# MG SOLUTION PTE LTD



23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #02-03 Singapore 415933
Tel: 6243 1373 Fax: 6243 1376
(GST Reg. No. 201427944N)

Date

: 09/04/2020

Your Ref

: CC4/FWD20000237/Apa3 (SLR3223S)

To

: FWD INSURANCE PTE LTD

Attn

: Motor Claims Department

Dear Sir/Mdm,

RE: ACCIDENT INVOLVING VEHICLE SJG8818A & SLR3223S ON 30/12/2019 AT ALONG SIMS WAY BEFORE JUNCTION OF GEYLANG ROAD.

We refer to the above matter.

Attached copies of the following for your kind perusal:

- 1) Proforma Bill No.208088 @ S\$14,659.00 (Inclusive Of 7% GST)
- 2) Loss of Use @ S\$2,400.00 (12 Days x S\$200)
- 3) LTA Search @ \$\$7.45
- 4) Authorisation to Act
- 5) GIA Report

Hope the above is in order and kindly let us have your confirmation soon.

Tax invoice will be issue upon amount finalized.

Thank You.

Yours faithfully,



Sharon Chia

HP: 9188 6931

E-mail: mg3solution@gmail.com

# MG SOLUTION PTE LTD



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Tel: 6243 1373 Fax: 6243 1376
(GST Reg. No. 20-1427944-N)

# **PROFORMA BILL**

Bill To:

**FWD INSURANCE PTE LTD** 

6 TEMASEK BOULEVARD #18-01 SUNTEC TOWER FOUR SINGAPORE 038986 Bill No: 208088

Date: 09-April-2020

Vehicle Number: SJG 8818A

ATTN: MOTOR CLAIMS DEPARTMENT

QTY		AMOUNT	
1	To carried out accident repair as per surveyor's recommendation (Lump Sum)	\$ 13,700.00	
	BEFORE GST 7% GST TOTAL	13,700.00 959.00 \$ 14,659.00	

Tax Invoice will be issue upon amount finalised.

Please note that our above offer and any settlement arising from the above offer are made on a without prejudice basis with sole intention of resolving the matter amicably without parties resorting to legal proceeding. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. No reference shall be made to this offer or any settlement arising from this offer in any other related matters.

Co's stamp & Authorised Signature

# MG SOLUTION PTE LTD

23 Kaki Bukit Ave 4 (South Wing) #02-03B Vicom Inspection Centre, Singapore 415933 Tel: 6243 1373 Fax: 6243 1376 GST Reg. No.: 201427944N

# MOTOR CLAIM DISCHARGE

INSURED: Teo Gek Hong
CAR/ LORRY/CYCLE: REG NO: SJG 8818A POLICY NO:
ACCIDENT CLAIM NO:
I / We confirm that I / we have taken delivery of Car / Lorry / Motor Cycle  Registered No. SJG 8818 A
And that all repairs necessary as a result of an accident in which the said vehicle was involved on or
about the36 day of
I / we have no further claim on the above company in Respect thereof.
Date:
Co's Stamp:
31/12/2019 - PRI 01/01/2020 - Public Holiday Vehicle Out - 11/01/2020 02/01/2020 - PRI 05/01/2020 - Sunday = # 2,400



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

30 Dec 2019 / 14:54:33

Receipt Date/Time:

30 Dec 2019 / 14:54:32

Tax Invoice/Receipt

Receipt No.: ITNET-00000-191230-002202

Previous Receipt No.:

review recomperso.				
S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SLR3223S As at 30 Dec 2019/13:00:00 Insurance Co: FWD SINGAPORE PTE. LTD.  1 Insurance Enquiry - SLR3223S Enquiry Fee		7.00	0.49	7.49
20191230145349533591				
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	20191230145356153 <sup>Di</sup>	rect Debit: eN (Internet Ba	ETS Debit anking)	7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

### THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

## LETTER OF AUTHORITY

Name : TEO GEK HONG	n
Address : 78 UPPER PA	YA LEBAR ROAD
SINGAPORE 534	F384
Contact No :	
TO: FWD SINGAPORE PTE	L7D
Dear Sirs,	
ACCIDENT INVOLVING STA 8818	A AND SLR 32235 ON 30/12/2019
AT/ALONG_SIMS WAY BEFORE	JUNITION OF GEYLAND ROAD
1/WE, TEO GEK HONG	, am/are the registered owner of
motor car no. SJG 8818A	
Please note that I have assigned all comp to M/S MG SOLUTION PTE LTD.	pensations monies due to me/us in the above said accident
!/We, hereby authorize you to release all	compensation monies pertaining to the above-mentioned
accident to M/S MG SOLUTION PTELTD a	and forward your settlement cheque to M/S MG SOLUTION
PTE LTD whom I had authorized to collect	t the said compensation monies.
Thankyou	
11100007	1
Les .	
Signature of Claimant	Witness By

## 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.	areasy consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	30/12/2019 17:47
Date Of Accident	30/12/2019 13:00
Exact Location Of Accident	SIMS WAYS BEFORE JUNC OF GEYLANG ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJG8818A
Insured/Policyholder	
Name Of Registered Owner	TEO GEK HONG
NRIC No	SXXXX769E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97827592
Alternative Phone No	OTHERS-97827592
Vehicle Particulars	
Manufacturer	AUDI
Model	A3 SEDAN 1.0 TFSI S TRONIC (LED)
	(4) (7)

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

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 80460818 QMY

Cover Note Number

Driver

Name of Driver WEE HUI CHING NRIC No SXXXX605F Date Of Birth 22/07/1988 Occupation INDOOR Date Of Driving Pass 23/04/2007

Driving Experience 12 YEARS AND 8 MONTHS

Gender

**FEMALE** 

Mobile Number

(LOCAL) +65-97777592

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

218 UPPER PAYA LEBAR ROAD

Postcode

534884

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

## General Information of the Accident

Type Of Accident

SIDE SWIPE

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?

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 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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

VOLKSWAGEN / SHARAN 2.0 TSI 7N24MY

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)

## **DETAILS OF INJURED PERSON 1**

Name

WEE HUI CHING

#### Accident Sketch Plan

#### SHETCH PLAN

# TOTTON THAT NOTICE

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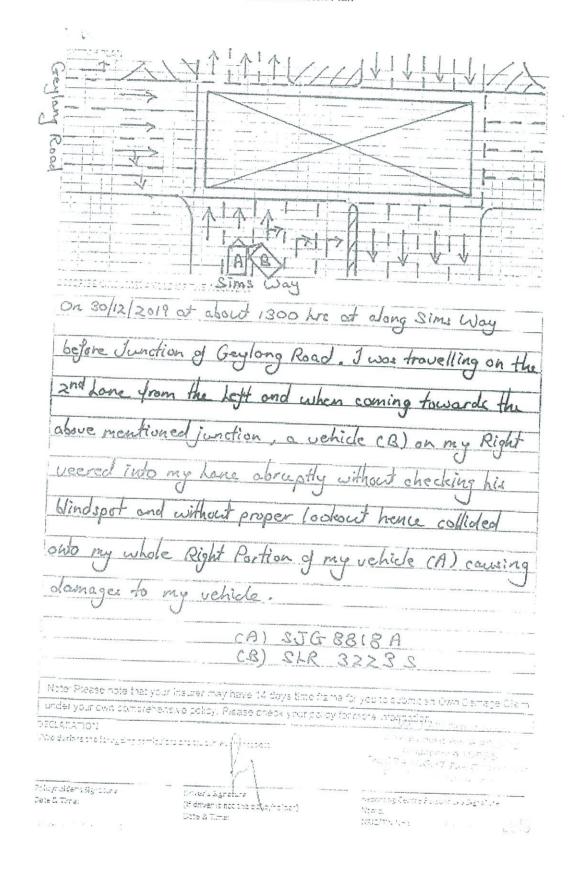
- 1. Please repent Intestly the same of the same of the speed up the claims process
- is the form on the comparished by the Podercolder and for the Authorised Oriver.
- Information to exceed must be as trustical and accurate as possible. Any wifur missepresentation or within air got material trust may allow on again componers to requireste policy liability.
- 4. The case and acceptance of this form by congruence compactational on admission of polity with the perceptive insurance management.
- Confess reporting may be referred to the Police for investigation.
- The expect will be forwarded by the incurers of the C.A. Records Management Central extablished by the General insurance
  association of Singapore (SIA) for archiving and that copies of this report will for a fee be made available upon popt suitor by
  interested parties.
- By the lodgment of this report to the insurers, you're read to the crobbang of this report of the centre one to capus:
- Consent under the Personal Data Protection Act (PDRA)
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  - (f) processing, handling and/or dealing with my claims including the semionism of the Liu maked now recovery investigations reforms to the damest
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  - (iii) serrying out and/or diraking with my instructions of responding to only enquires by one,
  - (b) exterious terms musicions producting the mailing of correspondence, statements, invoices, records or not see to me, which could involve discussive of certain personal data changene to being about datasety of the correct and it, porther sector of envelopes fined pockages is safer.
  - (v) compliants with applicated law in estimated agricultures, no acting and, or deel agreed by the medical engine a "Purposes")
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\$505 to: 30 DEC 2019







