



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

PAGE: 1

M/S : DAIMLER FLEET MANAGEMENT S'PORE PTE LTD

1 GATEWAY DRIVE
#15-08 WESTGATE TOWER
SINGAPORE 608531

TEL : 6849 8118

FAX :

ATTN :

YOUR REF NO : SLL2123K

CLAIM TYPE : THIRD PARTY

TP INS. CO. : AIG ASIA PACIFIC INSURANCE PTE. LTD.

ACCIDENT DATE : 22/02/2021

TP VEH REG NO : SLL2123K

ESTIMATE

NO : QUOT202102-000064(00)

DATE : 24/02/2021

POLICY NO : 999995580

VEH REG NO : GBH7542R

MAKE/MODEL : MERCEDES BENZ VITO 109
CDI MT LONG

CHASSIS NO : WDF44760323474388

ENGINE NO : R9MA503C052160

REG. DATE : 2018

Estimate Repair Cost to Vehicle No : GBH7542R

Description	Quantity	Unit Price	Amount
		S\$	S\$
NET PRICE			
1 Dashboard assy	1	1,850.00	1,850.00
2 Steering air bag	1	2,455.00	2,455.00
3 Passenger air bag	1	2,455.00	2,455.00
4 Air bag control unit	1	1,495.00	1,495.00
5 Front safety belt - RH / LH	2	790.00	1,580.00
6 Front safety belt buckle - RH	1	485.00	485.00
7 Front safety belt adjuster - RH / LH	2	285.00	570.00
8 Front safety belt - centre	1	790.00	790.00
9 Front safety belt buckle - LH	1	325.00	325.00
10 Front safety belt buckle - centre	1	325.00	325.00
11 Battery cut off switch	1	520.00	520.00
12 Bonnet	1	1,475.00	1,475.00
13 Bonnet lock - lower	1	185.00	185.00
14 Bonnet hinge - RH / LH	2	80.00	160.00
15 Support panel	1	590.00	590.00
16 Support panel top garnish	1	115.00	115.00
17 Support panel bracket - LH	1	48.00	48.00
18 Front fender - LH	1	788.00	788.00
19 Front fender inner shield - LH	1	188.00	188.00
20 Front fender inner shield flap - LH	1	58.00	58.00
21 Front fender inner shield clips - LH	20	9.00	180.00
22 Headlamp assy - LH	1	845.00	845.00
23 Front bumper	1	965.00	965.00
24 Front bumper reinforcement	1	680.00	680.00
25 Front bumper carrier - LH	1	104.00	104.00
26 Front bumper side retainer - LH	1	98.00	98.00
27 Front bumper strut - LH	1	64.00	64.00
28 Front bumper cross member bracket - LH	1	74.00	74.00
29 Front bumper under cover	1	265.00	265.00
30 Front bumper lower cross member	1	290.00	290.00
31 Front bumper clips	15	9.00	135.00
32 Washer tank	1	145.00	145.00



