



江氏修理汽車私人有限公司
KANG CAR REPAIRERS PTE LTD

1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883

TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg

Co. Reg. No. 201300201N GST Reg. No. 201300201N

Our Ref : KCR102019333AIG

Your Ref : SLX4597A

Date : - 5 JUN 2020

WITHOUT PREJUDICE

AIG Asia Pacific Insurance Pte Ltd

C/O LKK Auto Consultants Pte Ltd

51 Ubi Ave 1

#01-25 Paya Ubi Industrial Pk

Singapore 408933

Attention : Motor Claim Department

Dear Sirs,

Accident involving SKN3333R and SLX4597A on 05.10.2019 along Alexandra Rd inside Ikea carpark.

We refer to the above accident. On our record showed that you are the insurer of motor vehicle SLX4597A.

We are instructed that the accident was caused by your insured's negligent driving and/or management of his vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense.

On behalf of and as authorized by M/S DLF Pte Ltd, the owner of motor-vehicle no: SKN3333R, we submit their claim to you:

Cost of repairs (Inclusive of 7% GST)	\$ 3,638.00
Loss of use (2 days x \$180.00)	\$ 360.00
GIA search	\$ 2.00
	\$ 4,000.00
	=====

Enclosed herewith are copies of the following documents in support of our client's claim:

- 1) Tax invoice no: KCR-INV2000239
- 2) GIA report and certificate insurance of SKN3333R
- 3) GIA search fee & invoice
- \$) Police Report No:T/20191007/7020

We hope to receive your early reply soon.

Thank you.

Yours faithfully,

KANG CAR REPAIRERS PTE LTD

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江氏修理汽車私人有限公司

KANG CAR REPAIRERS PTE LTD

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TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg

Co. Reg. No. 201300201N GST Reg. No. 201300201N

M/S : AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY #07-16
AIG BUILDING, SINGAPORE 079120

TEL: 64193000 FAX: 68357416
ATTN: Motor Claim Department \ MS CINDY ONG
Your Ref No: SLX4597A
Claim Type: Third Party
Accident Date: 05/10/2019
TP Veh Reg No: SLX4597A

Final No: KCR-INV2000239
Claim No: EST1900347
Date: 05 Jun 2020
Policy No: A29083969 MCX
Veh Reg No: SKN3333R
Make/Model: BMW 528I A
Chassis No: WBAXG32040DX83161
Engine No: B3900316N20B20A
Reg. Date: 29/11/2013

Tax Invoice to Vehicle No :SKN3333R

PAGE:1

Description	Quantity	List Price	Amount
		S\$	S\$

As recommended by surveyor to proceed repair at total cost/lumpsum cost S\$ 3,400.00

Add GST @ 7% 238.00

Total Amount payable S\$ 3,638.00

TOTAL: SINGAPORE DOLLAR THREE THOUSAND SIX HUNDRED THIRTY EIGHT ONLY

For Kang Car Repairers Pte Ltd

E. & O. E.

AUTHORISED SIGNATURE

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	11/10/2019 10:33
Date Of Accident	05/10/2019 17:00
Exact Location Of Accident	AT ALEXANDRA ROAD INSIDE IKEA CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKN3333R
Insured/Policyholder	
Name Of Registered Owner	DLF PTE LTD
Co Reg No	200811634K
Email Address	IAMLANDISFAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97580333
Alternative Phone No	OFFICE-97580333

Vehicle Particulars

Manufacturer	BMW
Model	528I-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A29083969 MCX
Cover Note Number	29/05/2019 - 28/05/2020

Driver

Name of Driver	FAN WENDA, LANDIS
NRIC No	S8905640C
Date Of Birth	02/02/1989
Occupation	INDOOR
Date Of Driving Pass	19/02/2009
Driving Experience	10 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97580333
Fax Number	
Contact Number	
EMail Address	IAMLANDISFAN@GMAIL.COM

Address	73A SIGLAP ROAD
Postcode	S455879
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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 (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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT ATTACHED.

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 Witness 1

Name	JAGDIS
Phone Number	93631149
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLX4597A
Vehicle Make/Model/Colour	NA
Details Of Properties	NA
Vehicle Category	PRIVATE CAR
Name of Driver	NA
NRIC/Passport Number	
Contact Number	NA

Address	NA
	NA
Postcode	NA
Insurance Company Name	
Nature Of Damage	NA
No. Of Passenger (Including Driver)	

Accident Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

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2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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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. 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 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:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

