Volkswagen Centre Singapore



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

Letter of Claims Request for direct settlement.

We are submitting a claim of NRIC State of NRIC			0	Yuen
		=======================================		against
your insured vehicle number	er SKX 61	9J (AIG)
On the accident dated on _	2016	ddmmyyyy) along	Pioneer	Poad
norths life The	stian o	f Mt Roa	el	
Dated this	(day) of	(month) 201	19.	

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

HP: 92361399

Service Order Confirmation

SA: Wong Meiy

SERVICE ORDER NO: 19IP0215

CUSTOMER NO.:

CV027859

CUSTOMER NAME: NG PENG YUEN

TELEPHONE NO.:

ADDRESS:

827 JURONG WEST STREET 81 #04-280

Singapore

VEH No.: **SKR3037A**

Order Date:

23/01/19

Reg Date:

29/01/15

KM:

VIN NO.:

WVWZZZAUZEW367263

ENGINE NO:

MODEL:

GOLF A7 1.4 TSI (DSG)

MODEL NO.: 5G13GZ

44,456

	No.	DESCRIPTION	QTY	<u>UOM</u>	UNIT PRICE	DISC %	AMOUNT
	Labor						
1	B&P MECH	CHECK WIRE HARNESS, ECU, SENSOR, SOCKET	1	TU	200		200
2	B&P DIAG	PROGRAMMING & CALIBRATION- NETT	1	TU	360		360
3	B&P MECH	R&R ROOFLINING	3	TU	840		2,520
4	B&P ALEX LABOUR	LABOUR	10	LAB	840		8,400
5	B&P ALEX PAINT	SPRAY PAINT	8	LAB	800		6,400
6	B&P ALEX LABOUR	R&R REAR LUGGAGE TRIM	2	LAB	840		1,680
7	B&P ALEX LABOUR	R&R REAR W/SCREEN	1	LAB	840		840
8	B&P ALEX LABOUR	TRANSFER BOOT LID MECHANISM	1	LAB	840		840
9	B&P NUMBER PLATE	B&P NUMBER PLATE -NETT	40	ST	80		80
10	B&P SENSOR	SUPPLY & INSTALL REVERSE SENSOR	1	PCS	400		400
11	B&P CELETTE	VEHICLE ON BENCH- CELETTE (NETT)	1	LAB	1,500		1,500
	Item						
12	5G6827025Q	REAR BOOT LID	1	PCS	1,587,14		1,587.14
13	5G6827301C	HINGE	2	PCS	120.77		241 54
14	5G6827505B 9B9	LOCK	1	PCS	321.00		321.00
15	5G6827469F FOD	OPER MECHANISM	1	PC\$	630 58		630 58
16	5G0827517D	LATCH	4	PCS	47.98		47.98
17	5G6827705E	BOOT WETHERSTRIP	1	PCS	290.25		290 25
18	5G6971829B	GROMMET	2	PCS	13.91		27 82
19	1J0827713	PLUG	1	PCS	0,69		0 69
20	5G0945087B	3RD BRAKELIGHT	1	PCS	193 25		193.25
21	5G0853687 2ZZ	NAME PLATE - GOLF	1	PCS	81,25		81,25
22	5G0853675M AFM	NAME PLATE - BLUEMOTION	4	PCS	72,03		72.03
23	5G0853675A JZQ	NAME PLATE - TSI	1	PCS	71 90		71.90
24	5G6867605E 82V	BOOT LID TRIM COVER	4	PCS	187,34		187 34
25	5G0945095M	TAILLIGHT OUTER LH	1	PCS	353 69		353 69
26	5G0945096M	TAILLIGHT OUTER RH	1	PCS	353 69		353 69
27	5G0945093AD	TAILLIGHT INNER LH	1	PCS	323 41		323.41
28	5G0945094AD	TAILLIGHT INNER RH	10	PCS	323 41		323 41

Service Order Confirmation

SA: Wong Meiy

SERVICE ORDER NO: 19IP0215

CUSTOMER NO.:

CV027859

CUSTOMER NAME: NG PENG YUEN

TELEPHONE NO.:

ADDRESS:

827 JURONG WEST STREET 81 #04-280

Singapore

VEH No.:

SKR3037A

Order Date:

23/01/19

Reg Date: VIN NO.:

29/01/15

KM:

WVWZZZAUZEW367263

ENGINE NO:

MODEL:

GOLF A7 1 4 TSI (DSG)

MODEL NO.: 5G13GZ

44,456

	No.	DESCRIPTION	QTY	MOU	UNIT PRICE	DISC %	AMOUNT
29	5G6807417APGRU	REAR BUMPER	1	PCS	1,046.28		1,046,28
30	5G6807568D 9B9	SPOILER	1	PCS	338.57		338.57
31	WHT005263	POP-RIVET	6	PCS	1,55		9 30
32	5G0807305D	REINFORCEMENT	4	PCS	680 69		680 69
33	5G6807863C	BUMPER CENTRE BRACKET	1	PCS	96 28		96 28
34	5G6807393A	TAILLIGHT LOWER BRACKET LH	1	PCS	41 98		41.98
35	5G6807394A	TAILLIGHT LOWER BRACKET RH	1	PCS	41.98		41,98
36	5G6807393	BUMPER SIDE BRACKET LH	1	PCS	41.98		41,98
37	5G6807394	BUMPER SIDE BRACKET RH	240	PCS	41.98		41,98
38	WHT005560	NUT	6	PCS	1.86		11.16
39	1K8943021	REAR NUMBER PLATE LAMP	2	PCS	47.24		94.48
40	8K0973702	NUMBER PLATE LAMP WIRE HOUSING	1	PCS	5.33		5 33
41	5G0945105	REFELCTOR LH	1	PCS	88.57		88.57
42	5G0945106	REFELCTOR RH	1	PCS	88 57		88.57
43	5G6813301B	REAR END PANEL INNER	1	PCS	620,06		620.06
44	5G6813309	REAR END PANEL OUTER	1	PCS	135,67		135.67
45	D 007600A1	INOXSPRAY	1	PCS	71.38		71.38
46	D 180003M2	2KADHESIV	1	PCS	300 52		300 52
47	D 476KD1M2	SEALANT	4	PCS	81.26		81 26
48	N 90652602	BOLT	6	PCS	0.81		4.86
49	5G6863459K 82V	END PANEL TRIM COVER	1	PCS	138 83		138.83
50	5G6858855F CA9	SPARE WHEEL COVER	10	PCS	363,01		363 01
51	5G6867761E 82V	SHELF LH	1	PCS	131,82		131.82
52	5G6867762H 82V	SHELF RH	Ť	PCS	131.82		131,82
53	5G0810971D	LHS REAR FENDER LINER	1)	PCS	190 29		190.29
54	5C5071911C	REAR SILENCER CHROME	î	PCS	373.76		373.76

Remarks: MSIG WINNER AGAINST AIG

D.O.A: 22-01-19 SURVEY BY LKK

Service Order Confirmation

CUSTOMER N		CV027859						
CUSTOMER N		NG PENG YUEN						
TELEPHONE N ADDRESS:		827 JURONG WEST ST	RFFT 81 #04-280					
ADDRESS.		Singapore						
VEH No		SKR3037A						
Order Date:	23/0	1/19						
Reg Date:	29/01	1/15	KM: 44,456					
VIN NO.:	WVV	VZZZAUZEW367263	ENGINE NO:				SA:	Wong Mely
MODEL:	GOL	F A7 1.4 TSI (DSG)	MODEL NO.: 5G13GZ					
No.		DESCRIPT	TION	QTY	<u>uom</u>	UNIT PRICE	DISC %	AMOUNT
					T	DTAL		33,497.40
					G	ST AMOUNT		2,344.82
					T	TRUOMA JATO		35,842.22
			On Behalf Of "COMPANY"			Certified Goods/S	Service received:	
			Authorized Signatur	e			Custome	er