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SINGAPORE 608531

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CDI MT LONG

CHASSIS NO : WDF44760323474388

ENGINE NO : R9MA503C052160

REG. DATE : 2018

Estimate Repair Cost to Vehicle No : GBH7542R

Description	Quantity	Unit Price	Amount
		<u>S\$</u>	<u>S\$</u>
33 Washer tank neck	1	58.00	58.00
34 Washer tank cover	1	28.00	28.00
35 Air-con condenser	1	650.00	650.00
36 Air-con condenser support frame	1	165.00	165.00
37 Radiator assy	1	660.00	660.00
38 Radiator auto fan assy	1	980.00	980.00
39 Radiator guide - LH	1	78.00	78.00
40 Radiator lower cover	1	125.00	125.00
41 Radiator support - LH	1	48.00	48.00
42 Radiator top clips - LH	1	28.00	28.00
43 Radiator top bearing - LH	1	58.00	58.00
44 Inter-cooler assy	1	780.00	780.00
45 Front shock absorber - LH	1	1,515.00	1,515.00
46 Front upper arm - LH	1	1,210.00	1,210.00
47 Front lower arm - LH	1	1,250.00	1,250.00
48 Front knuckle arm - LH	1	2,315.00	2,315.00
49 Steering tie-rod - LH	1	280.00	280.00
50 Steering tie-rod end - LH	1	198.00	198.00
51 Front torsion bar	1	340.00	340.00
52 Front linkage - LH	1	111.00	111.00
53 Sub frame	1	2,030.00	2,030.00
54 Front axle	1	2,870.00	2,870.00
55 Front wheel rim - LH	1	380.00	380.00
56 Front wheel hup cap - LH	1	88.00	88.00
			36,547.00
		Less 10%	3,654.70
			32,892.30
SPECIAL NET			
57 Front windscreen sealant	1	60.00	60.00
58 Radiator coolant	2	60.00	120.00
59 Front tyre - LH	1	280.00	280.00
60 Front number plate	1	40.00	40.00
61 ERP bracket	1	26.00	26.00
			526.00



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ENGINE NO : R9MA503C052160

REG. DATE : 2018

Estimate Repair Cost to Vehicle No : GBH7542R

Description	Quantity	Unit Price	Amount
		<u>S\$</u>	<u>S\$</u>
LABOUR			
62 To remove and refit front windscreen glass	1	150.00	150.00
63 To remove and refit front dashboard assy, meter and grove compartment	1	350.00	350.00
64 To remove and refit air-con condenser, radiator, inter-cooler assy and refill air-con gas	1	280.00	280.00
65 To check and rectify wiring systems	1	80.00	80.00
66 To remove and refit steering air bag, passenger air bag, airbag control unit, front both side and centre safety belt	1	550.00	550.00
67 To remove and refit battery cut off switch	1	150.00	150.00
68 To remove and refit LH front undercarriage	1	580.00	580.00
69 To panel beat and straighten LH front chassis frame, LH front fender inner panel, including replacement of parts and align where necessary, to refit and adjust the same	1	1,500.00	1,500.00
70 To putty and spray paint on affected areas	1	1,200.00	1,200.00
71 To re-programme and coding all faulty code (online)	1	580.00	580.00
72 To check wheel alignment	1	100.00	100.00
			5,520.00

TOTAL **S\$ 38,938.30**

ADD GST @ 7% 2,725.68

GRAND TOTAL **S\$ 41,663.98**

SINGAPORE DOLLAR FORTY-ONE THOUSAND SIX HUNDRED SIXTY-THREE AND CENTS NINETY-EIGHT ONLY

FOR TONG LUCK AUTO PTE LTD

AUTHORISED SIGNATURE



TONG LUCK AUTO PTE LTD

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Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

AIG ASIA PACIFIC INSURANCE PTE. LTD.
78 SHENTON WAY #07-16
AIG BUILDING
SINGAPORE 079120

25 February 2021

Attn: MOTOR CLAIM DEPT

Dear Sirs / Madam,

RE: ACCIDENT INVOLVING VEHICLE NO.: GBH7542R & SLL2123K ON 22/02/2021 @ 09:00 HRS
ALONG DEFU AVENUE 2

We hereby authorized by our client **DAIMLER FLEET MANAGEMENT S'PORE PTE LTD**, the owner/driver of the above mentioned vehicle No.: **GBH7542R**

We notice that the above accident was caused by your insured/driver negligent driving and/or management of motor vehicle No.: **SLL2123K**

Therefore we are instructed by our client to claim against you/your insured driver in connection with the above captioned accident involving our client's vehicle No.: **GBH7542R** and vehicle No.: **SLL2123K** by your insured/driver at the material time. As a result, our client's vehicle was damaged and our client has been put to loss and expenses. Please assign your surveyor to inspect the above mentioned vehicle in the next 48hrs. Filling which, we will proceed to the repair of the vehicle. Details of claim will submitted to you in due course.