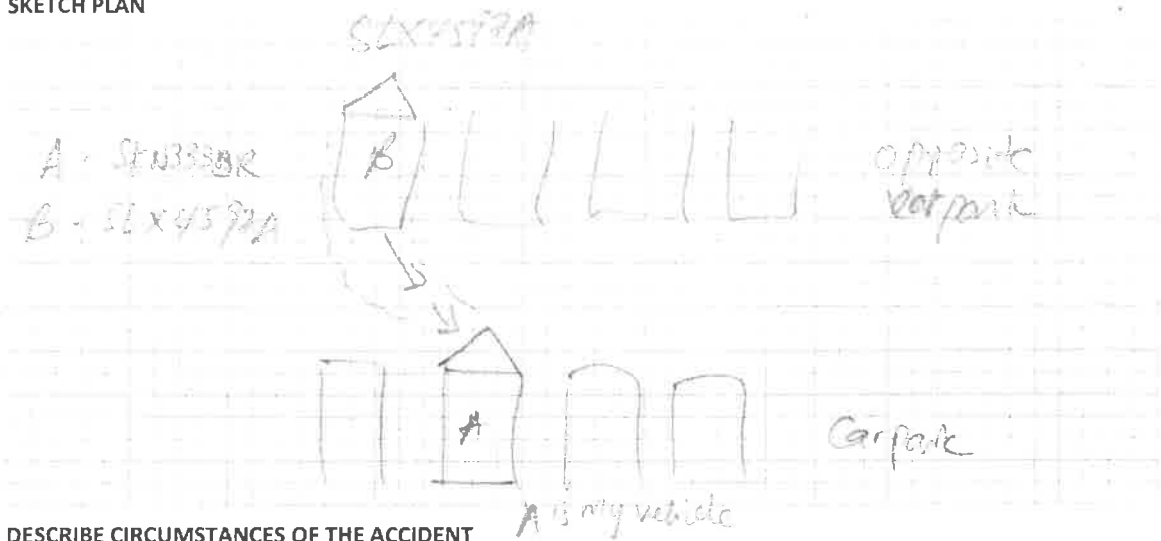
11/02/2019
10:10am



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

please refer to Police report- attached

Insurance Co.	MSIG
Vehicle No.	3333R
Date of Accident	05/10/2019
<input type="checkbox"/> Reporting Only <input type="checkbox"/> Own Damage Claim <input checked="" type="checkbox"/> Third Party Claim	

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:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20191007/7020

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No T/20191007/7020

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/10/2019 15:04		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: FAN WENDA, LANDIS			Address: 73A SIGLAP ROAD SINGAPORE 455879		
ID Type / ID No.: NRIC NO / S8905640C			Contact No.: Home/Office: Mobile: 97580333		
Nationality: SINGAPORE CITIZEN			Email: iamlandisfan@gmail.com		
Sex: Male	Age: 30	Date of Birth: 02/02/1989	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Training manager			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 05/10/2019 17:00	Type of Location: Car Park
Location: ALEXANDRA ROAD				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
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
SKN3333R	Car	BMW				0
SLX4597A	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20191007/7020

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20191007/7020

CONTINUATION OF REPORT

Vehicle Owner			
Name	FAN WENDA, LANDIS	ID No.	S8905640C
Related Vehicle	NIL	Contact No.	97580333
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I have a picture of an eye witness who left the note on my windscreen wiper.
This was inside Ikea Alexandra carpark at about 5pm on 5th October, I returned to my car with this note left on my car and multiple scratches and dents on my car.
A Volvo with SLX4597A had reversed into my car and went off pretending that the accident did not happen. Eye witness left his information on my car windscreen to testify with the police. Please find attached images for more confirmation.



**SINGAPORE
POLICE FORCE**



T/20191007/7020

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20191007/7020

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
TAN JEOK LENG
Contact No.: 65476144

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
07/10/2019 15:04

Classification Of Case:

Witness

Hi,

Saw Volvo SLX4597A
hit your left
bumper in front.

He is parked opp
you. I do not have
a camera in my car.

JAGDIS (93631149)



MSIG

MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

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.4
Company Ownership

MOTORMAX-COMMERCIAL
Comprehensive

Certificate No. A 29083969 MCX

Excess : SGD700

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle

SKN3333R

2. Name of Policyholder

DLF Pte Ltd

3. Effective Date of the Commencement of Insurance for the purposes of the Act

29/05/2019

4. Date of Expiry of Insurance

28/05/2020

5. Persons or Classes of Persons entitled to drive*

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 ANY MSIG
AUTHORISED WORKSHOP LISTED IN THE ATTACHED.**

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.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers


for Chief Executive Officer



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

Third Party Insurer Enquiry

Our Ref No: GR-19-167629

Date of Request: 11/10/2019

Your Ref No:

Online Purchase

Kang Car Repairers Pte Ltd
No 1 Kaki Bukit Ave 6
#02-06 AutoBay@Kaki Bukit
Singapore 417883

Dear Sir/Madam,

Enquiry Date 11/10/2019
Enquiry By Yee Mei Cheng
TP Vehicle No. SLX4597A
Accident Date 05/10/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLX4597A	AIG Asia Pacific Insurance Pte. Ltd.	28/03/2018-27/03/2020	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.

This is a computer generated document and requires no signature.



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-19-167629

Date of Request: 11/10/2019

Your Ref No:

Online Purchase

Kang Car Repairers Pte Ltd
No 1 Kaki Bukit Ave 6
#02-06 AutoBay@Kaki Bukit
Singapore 417883

Dear Sir/Madam,

Enquiry Date 11/10/2019
Enquiry By Yee Mei Cheng
TP Vehicle No. SLX4597A
Accident Date 05/10/2019

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