



Letter of Claims Request for direct settlement.

We are submitting a claim on behalf of our customer Ng Wee chin Raymond
NRIC SXXXX 566F insured of vehicle SKS 5030A against
your insured vehicle number SKS1434U. (AlG)
On the accident dated on 26/3/2020 (ddmmyyyy) along Yishun Ring Road & Yishun Ave 2.

Dated this 26 (day) of 3 (month) 2020.

Charmaine Kong
Volkswagen Group Singapore
Accident Claims Dept.
charmaine.kong@vw.com.sg
DID : 63057176/ 63057299
HP: 92361399

ŠKODA Centre Singapore

26 Leng Kee Rd
Singapore 159104
Biz. Reg. No.: 199101494Z
GST No.: M200985052



Quotation Non binding - Preview

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Company
AIG ASIA PACIFIC INSURANCE P/L
78 Shenton Way
#07-16 AIG Building
Singapore 079120

Customer Details:
Mr
NG
WEE CHIN RAYMOND
(HUANG WEIJIN RAYMOND)
BLK 552 YISHUN AVE 6
#11-08
SINGAPORE 768962

Document no.
Document date 26-03-2020
Customer no. 5211043795
Customer GST-ID 201009404M
Dealer 39999
Job order number 2020000849/ 1
Job order date 26-03-2020
Service Advisor SHU SHI TANG

License plate	Model code	First registration	VIN	Model	Mileage
SKS5030A	NU74NDS0	26-04-2019	TMBKR7NU8K5032414	Karoq Style 1.5 I TSI 110kW DSG	969

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
	Check Short Circuit / Harness Repair	1	pcs.	280.00	#1	280.00	299.60
	Diagnostic and Programming	1	pcs.	480.00	#1	480.00	513.60
57A807521 9B9	Cover For	1	pcs.	1,180.00	#1	1,180.00	1,262.60
	REAR BUMPER UPPER						
57A807835 2ZN	Cover For	1	pcs.	627.00	#1	627.00	670.89
	REAR BUMPER LOWER						
57A807441B 2ZN	Cover For	1	pcs.	21.90	#1	21.90	23.43
	TOWING COVER						
57A807377	Guide Piec	1	pcs.	368.00	#1	368.00	393.76
	LHR BUMPER BRACKET UPPER						
57A807378	Guide Piec	1	pcs.	368.00	#1	368.00	393.76
	RHR BUMPER BRACKET UPPER						
57A807863	Attachment	1	pcs.	56.00	#1	56.00	59.92
	REAR BUMPER CENTRE BRACKET						
575807305B	Unbekannt	1	pcs.	529.95	#1	529.95	567.05
	REINFORCEMENT						
57A919485C	Sensor Bra	1	pcs.	55.40	#1	55.40	59.28
57A919485B	Sensor Bra	1	pcs.	55.40	#1	55.40	59.28
57A919486B	Sensor Bra	1	pcs.	39.60	#1	39.60	42.37
57A919486C	Sensor Bra	1	pcs.	39.60	#1	39.60	42.37
D 180KU2A1	2k-Plastic Adhesive	1	pcs.	75.94	#1	75.94	81.26
D 822150A1	Bonding Agent For Plastic	1	pcs.	59.40	#1	59.40	63.56
57A827023A	LID	1	pcs.	1,803.12	#1	1,803.12	1,929.34
57A853621A	SKODA Emblem	1	pcs.	51.50	#1	51.50	55.11
575827705A 9B9	Unbekannt	1	pcs.	102.79	#1	102.79	109.99
	LID SEAL						
5JA853687 2ZZ	Inscriptio	1	pcs.	72.80	#1	72.80	77.90
	SKODA EMBLEM						
57A853687A 2ZZ	Lettering	1	pcs.	83.30	#1	83.30	89.13
	KAROQ EMBLEM						
5F0945097H	Unbekannt	1	pcs.	139.01	#1	139.01	148.74
	3RD BRAKE LIGHT						
D 169300M2	1k Window Adhesive	2	pcs.	49.51	#1	99.02	105.95
D 00940104	All Purpose Cleaner	1	pcs.	89.22	#1	89.22	95.47
D 00920002	Primer	1	pcs.	25.74	#1	25.74	27.54
D 00950025	Applicator	2	pcs.	9.39	#1	18.78	20.09
D 181802M1	Activator For Precoated W	1	pcs.	23.77	#1	23.77	25.43
57A807393	Guide Piec	1	pcs.	332.00	#1	332.00	355.24
	BUMPER SIDE BRACKET LH						
57A807394	Guide Piec	1	pcs.	332.00	#1	332.00	355.24
	BUMPER SIDE BRACKET RH						
WHT007341	Rivetted Cap Nut	2	pcs.	1.97	#1	3.94	4.22
	TFR BOOT LID MECH	1	pcs.	840.00	#1	840.00	898.80
	R&R REAR WSCREEN	1	pcs.	840.00	#1	840.00	898.80
	WATER LEAK TEST	1	pcs.	150.00	#1	150.00	160.50
	LABOUR	5	pcs.	840.00	#1	4,200.00	4,494.00
	Spray Painting	5	pcs.	800.00	#1	4,000.00	4,280.00

