



Letter of Claims
Request of direct settlement.

We are submitting a claim on behalf of our customer Ong Guan Gan
NRIC S1522310C insured of vehicle SLK 84284 against
your insured vehicle number SKQ 1176U (AXA)
On the accident dated on 2/4/19 (ddmmyyyy) along
Kallang Leisure carpark

Dated this 2 (day) of 4 (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 - Preview

Page 1/2

Company
AXA Insurance Pte Ltd
8 SHENTON WAY
068811 Singapore

Customer data:
Mr
ONG
GUAN GAN
40 LICHU AVENUE
348814 Singapore

Document no.
Document date 02-04-2019
Customer no. 5211000859
Customer GST-ID 196900406D
Dealer 39999
Job order number 2019000068/ 1
Job order date 02-04-2019
Service Advisor SHU SHI TANG

License plate	Model code	First registration	VIN	Model	Mileage
SLK8428Y	5C73D7	31-01-2017	WVWZZZ16ZGM822821	NBC succ. 1.2DESIG 77 D7F	22,236

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
	Spray Paint	3	pcs.	500.00	#1	1,500.00	1,605.00
	Diagnostic and Programming	1	pcs.	360.00	#1	360.00	385.20
	B&P Mech	1	pcs.	200.00	#1	200.00	214.00
	Harness Check and Short Circuit Check						
	B&P Number Plate	1	pcs.	80.00	#1	80.00	85.60
5C5807417ADGRU	Cover For Bumper Primed	1	pcs.	1,453.78	#1	1,453.78	1,555.54
5C5807305	Bumper	1	pcs.	483.41	#1	483.41	517.25
	Reinforcement						
5C5807131	Bracket	1	pcs.	41.58	#1	41.58	44.49
	LHR bumper bracket						
5C5807132	Bracket	1	pcs.	41.58	#1	41.58	44.49
	RHR Bumper bracket						
5C5807861	Attachment Strip	1	pcs.	74.11	#1	74.11	79.30
	Rear bumper centre bracket						
5C5807185 9B9	Cap For Rear Diffuser Sat	1	pcs.	52.27	#1	52.27	55.93
5C5807521 9B9	Spoiler Satin Black	1	pcs.	225.12	#1	225.12	240.88
5C5919491	Sensor Bracket	2	pcs.	13.21	#1	26.42	28.27
5C5919491B	Sensor Bracket	1	pcs.	13.21	#1	13.21	14.13
5C5919491A	Sensor Bracket	1	pcs.	13.21	#1	13.21	14.13
D 180KU2A1	2k-Plastic Adhesive	1	pcs.	74.29	#1	74.29	79.49
D 822150A1	Bonding Agent For Plastic	1	pcs.	56.90	#1	56.90	60.88

Quotation valid till 09-04-2019

Tax Code	Labour	Material	GST %	GST	Total amount excl. GST	Total amount incl. GST
#1		6,435.88	7%	450.51	6,435.88	6,886.39
Total		6,435.88		450.51	6,435.88	6,886.39

Customer

Service Advisor

—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).—

VOLKSWAGEN CENTRE SINGAPORE

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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	02/04/2019 16:58
Date Of Accident	02/04/2019 16:40
Exact Location Of Accident	KALLANG LEISURE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK8428Y
Insured/Policyholder	
Name Of Registered Owner	ONG GUAN GAN
NRIC No	S1522310C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96395684
Alternative Phone No	OFFICE-96395684

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	BEETLE CABRIOLET 1.2 (A)
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 29113709 AV2
Cover Note Number	

Driver

Name of Driver	ONG GUAN GAN
NRIC No	S1522310C
Date Of Birth	11/11/1962
Occupation	INDOOR
Date Of Driving Pass	05/07/1983
Driving Experience	35 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96395684
Fax Number	
Contact Number	OFFICE-96395684
Email Address	NOEMAIL

Address	40 LICH I AVE
Postcode	348814
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	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 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

refer to 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	SKQ1126U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BARUN CHANDRAN
NRIC/Passport Number	S8168271B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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 packages); 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.
- (d) 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:

2/4/2019
4.53pm

Driver's Signature

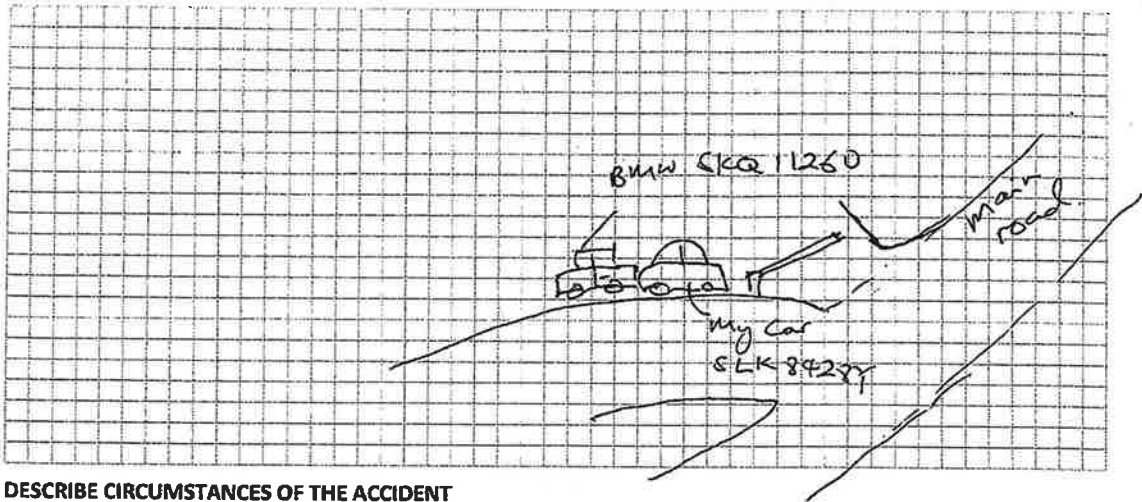
(If driver is not the policyholder)

Date & Time:



2/4/19

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As I was coming out from Kallang because carpark the white BMW car hit my rear of my car.
 The white BMW SKQ 11260, driver is Mr Barun Chandran S8168271B.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

2/4/2019
 4.53pm.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's signature

Name:

NRIC/FIN No.:



2/4/19.

Accident Sketch Plan

