



MSLA DUE: 16/5/2021

NO VIDEO

Letter of Claims Request for direct settlement.

We are submitting a claim on behalf of our customer JOSHUA POH ENG HENG

NRIC SXXXX 243F insured of vehicle SME 4345 Z against

your insured vehicle number GBK 8166 X (AIQ)

On the accident dated on 19.4.2021 (ddmmyyy) along CARTAGE IN FRONT
BLK 566/564 ST. 5 PASIR RIS.

Dated this 20 APR 2021 (day) of _____ (month) 2021.

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

Page	1/2
Document no.	
Document date	20-04-2021
Customer no.	5211043795
Customer GST-ID	201009404M
Dealer	30001
Job order number	2021015085/ 1
Job order date	19-04-2021
Service Advisor	TIOW CHUAN CHEE

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

Customer Details:
Mr
JOSHUA
POH ENG HENG
566 PASIR RIS STREET 51
#10-114
Singapore 510566

License plate SME4345Z	Model code 5E33BD	First registration 28-09-2018	VIN TMBBP7NE4J0329934	Model Octavia Ambition 1.0 I TSI 85kW DSG	Mileage 45,333
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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
5E0807221N	Cover For	1	pcs.	1,371.14	#1	1,371.14	1,467.12
	FRT BUMPER						
5E0807724A	Support Pa	1	pcs.	43.78	#1	43.78	46.84
	BUMPER INNER BRACKET RH						
5E0807184A	Guide Piec	1	pcs.	34.59	#1	34.59	37.01
	RHS BUMPER SIDE BRACKET						
5E0919485G	Sensor bracket	1	pcs.	12.93	#1	12.93	13.84
5E0919486G	Sensor bracket	1	pcs.	12.93	#1	12.93	13.84
5E0919485F	Sensor bracket	1	pcs.	12.93	#1	12.93	13.84
5E0919486F	Sensor bracket	1	pcs.	12.93	#1	12.93	13.84
D 180KU2A1	2k-Plastic Adhesive	1	pcs.	78.91	#1	78.91	84.43
D 822150A1	Bonding Agent For Plastic	1	pcs.	62.81	#1	62.81	67.21
5E2941016C	Halogen He	1	pcs.	959.00	#1	959.00	1,026.13
	H/LAMP RH						
5E0807682F 9B9	Cover For	1	pcs.	48.36	#1	48.36	51.75
	RHS FOG LAMP LOWER GRILLE						
5E0941700F	Halogen Fo	1	pcs.	263.62	#1	263.62	282.07
	FOG LAMP RH						
5E0821106C	Fender	1	pcs.	616.26	#1	616.26	659.40
	RH						
5E0821142A	Fender - B	1	pcs.	98.92	#1	98.92	105.84
	FENDER BRACKET RH						
N 90959602	Riveted Cap Nut	4	pcs.	2.23	#1	8.92	9.54
5E0809958D	Wheelhouse	1	pcs.	156.77	#1	156.77	167.74
	RHS FENDER LINER						
	LABOUR	3	pcs.	840.00	#1	2,520.00	2,696.40
	SPRAY PAINT	4	pcs.	800.00	#1	3,200.00	3,424.00
	AIG DIRECT SETTLEMENT DOA: 19/04/2021 TP VEH: GBK8166X SURVEY BY:						

Quotation valid till 26-04-2021

Tax Code	Labour	Material	GST %	GST	Total amount excl. GST	Total amount incl. GST
#1	760.00	9,514.80	7%	719.24	10,274.80	10,994.04
Total	760.00	9,514.80		719.24	10,274.80	10,994.04

ŠKODA Centre Singapore

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Commercial
Vehicles

Quotation

Non binding - Preview

Page 2/2

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78 Shenton Way
#07-16 AIG Building
Singapore 079120

Customer Details:
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566 PASIR RIS STREET 51
#10-114
Singapore 510566

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Job order number 2021015085/ 1
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Service Advisor TIOW CHUAN CHEE

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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 Submission	19/04/2021 17:20 (SGT)
Date of Accident	19/04/2021 11:00 (SGT)
Exact Location of Accident	St 51, Singapore
Additional Location Information	OPENSOURCE CARPARK IN FRONT BLK 566/564
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME4345Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JOSHUA POH ENG HENG
NRIC No	SXXXX243F
Email Address	pohjoshua@gmail.com
Mobile Phone No	(Phone) +65-96836850
Alternative Phone No	(Home) +65-96836850

VEHICLE PARTICULARS

Manufacturer	Skoda
Model	Octavia
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	999

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

DRIVER

Name of Driver	JOSHUA POH ENG HENG
NRIC No	SXXXX243F

Date Of Birth	09/11/1964
Occupation	Indoor
Date Of Driving Pass	02/01/1985
Driving experience	36 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96836850
Alt. Phone Number	(Home) +65-96836850
Email Address	pohjoshua@gmail.com
Address	APT BLK 566 PASIR RIS STREET 51
Address complement	#10-114
Postcode	510566
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Hit and run / Vandalism / Damaged whilst parked
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	0
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?	No
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	GBK8166X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

Postcode	-
Insurance Company Name	AIG Asia Pacific Insurance Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

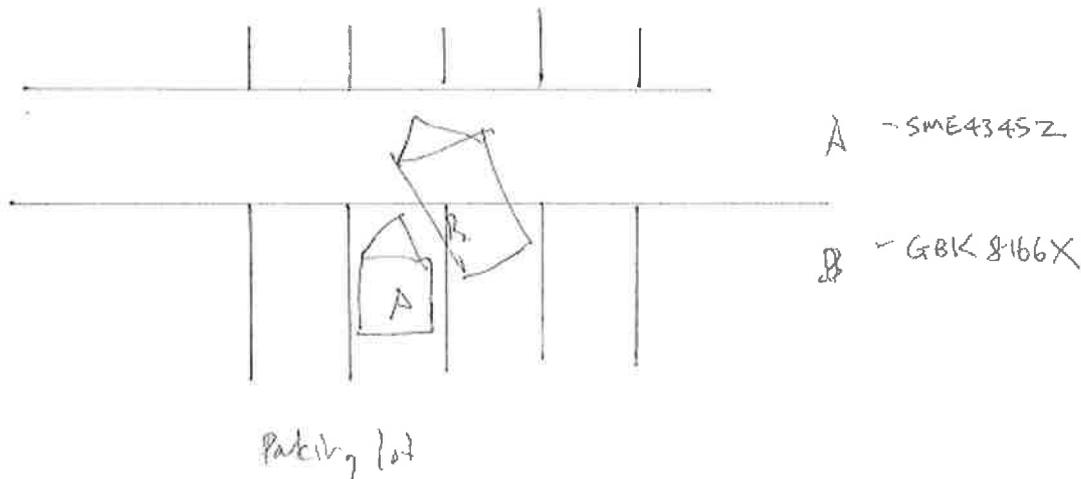
- 1. Please report **correctly** the details of the accident to speed up the claims process.
- 2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
- 3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of 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 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.
- 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.

<p style="text-align: right; margin-right: 20px;"><i>John</i> 3:55pm 19/4/21</p> <p>_____ Policyholder's Signature / Date & Time</p>	<p>_____ Driver's Signature (if driver is not the policyholder) / Date & Time</p>	<p style="text-align: center;">Steven Chee Insurance Advisor Tel: 6305 7299 Ext: 511 HP: 8511 2203 Fax: 6285 8620</p> <p>_____ Witnessed by Reporting Centre Personnel</p>
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Sketch Plan



Describe Circumstances of the Accident

Date - 19/4/21
 Time - 11 am (Discovered)
 Location - Carpark at Pasir Ris St. 51 Infront of Block 566/564

When I went to my car this morning, I found my car is not in proper position. It was shifted slightly to the left.
 Upon inspection, I found my left ~~the~~ Right bumper was damaged with orange paint marks.
 There was a note left on my wiper by someone who said he knocked my car and ask me to contact him.

Declaration

We declare the foregoing particulars are true in every respect.

 19/4/21 3:55pm
 Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time


 Steven Chee
 Insurance Advisor
 Tel: 6305 7299 Ext: 511
 HP: 8511 2203
 Fax: 6285 8620
 Witnessed by Reporting Centre Personnel