The vehicle is now garage at: **TONG LUCK AUTO PTE LTD**
160 Sin Ming Drive
#07-01/06 Sin Ming Autocity
Singapore 575722
Tel: 6250 0088

Your kind attention to the matter would be much appreciated.

Yours faithfully,

TONG LUCK AUTO PTE LTD

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	23/02/2021 21:11 (SGT)
Date of Accident	22/02/2021 09:00 (SGT)
Exact Location of Accident	Defu Ave 2, Singapore
Additional Location Information	ALONG DEFU AVENUE 2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH7542R
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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	faizal.mohamed@daimler.com
Mobile Phone No	(Phone) +65-68498118
Alternative Phone No	(Office) +65-68498118

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Vito
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?	No - Claiming third party
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

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

DRIVER

Name of Driver	DEN DIRZUAN BIN DARMAWAN
NRIC No	SXXXX221J
Date Of Birth	27/09/1987
Occupation	Outdoor

Date Of Driving Pass	18/05/2018
Driving experience	2 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89225125
Alt. Phone Number	-
Email Address	buayedecent@gmail.com
Address	HDB Ang Mo Kio View, 203 Ang Mo Kio Avenue 3 560203 #05-1716
Address complement	-
Postcode	-
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	Side Swipe
Weather Conditions	Clear
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 22/02/2021 AT ABOUT 0900HRS,I WAS DRIVING MY COMPANY VEHICLE,GBH7542R,ALONG DEFU AVE 2 TOWARDS TAMPINES RD ON THE RIGHT LANE OF 2 LANES.AS APPROACHING X-JUNCTION OF DEFU AVE 2 AND DEFU LANE 1 ,I NOTICED THERE WAS A VEHICLE ,SLL2123K,STOP AT THE JUNCTION ON MY LEFT OF DEFU LANE 1.I THEN PROCEED DRIVING MY VEHICLE AS I WAS ON MAJOR ROAD,SUDDENLY ,AS I WAS ABOUT TO PASS THE X-JUNCTION,THE VEHICLE MOVED FORWARDS.I THEN UNABLE TO AVOID IT,HENCE THE SAID VEHICLE COLLIDED ON THE LEFT SIDE OF MY VEHICLE WHICH THEN WAS PUSHED TOWARDS THE LANE OF THE OPPOSITE DIRECTION.AS I WAS UNABLE TO MOVE,PASSER BY ASSITED ME TO ALIGHT FROM MY VEHICLE.A WITNESS APPROACHED ME AND INFORMED HIS NAME AND NUMBER.HE TOLD ME THAT HE WAS BEHIND THE SAID VEHICLE AND HAD OBSERVED ACCIDENT THAT HAPPENED.MOMENTS LATER,AMBULANCE CAME AND ACCESS ME.I WAS TOLD THAT I WILL BE CONVEYED TO HOSPITAL.I SUSTAIN SWELLS ON MY RIGHT WRIST,RIGHT ELBOW ,RIGHT SHOULDER AND RIGHT KNEE.I WAS CONVEYED TO SENGKANG GENERAL HOSPITAL AND WAS GIVEN 5 DAYS OF MEDICAL CERTIFICATE 22/02/2021-26/02/2021.I WISH TO STATE THAT I DID NOT MANAGE TO GET THE PARTICULAR OF THE OTHER DRIVER.MY VEHICLE DOES NOT INSTALL WITH AN CAR-CAMERA.

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	SLL2123K
Vehicle Manufacturer	Mini
Vehicle Model	Cooper
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	DEN DIRZUAN BIN DARMAWAN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBH7542R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

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.

