENING PAD	2.0	EA	250.00	10		450.00	S
	MIRROR GLASS LH S60	1.0	EA	210.50	10		189.45	S
	DOOR MIRROR LH T2 V4	1.0	EA	517.40	10		465.66	S
	MIRROR BACK COVER LH	1.0	EA	285.90	10		257.31	S

Gross Total. 12,935.16

Labour Total 9,000.00
Parts Total 3,935.16
Package Total 0.00

Net..... 12,935.16
GST @ 7.0% 905.46
Total..... 13,840.60
Paid..... 0.00
Please Pay.. 13,840.60

GST: S=StdRated; O=OutOfScope; Z=ZeroRated

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for e-filing.
2. Please report correctly the details of the accident to speed up the claims process.
3. This Form must be completed by the Policyholder and/or the Authorised Driver.
4. 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.
5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

ACCIDENT STATEMENT

Date and Time of Accident	Date: 30/11/18 Time: 1200
Exact Location of Accident	64 Lengkok Bahru carpark

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ 348D
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INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Cert.)	Tan Wei Ling
Personal Identification - NRIC (Singaporean/PR)	S7124758I
- FIN/Passport Number	
- Not Applicable	

VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model	Manufacturer Volvo Model V40 T2
Type of Vehicle*	<input checked="" type="radio"/> Saloon <input type="radio"/> MPV <input type="radio"/> CRV <input type="radio"/> Van <input type="radio"/> Lorry <input type="radio"/> Bus <input type="radio"/> M/cycle <input type="radio"/> Others, _____
Exact Purpose for which vehicle was being used at time of accident	Parked
Are you claiming under your own insurance policy for repair to your vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If No, Pls select: <input checked="" type="radio"/> Third Party <input type="radio"/> Reporting)
Vehicle Category*	<input checked="" type="radio"/> Private <input type="radio"/> Commercial <input type="radio"/> Motorcycle

INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company *	SAIG
Type of Policy	<input checked="" type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> TP Only
Fleet Policy	<input type="radio"/> Yes <input checked="" type="radio"/> No
Policy Number	
Motor CI	

DRIVER

	<input checked="" type="radio"/> Same as Insured above
Name of Driver	Tan Wei Ling
Personal Identification - NRIC (Singaporean/PR)	S7124758I
- FIN/Passport Number	
Date of Birth	20 dd/ 07 mm/ 1971 /yy
Driving Date Pass	21 dd/ 03 mm/ 1995 /yy
Year of Driving Experience	Year(s) Month(s)
Occupation	<input checked="" type="radio"/> Indoor <input type="radio"/> Outdoor
Gender	<input type="radio"/> Male <input checked="" type="radio"/> Female
Contact Number / Mobile Phone / Fax No.	97631280

Address of Driver	9' 6314 Longkok Pahrn # 13-372 Postcode (51063)	
Email Address	no email	
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
If No, Relationship of the Driver with the Insured	owner	
Vehicle Registration Number of Driver's Own	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Vehicle Registration Number of Driver's Own Vehicle (if applicable)		
Insurance Company of Driver's Own Vehicle (if applicable)		
GENERAL INFORMATION OF THE ACCIDENT		
Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)	Parked & Ground Damped	
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others, _____	
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others, _____	
OTHER INFORMATION		
Was any foreign vehicle involved in this accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Was any body injured in the accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Was any other vehicle or property damaged?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Was there any video captured by Car Camera?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Number of Passengers (Including Driver)	0	
DETAILS OF POLICE ACTION		
Was the Accident reported to the Police?	<input checked="" type="radio"/> Yes <input type="radio"/> No (If Yes, please state which Police Station.)	
Police Station Name		
Police Station Address	Refer to police report	
Police Station Contact	Tel No.	Fax No.
Was notice of intended Prosecution given?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, against whom?)	
DETAILS OF OTHER VEHICLE / PROPERTY 1		
Vehicle Registration Number	64 79736	
Vehicle Make/ Model/ Colour		
Details of Properties		
Name of Driver		
Personal Identification - NRIC (Singaporean/PR)		
- FIN/Passport Number		
Contact Number		
Address		
Name of Insurance Company		
Nature of Damage		
No. of Passenger (Including Driver)		
(Note - Please use page 6 if you need to add more vehicles)		

SKETCH PLAN

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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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' law yers/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 w ith 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 w ith applicable law in administering, processing, handling and/or dealing w ith 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Refer to police report.

Describe Circumstance of the Accident

As per
to police
report.