Report No. T/20200108/7009

1 of 3

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

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/01/2020 11:40			Vide Report No.:	Station Diary No.:		
Informan	t's Partic	ulars				
Name of I WEE HUI			Address: 218 UPPER PAYA LEBAR ROAD SINGAPORE 534884			
ID Type/ID No.: NRIC NO/S8826605F			Contact No.: Home/Office:	Mobile: 97777592		
Nationality: SINGAPORE CITIZEN			Email: w.huiching@gmail.com			
Sex: Age: Date of Birth: 22/07/1988			Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: Corporate Services Manager			Driving Licence Information: Class:	Date of Expiry:		

General Infor	mation of the Accid	lent research description	STOMAN SECURE CARROLL	Signatura and a second	
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 30/12/2019 13:00	Type of Location:	
Location:			130/12/2019 13:00		
SIMS WAY B	EFORE GEYLANG F	ROAD			
Olivio	I ONE OLILANOI	TOAD			
Weather:		Road Surface:			
Clear		Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control:			
Two Way		Traffic Light - Work	rina	Traffic Volume:	
Type of Collisi	on:			Moderate	
Between Movi	ng Vehicles - Side St	vipe - Same Direction		Anyone conveyed by ambulance: No	

ehicle No.	Туре	Make	Model	Color	Condition	I
JG8818A	Car			00101	Condition	No of Passenge
						0
LR3223S	Car					

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





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

2 of 3 Report No. T/20200108/7009

## CONTINUATION OF REPORT

Driver			a de la companya de	0.494 Not 14.54 No. 2 No
Name	WEE HUI CHING		ID No.	S8826605F
Related Vehicle	SJG8818A (Car)		Contact No.	97777592
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	narge   NIL	
No. of Days grant	ed Medical Leave   03	Degree of	0	

## Brief Details.

On 30/12/2019 at about 1300hrs at along Sims Way before Junction of Geylang Road. I was travelling on the 2nd lane from the left and when coming towards the above mentioned junction, a vehicle (B) on my right veered into my lane abruptly without checking his blindspot and without proper lookout hence collided onto my whole right portion of my vehicle (A) causing damages to my vehicle. I have 3 days MC.

Vehicle A: SJG8818A Vehicle B: SLR3223S





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

3 of 3 Report No. T/20200108/7009

### CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch plan

NP168

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 08/01/2020 11:40
Officer In Charge Of Case: TP / TPHQ / WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp	