



# TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

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M/S : AIG ASIA PACIFIC INSURANCE PTE. LTD.

78 SHENTON WAY #07-16  
AIG BUILDING  
SINGAPORE 079120

ATTN : MOTOR CLAIM DEPT

TEL : 6419 3000

FAX : 6415 3723

YOUR REF NO :

CLAIM TYPE : OWN DAMAGE

ACCIDENT DATE : 09/01/2021

## ESTIMATE

NO : QUOT202101-000019(00)

DATE : 13/01/2021

POLICY NO : 999995580

VEH REG NO : SKU7123S

MAKE/MODEL : MERCEDES BENZ CLA180 (R18 BI)

CHASSIS NO : WDD1173422N233382

ENGINE NO : 27091030696345

REG. DATE : 2015

## Estimate Repair Cost to Vehicle No : SKU7123S

Description	Quantity	Unit Price	Amount
		S\$	S\$
<b>PARTS</b>			
1 Headlamp assy -- RH	1	1,650.00	1,650.00
2 Front bumper	1	880.00	880.00
3 Front bumper side retainer - RH	1	38.00	38.00
4 Front bumper basic mounting	1	165.00	165.00
5 Front bumper inside parts - RH	1	120.00	120.00
6 Front bumper under cover	1	265.00	265.00
7 Front bumper sensors	6	8.00	48.00
8 Front bumper clips	15	5.50	82.50
9 Front fender inner shield - RH	1	135.00	135.00
10 Front fender inner shield clips	20	6.50	130.00
			3,513.50
		Add 1558%	1,013.50
			4,527.00
<b>LABOUR</b>			
11 To panel beat and straighten RH front fender, RH chassis frame, including replacement of parts and align where necessary, to refit and adjust the same	1	800.00	800.00
12 To remove and refit front bumper sensor	1	100.00	100.00
13 To check and rectify wiring system	1	80.00	80.00
14 To putty and spray paint on affected areas	1	800.00	800.00
15 To reset and reprogramme headlamp fault code	1	350.00	350.00
			2,130.00
TOTAL			S\$ 6,657.00
ADD GST @ 7%			465.99
GRAND TOTAL			S\$ 7,122.99

SINGAPORE DOLLAR SEVEN THOUSAND ONE HUNDRED TWENTY-TWO AND CENTS NINETY-NINE ONLY

FOR TONG LUCK AUTO PTE LTD

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 Submission	09/01/2021 23:46 (SGT)
Date of Accident	09/01/2021 17:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	North point basement 3 carpark
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU7123S
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE LTD
Company Reg No	1XXXXX778Z
Email Address	osman.affan@daimler.com
Mobile Phone No	(Phone) +65-88762072
Alternative Phone No	(Office) +65-88762072

#### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Cla180
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car

#### INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995580
Cover Note Number	-

#### DRIVER

Name of Driver	RACHMAWATY WIDJAJA
NRIC No	SXXXX075H
Date Of Birth	20/01/1974
Occupation	Indoor

Date Of Driving Pass	15/01/2003
Driving experience	18 YEARS
Gender	Male
Mobile Number	(Phone) +65-91888749
Alt. Phone Number	-
Email Address	osman.affan@daimler.com
Address	HDB Pandan Gardens 2, 409 Pandan Gardens
Address complement	#05-63
Postcode	600409
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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

Type of Accident	No Collision
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	No
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	Aaron - CHINESE
Gender	Male

#### 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

I SKU7123S was parked head in and was exiting out from the parking lot at North point basement 3 carpark.As I was making a reverse suddenly I heard a loud sound coming from my front vehicle and realised that my front bumper had latch onto the curb.Due to the impact my front bumper was damaged.No injuries was involved at the scene.

#### ATTACHMENT(S)

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

**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**.
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 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:

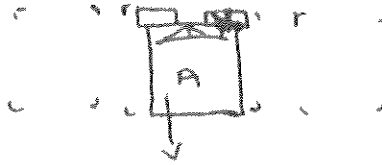
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

**VERIFY BY AJAX MARS (ARC)**  
**REPORTING OFFICER**  
MUHAMMAD SUMARDI BIN MOHD AFFANDI  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN #2

SKETCH PLAN

NORTH POINT BASEMENT 3 CARPARK



A SKU 7123 S

REVERSE  
OUT

B KERS

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

Lined area for describing the circumstances of the accident.

DECLARATION

I declare that the foregoing particulars are true in every respect.

*[Signature]*

VERIFY BY AJAX MARS (ARC) REPORTING  
MUHAMMAD SUMARDI BIN MOHD AFF



**ACCIDENT STATEMENT (2000 characters)**

I SKU7123S was parked head in and was exiting out from the parking lot at North point basement 3 carpark. As I was making a reverse suddenly I heard a loud sound coming from my front vehicle and realised that my front bumper had latch onto the curb. Due to the impact my front bumper was damaged. No injuries was involved at the scene.

Taxi Voucher No.:

**DECLARATION**

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
MUHAMMAD SUMARDI BIN MOHD AFFANDI

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

9 January 2021 at 9:34 PM

Date/Time:

9 January 2021 at 9:34 PM

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7463075H



FOR OFFICIAL USE ONLY



Name

RACHMAWATY WIDJAJA

Race

CHINESE

Date of birth

20-01-1974

Sex

F

S7463075H

Country of birth

INDONESIA

lyn





**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S7463075H**  
Name: **RACHMAWATY WIDJAJA**

Birth Date: **20 Jan 1974**  
Issue Date: **27 Apr 2012**

002064068H



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

	<b>EFFECTIVE DATE</b>
<b>Class 3</b> Motor Cars $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles $\leq$ 2500kg	<b>15 Jan 2003</b>

NP 428A

Licence No: S7463075H



## COVER NOTE

Cover Note No.	SKU7123S	Date:	13 Jan 2021
The following risk described in the Schedule is hereby HELD COVERED in the terms of the applicable Company's policy issued to the Policyholder			
<b>Schedule</b>			
Policyholder	Daimler Fleet Management Singapore Pte Ltd		
Age Condition	N/A	Registration No	SKU7123S
Policy Type	COMPREHENSIVE MOTOR	Make/Model	Mercedes Benz CLA180
Effective Date	01 Jan 2021	CC/Tonnage	1595.00
Expiry Date	31 Dec 2021	Engine No	27091030696345
Hire Purchase Company	NA	Chassis No	WDD1173422N233382
		Year of Registration	2015
<p><b>This policy is subject to driver's age condition. The policy will indemnify the insured or any authorised driver only if he/she meets the age condition. Please refer to policy terms and conditions.</b></p> <p>Usage of vehicle only for the following purposes:</p> <ol style="list-style-type: none"><li>1. Use only for social, domestic and pleasure purposes and for the Policyholder's business.</li><li>2. Use in connection with the Policyholder's business. Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business and use for social, domestic or pleasure purposes.</li></ol> <p>Please note that acceptance of the risk is subject to our final acceptance and terms and conditions applicable to the policy. Should you require any change to the insurance, please contact us immediately. Otherwise, any change will not be covered under the policy.</p> <p>The Company may cancel this cover by notice in writing and the insurance will be terminated and a proportionate part of the annual premium for the insurance will be charged for the time the Company has been on risk.</p>			
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)			
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960			
ROAD TRANSPORT ACT, 1987 (MALAYSIA)			
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)			
<b>CERTIFICATE OF INSURANCE</b>			
I / We hereby certify that this cover note 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).			

Issued in Singapore

AIG Asia Pacific Insurance PTE. LTD.

**IMPORTANT NOTICE**  
THIS COVER NOTE IS VALID  
FOR 60 DAYS FROM THE  
FIRST DAY OF THE POLICY  
PERIOD.

AUTHORISED REPRESENTATIVE