NOTE: THIS IS NOT AN OFFICIAL RECEIPT

SERVICE ORDER NO: 19IP0215

MVGS19011335 / Volkswagen Centre Singapore - HQ ENTRY DATE & TIME: 23/01/2019 18:32 SUBMITTED BY: Wong Yen Mei

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 witholding of material facts may allow insurance compan 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	23/01/2019 18:32
Date Of Accident	22/01/2019 17:40
Exact Location Of Accident	ALG PIONEER ROAD NORTH BFR THE J'TION OF INT RD
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKR3037A
Insured/Policyholder	
Name Of Registered Owner	NG PENG YUEN
NRIC No	S2512364F
Email Address	PYNGJOHN@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91382830
Alternative Phone No	OFFICE-91382830
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	GOLF A7 1.2 TSI TL BMT (DSG)
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 80424017 AVW
Cover Note Number	

Driver

Name of Driver NG HOONG JIANG DANIEL

S8600024E NRIC No 07/01/1986 Date Of Birth **INDOOR** Occupation Date Of Driving Pass 26/06/2012

6 YEARS AND 6 MONTHS Driving Experience

Gender MALE

Mobile Number (LOCAL) +65-91382830 (LOCAL) +65-91382830 Fax Number

Contact Number

EMail Address PYNGJOHN@HOTMAIL.COM MSh (Wimes 476

Address

APT BLK 827 JURONG WEST ST 81

#04-280

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

 Ξ

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 (including own vehicle) involved in the accident

2

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

. _ _

ambulance?

YES

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

NANYANG N.P.C

Police Station Address

ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-7929999 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

MORE DETAILS PLEASE REFER TO POLICE REPORT AND SKETCH PLAN

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

SKX6149J

Vehicle Make/Model/Colour

HONDA WHITE

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

ASTROPHENICAL WILLIAM	DETAILS OF INJURED PERSON 1	
Name	NG HOONG JIANG DANIEL	
Approximate Age	33	
Injuries Sustain	WHIPLASH	
Injured person in which vehicle?	SKR3037A	
Were seat belts worn?	YES	
Was this injured conveyed to hospital by ambulance?	YES	
Address	APT BLK 827 JURONG WEST ST 81 #04-280	
Postcode	640827	

Sketch Plan Pg. 1

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
- 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
- 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:

- 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")
- 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 Signature

Date & Time

Driver's Signature

(If driver is not the policyholder) Date & Time: 23/01/19

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN	To NANYAN	6 CC
	1 1	
200	Janes Janes	lanel
	((مانان و المراج	
		(SKR 3037A)
	Na Tanana	Damage to our car
	0	Domagy to our car
PESSAGE SIDELINES AND SE	FROM AYE	(SKX 6149J)
Please refer to p		(21/4 41/10)
THOSE INTO TO P	ona report	
-		
		N
DECLARATION I/We declare the foregoing particu	lars are true in every respect.	
ME	AUD .	huy
Policyholder Senature Date & Time: 93 119	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:
125 (1)(1)	Date & Time: 03/11/19	NRIC/FIN No.:
,	5.00pm	





Police Station Of Origin:

Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

1 of 3 Report No. T/20190123/2052

REPORT OF A TRAFFIC ACCIDENT

23/01/2019		ide:	J/20190122/0119	50			
(t t							
Name of informant: NG HOONG JIANG DANIEL			Address: APT BLK 827 JURONG WEST STREET 81 #04-280 SINGAPORE 640827				
ID Type / II NRIC NO /		ŀΕ	Contact No.: Home/Office: Mobile: 96757953				
Nationality: SINGAPO		N	Email:				
Sex: Male	Age: 33	Date of Birth: 07/01/1986	Type of Informant: Driver				
Race: Chinese			Language:	Institution	/ School Name:		
Occupation: SCIENTIFIC INSTRUMENT ENGINEER			Driving Licence Information: Class: Date of Expiry:				

