

## Letter of Claims Request of direct settlement.

We are submitting a claim on behalf of our customer	SLT 8842L 5
NRIC S7974155H insured of vehicle Lin	n Lourgementhrold against
	( A×A )
On the accident dated on (ddmmyyy	yy) along
intersection of mountballen & typay 1 cat	ong Rel.

Dated this \_\_\_\_\_ (day) of \_\_\_\_ (month) 20\_19\_\_\_.



Volkswagen Group Singapore

1 Kampong Ampat

Singapore 368314

DID: 69223502

HP: 93867833

shushi.tang@vw.com.sg

## **VOLKSWAGEN CENTRE SINGAPORE**

Tuas Avenue 639176 Singapore

Biz. Reg. No.: 199101494Z GST No.: M200985052





## Quotation Non binding

Page

1/1

Company AXA Insurance Pte Ltd 8 SHENTON WAY 068811 Singapore Customer data: Mr HAROLD

LIM LOUNG SHENG 1 AMBER GARDENS 439957 Singapore Document no. Document date Customer no. Customer GST-ID

01-04-2019 5211000859 196900406D 39999

Dealer Job order number Job order date

2019000014/ 1 01-04-2019

Service advisor

TIOW CHUAN CHEE

License plate
SLT8842L

Model code 5G1 First registration 11/15/2017

VIN WVWZZZAUZHW119266

Model Golf 7

Mileage 15,258

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
	LABOUR	3	pcs.	580.00	#1	1,740.00	1,861.80
	For Diagnostic and Programming B&P DIAG	1	pcs.	360.00	#1	360.00	385.20
	Harness Check and Short Circuit Check B&P MECH	1	pcs.	200.00	#1	200.00	214.00
	SPRAY PAINTING	3	pcs.	500.00	#1	1,500.00	1,605.00
	1 Set Sensor Brackets Pri	1	pcs.	19.87	#1	19.87	21.26
	Sensor Bracket	2	pcs.	13.21	#1	26.42	28.27
	Sensor Bracket	1	pcs.	13.21	#1	13.21	14.13
	Sensor Bracket	1	pcs.	13.21	#1	13.21	14.13
	2k-Plastic Adhesive	1	pcs.	74,29	#1	74.29	79.49
	Bonding Agent For Plastic	1	pcs.	56.90	#1	56.90	60.88
	Rear Diffusor Satin Black	1	pcs.	277.23	#1	277.23	296.64
	Rivet	4	pcs.	1.09	#1	4.36	4.67
	REAR BUMPER COVER	1	pcs.	1,080,14	#1	1,080.14	1,155.75

## Quotation valid till 04/08/2019

Tax Code	Labour	Material	GST%	GST	Total amount excl. GST	Total amount incl. GST
#1		5,365.63	7%	375.59	5,365.63	5,741.22
Total		5,365.63		375.59	5,365.63	5,741.22

-----VISIT OUR WEBSITE: aftersales.vw.com.sg (for online service appointments) and volkswagen.com.sg and www.skoda.com.sg (for additional services, products and promotions).-----

## 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 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.	to the state of th
	ACCIDENT STATEMENT
Date Of Report	02/02/2019 10:38
Date Of Accident	01/02/2019 14:05
Exact Location Of Accident	INTERSECTION OF MOUNTBATTEN AND TANJONG KATONG RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLT8842L
Insured/Policyholder	
Name Of Registered Owner	LIM LOUNG SHENG HAROLD
NRIC No	S7974155H
Email Address	HAROLD.L.S.LIM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98322853
Alternative Phone No	OTHERS-98322853
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	GOLF 1.4 TSI AT 5G13HZ HID SR
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 A 29050220 AVW

Cover Note Number

### **Driver**

Name of Driver MOON VIVIAN TAESUN

Passport No/FIN G5758198R Date Of Birth 01/12/1977 Occupation **INDOOR** Date Of Driving Pass 20/04/2018

**Driving Experience** 0 YEAR AND 9 MONTH

Gender **FEMALE** 

Mobile Number (LOCAL) +65-98322853

Fax Number

Contact Number OTHERS-98322853

EMail Address HAROLD.L.S.LIM@GMAIL.COM Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

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

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?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: NIL

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?

NO

If Yes, against whom?

**Circumstances of Accident** 

PLS REFER TO THE ATTACHED STATEMENT.

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

SMF9825S

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

HONG JING G1601840L

Contact Number

NRIC/Passport Number

93548940 / 98779521

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### 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.
- 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) 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 peckages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with 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.
- 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.
- (e) 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:

Ma Meer

5161942020

Reporting Centre Personnel's Signatur Name:

NRIC/FIN No.:

019
-
_
-
-
_
$\dashv$
$\dashv$
_
9825
342

Sketch Plan #3

Driver



# YOU ARE LICENSED TO DRIVE VEHICLES IN THE POLLOWING CLASSIES!

Meter cars without cutch pedals (Auto) with untailed wright >< 3000kg with >< 7 passengers, sectionarie of driver; and other motor venices without distin pedals

MP 428A

Licence No:GS758198.R

Oriver.





MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way #21-01 SGX Centre 2 Singapore 068807
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

# Certificate of Insurance

ORIGINAL

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 DRIVEEASY Comprehensive

Certificate No. A 29050220 AVW

Excess: SGD500

Windscreen Excess: SGD100

 Index Mark and Registration Number of Vehicle SLT8842L

2. Name of Policyholder

Lim Loung Sheng Harold

3. Effective Date of the Commencement of Insurance for the purposes of the Act 15/11/2018

4. Date of Expiry of Insurance

14/11/2019

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

Lim Loung Sheng Harold

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.

Signature / Date

25/10/2018

Counter-Signatory

Winner Consultancy Pte. Ltd.

MSIG Insurance (Singapore) Pte. Ltd. Approved Insurers

Amy Ler Senior Vice President, Agencies

This certificate is not valid unless it is signed for & on behalf of the Company and Counter-Signed by a duly authorised representative of the Counter-Signatory.