IMPORTANT NOTE

Under **General Condition – Conduct of Claim** of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

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

Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE



T/20181130/2080

Police Station Of Origin:
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

1 of 3

Report No. T/20181130/2080

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/11/2018 14:22		Vide Report No.:		Station Diary No.: 25	
Informant's Particulars					
Name of Informant: TAN WEI LING			Address: APT BLK 63A LENGKOK BAHRU #13-372 SINGAPORE 151063		
ID Type / ID No.: NRIC NO / S71247581			Contact No.: Home/Office: Mobile: 97631280		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 47	Date of Birth: 20/07/1971	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Accountant			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 30/11/2018 12:00	Type of Location: carpark
Location: Along Road 1 LENGKOK BAHRU 64 Lengkok Bahru carpark				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GY7973G	Lorry				No Damage	0
SLZ344D	Car	VOLVO	V40 T2 (A)	Blue	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLZ344D	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800033932	20/04/2018	19/04/2020



**SINGAPORE
POLICE FORCE**



T/20181130/2080

Police Station Of Origin:
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

2 of 3

Report No. T/20181130/2080

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN WEI LING	ID No.	S7124758I
Related Vehicle	SLZ344D (Car)	Contact No.	97631280
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above date, time and location I discovered that my car (SLZ344D) had a white colour scratch on the left rear passenger door and I had also found a note believed to be the witness who had saw it and provided me the said lorry (GY7973G) who had reversed into my vehicle. The witness did not provided me his/her contact detail but he/she had heard a loud bang sound when the said lorry reversed into the parking lot. The person had also managed to takedown the lorry company which is called Landscape Services. I am also unsure when was the exact time and date the incident happened as I was away from 22/11/2018 to 30/11/2018 and the witness did not indicate when it happened. I wish to inform that I do not have any in car camera installed.



**SINGAPORE
POLICE FORCE**



T/20181130/2080

Police Station Of Origin:
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

3 of 3

Report No. T/20181130/2080

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E /

Sgt 3 MUHAMMAD ZAMIR BIN NAZIR

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt IRMAN BIN MOHAMAD SAID

Contact No.: 65476145

Signature Of Informant:

Date/Time:

30/11/2018 14:22

Classification Of Case:

Authentication Stamp

NP168

SINGAPORE
POLICE FORCE

SN 069

SIGNATURE

Hi. I Heard a BANG
WHEN A LORRY REVERSE-
TO PARK. AFTER HE
LEFT I SAW THE
DENT & SCRATCHES ON
YOUR CAR.

YOU MAY TRY IF HE
WILL ADMIT TO CLAIM
6479736

I SUZU WHITE TRUCK.
RICH COMPANY OF LORRY
LANDSCAPE SERVICES P/L
6001 BEACH RD #09-09

TOO BAD THERE IS NO CAM
TO RECORD.

SINGAPORE ACCIDENT STATEMENT

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.
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	03/12/2018 12:50
Date Of Accident	30/11/2018 12:00
Exact Location Of Accident	64 LENGKOK BAHRU CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ344D
Insured/Policyholder	
Name Of Registered Owner	TAN WEI LING
NRIC No	S7124758I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97631280
Alternative Phone No	OTHERS-97631280

Vehicle Particulars

Manufacturer	VOLVO
Model	V40-1.5 T2 (A)
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	TAN WEI LING
NRIC No	S7124758I
Date Of Birth	20/07/1971
Occupation	INDOOR
Date Of Driving Pass	21/03/1995
Driving Experience	23 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97631280
Fax Number	
Contact Number	OTHERS-97631280
EEmail Address	NOEMAIL

Address	BLK 63A LENGKOK BAHRU #13-372
Postcode	151063
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	2
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	RIVER VALLEY NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 4 DELTA AVENUE , POSTCODE: 161004 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2789999 - FAX NO: 62786427
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACH

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	GY7973G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7124758I



Name
TAN WEI LING

陈慧玲

Race
CHINESE

Date of birth
20-07-1971

Sex
F

Country/Place of birth
SINGAPORE

S7124758I

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number **S7124758I**

Name
TAN WEI LING

Birth Date **20 Jul 1971**

Issue Date **17 Feb 2003**

000211956K

5493212



NRIC No. S7124758I



Date of issue
27-10-2015

Address
APT BLK 63A LENGKOK BAHRU
#13-372
SINGAPORE 151063

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

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	21 Mar 1995

NP 428A

Licence No: S7124758I