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/01/2019 17:40	Type of Location: Straight Road	
	D NORTH				
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	1.	Traffic Volume: Heavy	

ora set			#1,		85.0	
SKR3037A	Car	VOLKSWAGO N	GOLF A7 1.4 TSI AT 5G13GZ W/O HID	Blue	Seriously Damaged	0
SKX6149J	Car	HONDA	JAZZ 1.5 VTIR CVT ABS D/AIRBAG 2WD	White	Seriously Damaged	1

Sketch Plan #4 Pg. 1





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 2 of 3 Report No. T/20190123/2052

Tel No: 1800-7929999

CONTINUATION OF REPORT

Any Pedestrian II	nvolved: No					
No. of Pedestrian			Use of Peo	iestrian	Cross	ing: NA
Park F. T. C						
Name	NG HOONG JIANG [DANIEL		ID No		S8600024E
Related Vehicle	SKR3037A (Car)			Contact No.		96757953
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL			Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	22/01/2019		Date Disc		NIL	
	ted Medical Leave	07	Degree of		Serio	us

Brief Details.

On 22/01/2019 at about 1738HRS, I was driving along Pioneer Road North in my vehicle SKR3037A, before the junction of International Road. Traffic was heavy but it was not congested as I was still moving. I suddenly felt a big impact from the back of my vehicle. After the impact, I stopped my vehicle and stepped out to check what happened. I discovered that there was another vehicle, SKX6149J that crashed into me behind. I called for police thereafter. I did not manage to get the particulars of the other driver during the accident as he was severely injured. However, the driver of the other vehicle admitted to falling asleep, resulting in the accident.

I was also conveyed to NUH hospital by ambulance and was given 7 days MC as I suffered severe whiplash. I want to state that I do not have in car footage of the accident.

Accident Sketch Plan Pg. 1

National University Hospital (Singapore) Pte Ltd

5 Lower Kent Ridge Road, Singapore 119074 TEL: (65) 6779 5565 Business Registration No.198500843R



MEDICAL CERTIFICATE		-	RIGINAL		N	UH19021894
NAME: NG HOONG JIANG	DANIEL				NRIC:	S8600024E
Type of Medical Leave gra	anted : OUTPATIENT SICK I	LEAVE				
The above named is unfit 28-Jan-2019	for duty for a period of inclusive	7	day(s) from	22-Jan-2019	to	
The certificate is not valid	for absence from court att	endance.				
The above named attended	ed for Examination/Treatm	ent from	22-Jan-2019 18:5	3 to 22-Jan	-2019 23:14	
					1	*
22-Jan-2019	OCHI HARUMI (1981	6A)	A&	E		
Date A member of the NUHS	Issued by		Loca	tion	Signa	ature

HETSUU0180 000

HUH-ENERSEHCY MEDICI
HUH

THANK YOU
111897215000 89721501
002028 REF; 0
0085 BANK

22 JAN, 2019 23:23:52
002028 012920 00

TOTAL : \$121.00

APPROVED

*******DUPL1CATE*****

VEHICLE CONDITION REPORT FORM / JOB RECORD

Allianz (1)

Date: ZZLOLIS Time: ISZZISZISZISZISZISZISZISZISZISZISZISZISZ	Customer Name: Customer Telephone: Make/Model: Yw Golf Location: Prover 2d Balance Tared about Time on Scene: Zoob Time Job Completed: 20#3 Repaired at Breakdown Scene: Y/N VIN No:
T	be circle the above as appropriate lamaged area for scratch and Y for dent
CUSTOMER DECLARATION 1. I am entitled to the service requested. In the event of this subsequently not being the case I shall be responsible	

- 1. I am entitled to the service requested. In the event of this subsequently not being the case I shall be responsible for the cost of any assistance provided.
- 2. I accept that any roadside repairs will be of a temporary nature and that advice of a franchised dealer should be sought by me as soon as possible.
- 3. In the case of forced entry, I confirm that I specifically requested that the operator forcefully enter the vehicle and that all damages occasioned thereby is and shall be my sole responsibility.
- 4. I accept that any removable items left in the vehicle will not be the responsibility of the emergency service or their agents.

Customers	
Signature	
(white copy)	

Dealer/Workshop Signature (pink copy)



Operators
Signature
(yellow copy)

