



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 : 20/05/2021

ESTIMATE

NO : QUOT202105-000070(00)

DATE : 28/05/2021

POLICY NO : 999995580

VEH REG NO : SLK2008R

MAKE/MODEL : MERCEDES BENZ GLC300
4MATIC (R18 LED)

CHASSIS NO : W1N2539842F855100

ENGINE NO : 26492080086791

REG. DATE : 2021

Estimate Repair Cost to Vehicle No : SLK2008R

Description	Quantity	Unit Price	Amount
		S\$	S\$
PARTS			
1 Stepboard garnish - RH	1	1,280.00	1,280.00
2 Stepboard inner carrier- RH	1	360.00	360.00
3 Stepboard insert - RH	1	280.00	280.00
4 Stepboard top chrome - RH	1	455.00	455.00
5 Stepboard nubbed insert - RH (Front)	1	30.00	30.00
6 Stepboard nubbed insert - RH (centre)	1	40.00	40.00
7 Stepboard nubbed insert - RH (Rear)	1	32.00	32.00
8 Stepboard clips - RH	16	9.00	144.00
			2,621.00
		Add 10%	262.10
			2,883.10
LABOUR			
9 Labour charges to remove & refit above parts	1	800.00	800.00
			800.00
		TOTAL	S\$ 3,683.10
		ADD GST @ 7%	257.82
		GRAND TOTAL	S\$ 3,940.92

SINGAPORE DOLLAR THREE THOUSAND NINE HUNDRED FORTY AND CENTS NINETY-TWO 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	20/05/2021 19:46 (SGT)
Date of Accident	20/05/2021 12:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TIONG BHARU MARKET (MSCP) UPPER LEVEL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK2008R
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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) +65-68498118
Alternative Phone No	(Office) +65-68498118

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	GLC300 4MATIC (R18 LED)
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1991

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995580
Cover Note Number	-

DRIVER

Name of Driver	CHOON HIN FATT
NRIC No	SXXXX761J

Date Of Birth	05/07/1967
Occupation	Indoor
Date Of Driving Pass	09/05/1986
Driving experience	35 YEARS
Gender	Male
Mobile Number	(Phone) +65-96722482
Alt. Phone Number	-
Email Address	alvin_choon@hotmail.com
Address	Versilia on Haig, 31 Ipoh Lane
Address complement	#10-05
Postcode	438639
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	1
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)	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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Driving up slope, due to misjudgement. Accidentally hit onto low wall.

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	-
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Mobile equipment
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	Collided into Low Wall
No. Of Passenger (Including Driver)	-

SKETCH PLANIMPORTANT 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.

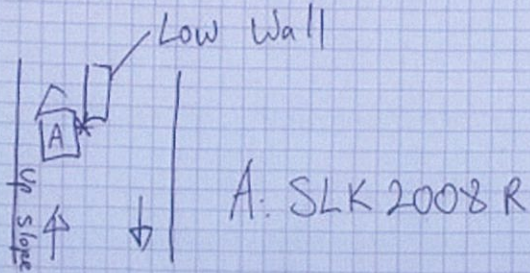
Policyholder's Signature
Date & Time:

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

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
AIZAM BIN ATAN
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

ACCIDENT DIAGRAM

Ver. 30042021



Tiong Bharn Market
(MSCP)
Upper Level

Policyholder's Signature
Date & Time:

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

VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
AIZAM BIN ATAN

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

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Driving up slope, due to misjudgement. Accidentally hit onto low wall.

DECLARATION

I/We declare the foregoing particulars are true in 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

AIZAM BIN ATAN

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GAARMC Sketch Plan Template V3

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HOTLINE TEL: (65) 6419-3000

CERTIFICATE OF INSURANCE

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)

M.Z.400

COMPREHENSIVE COMMERCIAL MOTOR	OWN DAMAGE EXCESS S\$1,700.00 ()
CERTIFICATE NO. 999993598/100804835-00000	WINDSCREEN EXCESS S\$100.00
	(for policies with effect from 1st November 2002)
	SUM INSURED S\$1.00
	INSURING WITH COE/PARF YES
1) VEHICLE REGISTRATION NO.	SLK2008R
2) NAME OF INSURED	Daimler Fleet Management Singapore Pte Ltd
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	1 Jan 2021
4) DATE OF EXPIRY OF INSURANCE	31 Dec 2021
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *	
1) Any drivers who is driving on the Insured's order or with their permission. 2) Excess \$2,500 applies to drivers age 21 to 26 years old unless otherwise specified 3) Additional Excess \$3,500 applies to drivers age below 21 or above 65 years old and or less than years driving experience unless otherwise specified	
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.	
6) LIMITATION AS TO USE *	
1) Use for social, domestic, pleasure purposes and business purposes of the Insured and or hirer whom the vehicle is hired to. The Policy does not cover: 1) Use for the carriage of passengers for hire or reward 2) Use for driving tuition, driving test, racing, pace-making, reliability trial or speed-testing. 3) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 4) Use for any purpose in connection with the Motor Trade.	
In the event of accident claim, the repairs to the Vehicle must be carried out by either one of our AIG Authorized Repairers or a particular Repairer approved by AIG	
LOSS OF USE NOT INCLUDED	
* NAMED DRIVER	N/A
HIRE PURCHASE COMPANY	NA
<i>* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</i>	

I / We hereby Certify that the policy to which this Certificate relates 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 At Singapore 20 Apr 2021

AIG ASIA PACIFIC INSURANCE PTE. LTD.

030023-000
JLT MANAGEMENT PTE LTD
#09-02, 8 MARINA VIEW
ASIA SQUARE TOWER 1
SINGAPORE 018960


Authorized Representative

ORIGINAL

SSCNFY

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S1788761J**
Name: **CHOON HIN FATT**

Birth Date: **05 Jul 1967**
Issue Date: **24 May 2003**



000509687C


REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1788761J**



Name

CHOON HIN FATT



钟兴发

Race
CHINESE

Date of Birth
05-07-1967

Sex
M

Country of Birth
SINGAPORE

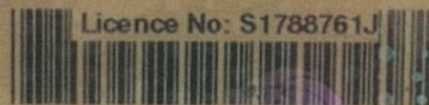
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 2B Motorcycles not exceeding 200 cc
Class 3 Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

25 Jun 1985
09 May 1986

NP 428A



Licence No: S1788761J

30247



NRIC No: S1788761J



Blood Group Date of issue
A+ 14-05-1998

Address
31 IPOH LANE #10-05
SINGAPORE 438639
NRIC No: S1788761J

Date: 11/02/2011 No: 6705786