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SKS5030A	NU74NDS0	26-04-2019	TMBKR7NU8K5032414	Karoq Style 1.5 I TSI 110kW DSG	969

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
	AIG DIRECT SETTLEMENT DOA: 26/03/2020 TP VEH: SKS1434U SURVEY BY:						

Quotation valid till 02-04-2020

Tax Code	Labour	Material	GST %	GST	Total amount excl. GST	Total amount incl. GST
#1	760.00	16,683.18	7%	1,221.02	17,443.18	18,664.20
Total	760.00	16,683.18		1,221.02	17,443.18	18,664.20

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).-----

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	26/03/2020 11:54
Date Of Accident	26/03/2020 09:30
Exact Location Of Accident	YISHUN RING ROAD & YISHUN AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS5030A
Insured/Policyholder	
Name Of Registered Owner	NG WEE CHIN RAYMOND
NRIC No	SXXXX566F
Email Address	NGRAYMOND30@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-91060313
Alternative Phone No	OFFICE-91060313

Vehicle Particulars

Manufacturer	SKODA
Model	KAROQ STYLE 1.5 L TSI 110KW 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	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ19-003031
Cover Note Number	

Driver

Name of Driver	NG WEE CHIN RAYMOND
NRIC No	SXXXX566F
Date Of Birth	20/12/1974
Occupation	INDOOR
Date Of Driving Pass	24/01/2007
Driving Experience	13 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91060313
Fax Number	
Contact Number	OFFICE-91060313
EMail Address	NGRAYMOND30@SINGNET.COM.SG

Address	BLK 552 YISHUN AVE 6 #11-08
Postcode	768962
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	SKS1434U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ET KOH
NRIC/Passport Number	
Contact Number	93841591
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.
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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.

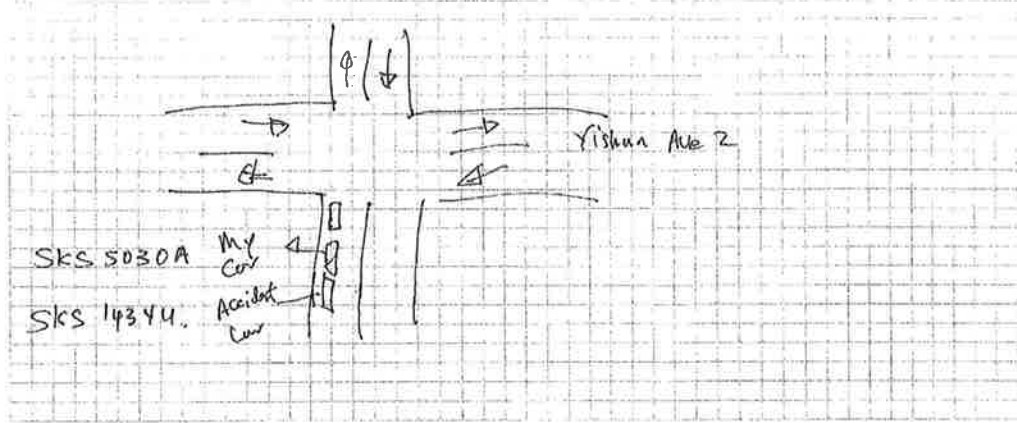

Policyholder's Signature
Date & Time:

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


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

Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


My car was stationary at red light. There was a car in front of me and waiting for traffic light to turn green for a left turn (its a left turn only lane).

Suddenly the car behind me (SKS 14344) knock my car from behind.

Accident happen around 9.30 am on 26 march 2020.

DECLARATION

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: 81030002