ale/Time, File Pass to? : Preli. Report : Final Report	Days Of Repair:  Resurvey No. of Trip:	Survey Fee:
lep format ; ump Sum / LBJ: (%	Add Fee: : Site Insp (\$ : Interview (\$ : Tech. Invs (\$ : Weellend (\$	Transportation:
		TOTAL

# **VOLKSWAGEN CENTRE SINGAPORE**

247 Alexandra Road Singapore 159934 Biz, Reg. No.: 199101494Z GST No.: M200985052







# Quotation

Non binding - Preview

Company

FIRSTCAPITAL INSURANCE **6 RAFFKES QUAY** 

#21-00

Singapore 048580

**Customer Details:** 

Mr WEE

**HUNG JING** 

(HUANG HONGJING)

236A SERANGOON AVENUE 2

#11-149

SINGAPORE 551236

Page

Document no.

Document date Customer no.

Customer GST-ID

Dealer

Job order number

Job order date Service Advisor 195000106C 30001

1/2

2020035991/1

28-12-2020

5211041856

28-12-2020

**TIOW CHUAN CHEE** 

License plate SMM4033G

Model code **BQ14HZH0** 

First registration

27-06-2019

WVWZZZAUZKW022383

Model

Golf Highline 1.4 I TSI 92kW DSG

Mileage

11,176

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
TO THE RESIDENCE OF THE PARTY O	Diagnostic and Programming	**************************************	pcs.	480.00	#1	480.00	513.60
	Check Short Circuit / Harness Repair	1	pcs.	280.00	#1	280.00	299.60
5G6807417BQGRU	Cover For Bumper Primed REAR BUMPER	. 1	pcs.	1,165.55 de 1	#1	1,165.55	1,247.14
5G6807568S 9B9	Rear Diffusor Satin Black	1	pcs.	315.27	#1	315.27	337.34
5G0807305D	Bumper REINFORCEMENT	1	pcs.	619.617	#1	619.61	662.98
5G6807863C	Attachment Strip RR CTR BRACKET	1	pcs.	64.97 <b>/بلر</b>	#1	64.97	69.52
5G6807393A	Guide Piece LHR TAILLIGHT BRACKET	1	pcs.	37.46 ?	#1	37.46	40.08
5G6807393	Guide Piece LHR SIDE BRACKET	1	pcs.	37.46 ?	#1	37.46	40.08
5G0919491D	Sensor Bracket	1	pcs.	12.13 7	_ #1	12.13	12.98
5G0919491E	Sensor Bracket	1	pcs.	12.13 AC	<b>/</b> #1	12.13	12.98
5G0919492D	Sensor Bracket	1	pcs.	12.60	#1	12.60	13.48
5G0919491D	Sensor Bracket	1	pcs.	لر12.13	#1	12.13	12.98
D 180KU2A1	2k-Plastic Adhesive	1	pcs.	75.94 NM	#1	75.94	81.26
D 822150A1	Bonding Agent For Plastic	1	pcs.	∕ بھی 59.40	#1	59.40	63.56
5G0945105C	Reflector LHR	1	pcs.	71.19	#1	71.19	76.17
	LABOUR	3	pcs.	840.00	#1 8	HO 2.520.00	2,696,40
	Spray Painting MS FIRST CAPITAL DIRECT	3	pcs.	800.00	#1 8	2,320.00	2,568.00
SETTL	SETTLEMENT DOA: 27/12/2020	Tauft	n 99	2412749	P	IR 225/	yokis
	TP VEH : SHA4247D SURVEY BY :	'up'	5/1	21 @ 1015  Resumy L			
		02d	w	Resumy b	refore a	mut	

Quotation valid till 04-01-2021

Customer

Tax Labour Material Code 760.00 7,415.84

760.00

700

572.31

Total amount incl. GST

excl. GST 8,175.84

Total amount

8,748.15

LKK Auto Consultants hence notify

the Repairer of the following:

 To resurvey before/after spray painting To esplay damaged part(s) during resurvey

Parts prices are subject to confirmation

• This; part, survey is on a "Without Prejudice" basis

• No du gar or igit cation(s) is allowed

and oust be resurveyed and 15 Suggest 1 proval from Insurance Company

Acknowledged by Repairer

0...

Service Advisor

# **VOLKSWAGEN CENTRE SINGAPORE**

247 Alexandra Road Singapore 159934

Biz. Reg. No.: 199101494Z GST No.: M200985052







## Quotation

Non binding - Preview

Page

2/2

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License plate SMM4033G

Model code BQ14HZH0 First registration 27-06-2019

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Model

Golf Highline 1.4 I TSI 92kW DSG

Mileage 11,176

-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).-

SV0N20CS0003 / Volkswagen Group Singapore Pte Ltd ENTRY DATE & TIME: 28/12/2020 14:29 (SGT) SUBMITTED BY: Steven Chee VERSION: 1 (28/12/2020 14:29 (SGT))



#### 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
- 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 Submission 28/12/2020 14:29 (SGT) Date of Accident 27/12/2020 14:50 (SGT) **Exact Location of Accident** Singapore Additional Location Information CTE TWDS PIE EXIT Country/State of Loss

### DETAILS OF OWN VEHICLE

Singapore

Vehicle Registration Number SMM4033G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner WEE HUNG JING NRIC No SXXXX072B Email Address jon\_wee@hotmail.com Mobile Phone No (Phone) +65-98186819 Alternative Phone No (Home) +65-98186819

VEHICLE PARTICULARS

Manufacturer Volkswagen Model Golf Variant Exact purpose for which vehicle was being used at time of

Private use Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

INSURANCE COMPANY

Name of Insurance Company MSIG Type of Coverage Comprehensive Fleet Policy **Policy Number** A29112981AV2 Cover Note Number

DRIVER

Name of Driver NRIC No

**GOH EE PENG** SXXXX9541

No - Claiming third party

Private car

**Date Of Driving Pass** 15/12/2002 18 YEARS Driving experience Female Gender (Phone) +65-96977590 Mobile Number Alt. Phone Number ion wee@hotmail.com **Email Address** 138 SERANGOON AVE 3 #10-28 Address Address complement 554475 Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Collision - Head to Rear Type of Accident Clear Weather Conditions Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 2 Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) 2 Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? PASSENGER 1 **RUSSELL WEE** Name Male Gender **DETAILS OF POLICE ACTION** Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S) Yes Are accident photos available for attachment? No Was there any video captured by Car Camera? Was there any audio recorded? No

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Vehicle Category

### SHA4247D

Taxi

Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
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 Formmust 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. 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 ledgement 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the police & Time	//hsur 7 st: 630 HP: Fax	even Chee ance Advisor 5 7299 Ext: 511 8511 2203 : 6285 8620 by Reporting Centre
Sketch Plan			
		SMM403361	SHA42470

Describe Circumstances of the Accident
On 27 Dec 20, 2.50pm, I was driving along (TE (city) near PIE exit. As I was driving along, a car came into my Iane and braked. I brake as well and was not from behind by vehicle SHA 4247D.
near PIE exit. As I was driving along, a car came into my
lone and braked. I brake as well and was not from behind
by vehicle SHA4247D.
Declaration

We declare the foregoing particulars are true in every respect.

Steven Chee Insurance Advisor Tel: 6305 7299 Ext: 511 HP: 8511 2203 Fax: 6285 8620