

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	07/09/2020 15:54
Date Of Accident	04/09/2020 10:20
Exact Location Of Accident	ALONG QUEENSWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG1001L
Insured/Policyholder	
Name Of Registered Owner	TAN SUAN PEOW
NRIC No	SXXXX941J
Email Address	GARYTANSP@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97461001
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180-1.6 (A)

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? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2017-00008210-02
Cover Note Number	

Driver

Name of Driver	CHERYL LEE
NRIC No	TXXXX052F
Date Of Birth	06/02/2000
Occupation	INDOOR
Date Of Driving Pass	29/07/2020
Driving Experience	0 YEAR AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-96848089
Fax Number	
Contact Number	
EEmail Address	CHERYLLEE0602@GMAIL.COM

Address	BLK 31 HOLLAND CLOSE #10-237
Postcode	270031
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	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)	2
Passenger 1	NAME: : YEO ZHI YU JOEL
	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

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC284L
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	SOH KWEE SENG
NRIC/Passport Number	SXXXX946H
Contact Number	9386 7395
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

VEHICLE NO: SLG1001L
ACCIDENT DATE: 4th Sep 2020


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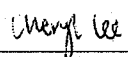
8. Consent under the Personal Data Protection Act (PDPA)

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.

NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.

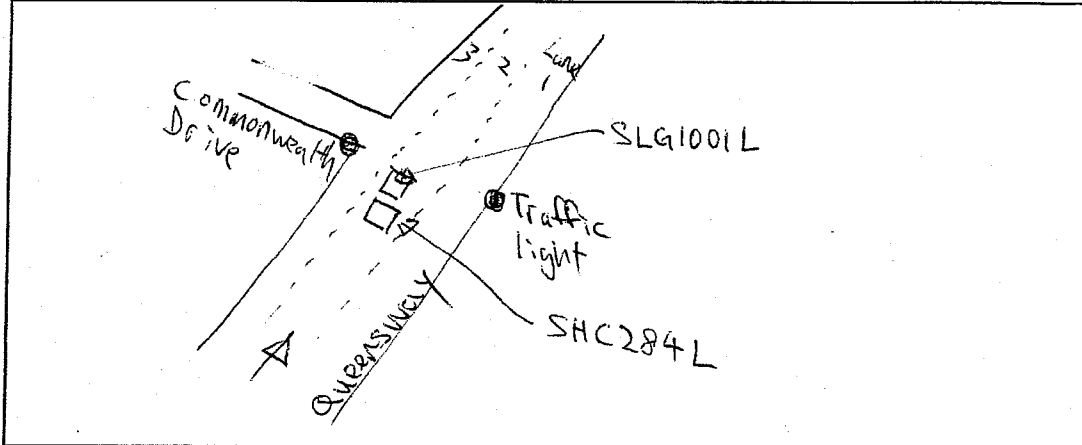

Policyholder's Signature
Date & Time: 5 Sep 2020
1300 pm


Driver's Signature
(If driver is not the policyholder)
Date & Time: 5 Sep 2020
2015 pm

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The incident occurred just before the intersection of Commonwealth Drive and Queensway.

I was driving along Queensway in the second lane (middle lane). I had applied brakes to stop at the junction as the traffic light had turned amber. The taxi (SHC284L) was originally on the third lane (left lane) before he filtered to the second lane and rear-ended my vehicle.

OWN DAMAGE () 3RD PARTY CLAIM (✓) REPORTING ONLY () OWN WORKSHOP ()

DECLARATION

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

Policyholder's Signature
Date & Time: 5 Sept 2020
1300pm

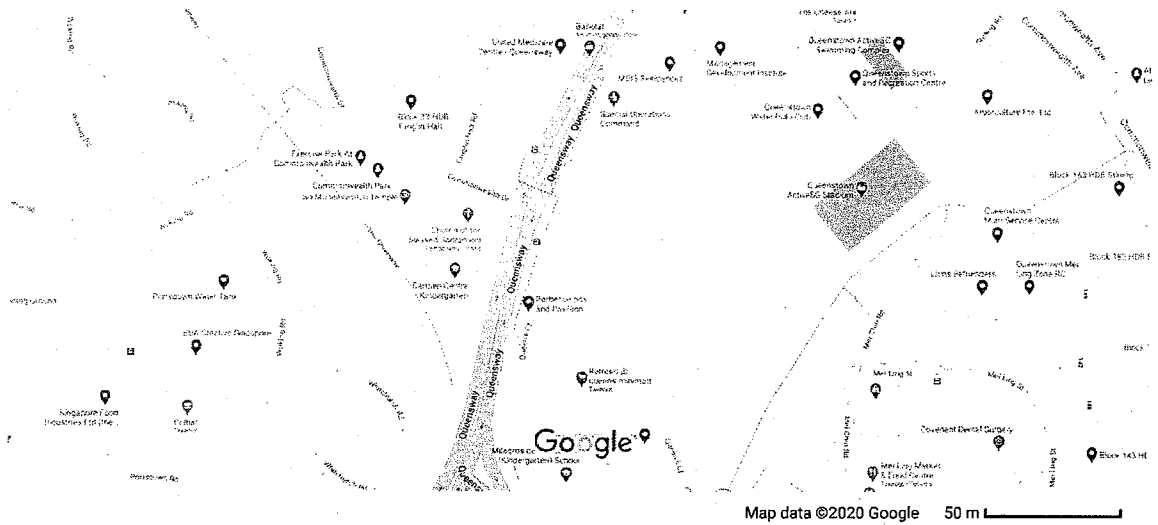
Cheryl Lee
Driver's Signature
(If driver is not the policyholder)
Date & Time: 5 Sept 2020
2015pm

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

Accident Sketch Plan Pg. 1

9/7/2020

Google Maps





Mercedes-Benz

Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

ESTIMATE FOR SLG1001L

MS FIRST CAPITAL INSURANCE LIMITED

MOTOR CLAIM DEPARTMENT
36 ROBINSON ROAD #16-01
CITY HOUSE
SINGAPORE 068877
65073848

Vehicle & Document Information

WIP No **44921**
Reg No/Reg Date **SLG1001L / 20/10/2016**
Date In/Mileage **0**
Chassis No **WDD2053402F363274**
Engine No **27491030647613**
Make/Model **MB/MB C 180 COUPE (C205)**
Colour/Trim **027 799 Diamond Whi/ 041 101 ARTICO Blac**

Account No	Terms	Date/Time Printed	CSE	Operator
WF001862	Credit	15/09/2020/ 10:07	CH	371 / Go Chee Han

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
Z REQUEST Customer Request M BPNSUN POLICY NO/ACC DATE : PNPV2017-00008210-02 // 4-9-2020 DRIVE IN/TP VEH NUMBER : 14-9-2020 // SHC284L - FIRST CAPITAL DATE IN/DATE SURVEY: DIRECT SETTLEMENT BY:				
A BPILAB STRAIGHTEN, REMOVE SUPPORT ASSY FROM FRAME IMPACT DISASSEMBLE AND REPLACE ATTACHED DAMAGED PARTS & REFINISH.				5760.00
A BPIRES RESPRAY REAR BUMPER & TRUNK LID & END PANEL				3000.00
A BPILAB USING XENTRY DIAGNOSTIC TO CHECK ON CONTROL UNIT RESET MEMORY TO IDENTIFICATION STANDARD. NETT			0.10	380.00
A BPILAB CHECK REAR LIGHTING SYSTEM AND WATER TEST FOR ANY LEAKAGE. NETT				120.00
A 54124001 PARTIALLY REMOVE FUSE AND RELAY MODULE IN REAR WELL COMPARTMENT FOR NECESSARY AND INSTALL.NETT				480.00
A BPILAB PLACE VEHICLE ON-TO CELLETTE BENCH & CONDUCT CHASSIS ALIGNMENT. NETT			0.07	1000.00
A BPILAB TRANSFER TRUNK LID MECHANICAL & ELETRICAL COMPONENT TO NEW TRUNK LID. NETT				480.00
S BPNSUB SUPPLY 1 SET REAR NUMBER PLATE WITH HOUSING.NETT				60.00
A BPILAB REMOVE & REFIT LUGGAGE COMPARTMENT,TRIM, GARNISH- CARPET FOR NECESSARY REPAIR.NETT				960.00
A BPILAB REMOVE CARRIAGE ASSY FROM FRAME, IMPACT.REPLACE AND ASSEMBLE WHEEL BASE & ADJUST TO VEHICLE.				2160.00

Confirmed & accepted by

Authorized signatory and company stamp

Go Chee Han

DID : 6771 4336 HP : 9181 7717

Email : cheehan.go@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.

Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



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Pandan Loop Service Center
188 Pandan Loop
Singapore 128378
Tel: 6777 8388
Fax: 6779 5383
www.mercedes-benz.com.sg



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MOTOR CLAIM DEPARTMENT
36 ROBINSON ROAD #16-01
CITY HOUSE
SINGAPORE 068877
65073848

Vehicle & Document Information

WIP No **44921**
Reg No/Reg Date **SLG1001L / 20/10/2016**
Date In/Mileage **/ 0**
Chassis No **WDD2053402F363274**
Engine No **27491030647613**
Make/Model **MB/MB C 180 COUPE (C205)**
Colour/Trim **027 799 Diamond Whi/ 041 101 ARTICO Blac**

Account No	Terms	Date/Time Printed	CSE	Operator	Description of Goods / Services	Qty	Unit Price	Disc%	Amount
WF001862	Credit	15/09/2020/ 10:07	CH	371 / Go Chee Han					
A BPILAB									
TO INSPECT & CONDUCT WHEEL ALIGNMENT.NET									
M					REAR BUMPER	1.00	1457.45	00.00	1457.45
M					LOWER BLACK TRIM BUMPER	1.00	349.10	00.00	349.10
M					REAR BUMPER CHROME MOULDING	1.00	264.29	00.00	264.29
M					LH/TAI PIPE BRACKET	1.00	89.59	00.00	89.59
M					REAR SWITCH MODULE CODE A	1.00	126.22	00.00	126.22
M					REAR SWITCHING MODULE CODE B	1.00	126.22	00.00	126.22
M					REAR SWITCHING MODULE	1.00	318.51	00.00	318.51
M					REAR SWITCHING MODULE BRACKET	1.00	43.07	00.00	43.07
M					ELECTRICAL WIRING HARNESS	1.00	153.05	00.00	153.05
M					LEFT REFLECTOR LENSE	1.00	29.00	00.00	29.00
M					RIGHT REFLECTOR LENSE	1.00	29.00	00.00	29.00
M					CTR/LOWER COVER BUMPER AREA	1.00	108.57	00.00	108.57
M					LH/BOTTOM BRACKET	1.00	37.82	00.00	37.82
M					RH/BOTTOM BRACKET	1.00	38.23	00.00	38.23
M					LH/DAMPING, SIDE WALL	1.00	27.08	00.00	27.08
M					RH/DAMPING, SIDE WALL	1.00	24.16	00.00	24.16
M					RIVET FOR BUMPER	10.00	4.59	00.00	45.90
M					DISTANCE SENSOR	4.00	178.75	00.00	715.00
M					SPACER RING	6.00	6.35	00.00	38.10
M					TRUNK LID	1.00	2273.75	00.00	2273.75
M					BOTTOM RETAINER WEDGE	2.00	26.83	00.00	53.66
M					TOP SPRING DAMPER	2.00	10.15	00.00	20.30
M					TRUNK LID SEALING FRAME	1.00	197.91	00.00	197.91
M					LH/TRUNK LID HINGE	1.00	268.75	00.00	268.75
M					RH/TRUNK LID HINGE	1.00	268.75	00.00	268.75
M					C180 MODEL PLATE	1.00	91.04	00.00	91.04
M					TRUNK LID MERCEDES STAR	1.00	95.12	00.00	95.12
M					GROMMET	3.00	2.61	00.00	7.83
M					TRIM, TRUNK SILL	1.00	144.66	00.00	144.66
M					REAR CROSS MEMBER	1.00	712.25	00.00	712.25
M					RH/LOWER COVER, REAR-END FLOOR	1.00	50.95	00.00	50.95

Confirmed & accepted by

Go Chee Han

DID : 6771 4336 HP : 9181 7717

Email : cheehan.go@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop

Authorized signatory and company stamp

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Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M SPARE WHEEL RECESS	1.00	562.25	00.00	562.25
M WATER DRAIN GROMMET	1.00	5.25	00.00	5.25
M EXPANSION RIVET	8.00	5.87	00.00	46.96
M REAR END PANEL	1.00	1166.28	00.00	1166.28
M BLIND RIVET 6.4 X 12	14.00	1.35	00.00	18.90
M BLIND RIVET W CSK. HEAD	6.00	1.95	00.00	11.70
M ONE-COMPONENT ADHESIVE	1.00	156.83	00.00	156.83
M TS TWO-COMPONENT ADHESIVE	1.00	776.81	00.00	776.81
M TWO-COMPONENT ADHESIVE	1.00	102.00	00.00	102.00
M WHITE SEAM SEALING COMPOUND	1.00	104.99	00.00	104.99
M LICENSE PLATE LAMP	2.00	27.46	00.00	54.92
M LH/REAR SHIELDING	1.00	164.36	00.00	164.36

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Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop

Confirmed & accepted by

Nett 26,316.58
7% GST on 26316.58 1842.16

Authorized signatory and company stamp

Total Payable 28,158.74

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