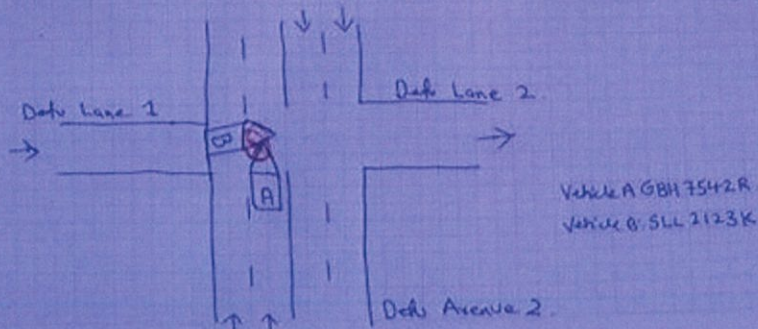
Policyholder's Signature
Date & Time:

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

23 Feb 2021

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SAIFULLAH S/O SYED MASOOD
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SAIFULLAH S/O SYED MASOOD
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:


**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20210222/2149

1 of 3

Report No: T/20210222/2149

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
22/02/2021 22:20

Vide Report No.:

Station Diary No.:
149

Informant's Particulars

Name of Informant:
DEN DIRZUAN BIN DARMAWAN

Address:
APT BLK 203 ANG MO KIO AVENUE 3 #05-1716
SINGAPORE 560203

ID Type / ID No.:
NRIC NO / S8730221J

Contact No.:
Home/Office:

Mobile: 89225125

Nationality:
SINGAPORE CITIZEN

Email:

Sex: Male
Age: 33
Date of Birth: 27/09/1987

Type of Informant:
Driver

Race:
Malay

Language:
English

Institution / School Name:

Occupation:
DELIVERY DRIVER

Driving Licence Information:
Class: 3

Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 22/02/2021 09:00	Type of Location: X-Junction
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Location:

DEFU AVENUE 2

Weather:
Clear

Road Surface:
Dry

Road Speed Limit:

Traffic Flow:
Two Way

Traffic Control:
Not Controlled

Traffic Volume:
Light

Type of Collision:
Between Moving Vehicles - Head To Side

Anyone conveyed by ambulance:
Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBH7542R	Van	MERCEDES BENZ	VITO 109 CDI MT LONG		Slightly Damaged	0
SLL2123K	Car	MINI	COOPER 5DR FWD LED ABS		Slightly Damaged	0



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Jurong West N.P.C.
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20210222/2149

2 of 3

Report No: T/20210222/2149

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
Driver Name	DEN DIRZUAN BIN DARMAWAN	ID No.	S8730221J
Related Vehicle	GBH7542R (Van)	Contact No.	89225125
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	22/02/2021	Date Discharge	22/02/2021
No. of Days granted Medical Leave	05	Degree of Injury	Slight
WITNESS			
Name	DIN	ID No.	NIL
Related Vehicle	NIL	Contact No.	93815099
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 22/02/2021 at about 0900hrs, I was driving my company vehicle, GBH7542R, along Defu Ave 2 towards Tampines Rd on the right lane of 2 lanes. As approaching X-junction of Defu Ave 2 and Defu Lane 1, I noticed there was a vehicle, SLL2123K, stop at the junction on my left of Defu Lane 1. I then proceed driving my vehicle as I was on Major road. Suddenly, as I was about to pass the X-junction, the vehicle moved forwards. I then unable to avoid it, hence the said vehicle collided on the left side of my vehicle which then was pushed towards the lane of the opposite direction.

As I was unable to move, passer by assisted me to alight from my vehicle. A witness approached me and informed his name and number. He told me that he was behind the said vehicle and had observed the accident that happened. Moments later, Ambulance came and access me. I was told that I will be conveyed to hospital. I sustain swells on my right wrist, right elbow, right shoulder and right knee. I was conveyed to Sengkang General Hospital and was given 5 days of medical certificate 22/02/2021 - 26/02/2021. I wish to state that I did not manage to get the particular of the other driver. My vehicle does not install with an in-car camera.


**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20210222/2149

3 of 3

Report No: T/20210222/2149

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /

Sgt 1 IBRAHIM BIN ROSLI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

22/02/2021 22:20

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD ABDILLAH BIN PALIL

Contact No.: 65476246

Classification Of Case:

 Authentication Stamp
NP165


Signature:

Singapore Police Force

SN 126