

REG. BY: Steve

CS/GAI21009966/Euf3

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: **SKB 2911S**
 at Workshop m/s _____
 of _____
 Insured: **SBW 6689D**
 Policy No. _____
 Claims No. **CLMOMVP000001160**
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

☒	☐
N/S	O/S
☐	☐

Bal. or Market Value: _____
 IDAG Accident Rpt: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: 3 days Res.: Yes or No
 Lum Sum: _____ % J-Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: **SKB 2911S** Yr Regn: **31/7/18**
 Type: ☒ M. Car / ☐ M. Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /
 Truck / Trailer or _____
 Make: **Volkswagen Golf** c.c. **999**
 Colour: **Silver** A/C: ☐ Insured / ☐ Std / ☐ NI / ☐ NA
 Sp. Reading: **58360** T/Radio: ☐ Insured / ☐ Std / ☐ NI / ☐ NA
 Eng/No: _____
 C/No: **WVWZZZ442JW174310**
 Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ Burnt
 Steering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or
 Brake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt or
 Modl: **III 16 Rlm** / ☐ STD A/Rlm or _____
 Tyre Size: F: **225/55 R16**
 R: **225/55 R16**

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **Pirelli**

Front	Rear
R/Bal. <u>4</u> mm	R/Bal. <u>4</u> mm
L/Bal. <u>4</u> mm	L/Bal. <u>4</u> mm
D.O.A. <u>18/9/21</u>	D.O.A. <u>28/9/21</u>

Survey held at **Volkswagen**
 Des. of Damages: ☐ Frl / ☐ Rear / ☐ O/S / ☐ N/S / ☐ UIC / ☐ Roof/tp or
F1 R1 H

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	MV- 69K
	Confirmed P/P \$2791.81, 3 repair days
	(RED \$3054.67: 52%)

Date/Time File Pass to?

☐ : Prel. Report

17/11 TYPIST

☐ : Final Report

Date/Time File Return to?

Days Of Repair: **3**

Resurvey No. of Trip: **1**

Survey Fee:

Transportation:

☐ S + RS ☐ SI

☐ Photos

☐ Witness

☐ Total

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Inve (\$ _____)

☐ : Wash and (\$ _____)

Report Form 13:

TP

Amount Sum / B.J.: **\$2791.81**

VOLKSWAGEN CENTRE SINGAPORE

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



Steve (LKK)
28/9/21, 10.00am

WML PL
3 days
P/P
M B/L sy

Quotation

Non binding - Preview

Company
GREAT
AMERICAN INSURANCE
3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
Singapore 039190

Customer Details:
Ms.
LIAN
POH SUAN,
213 SERANGOON AVENUE 4
#10-58
Singapore 550213

Page 1/2
Document no.
Document date 24-09-2021
Customer no. 5211035396
Customer GST-ID T15FC0029B
Dealer 30001
Job order number 2021036428/ 1
Job order date 24-09-2021
Service Advisor YEN MEI WONG

License plate	Model code	First registration	VIN	Model	Mileage
SKB2911S	BQ12AZ	31-07-2018	WVWZZZAUZJW274310	Golf Trendline 1.0 TSI 81kW DSG	58,246

Position no.	Description	Quantity	Unit	Unit price excl. GST	Tax code	Total amount excl. GST	Total amount incl. GST
9801B004	B&P CHECK SHORT CIRCUIT / HARNESS REPAIR				#1	280.00	299.60
9801B005	B&P DIAGNOSIS AND PROGRAMMING				#1	480.00	513.60
5G0807217FNGRU	Cover For Bumper Primed	1	pcs.	1,313.60	#1	1,313.60	1,405.55
5G0807723F	Support Part	1	pcs.	59.04	#1	59.04	63.17
	BUMPER INNER BRACKET LH						
5G0807049B	Guide Piece	1	pcs.	22.75	#1	22.75	24.34
	BUMPER SIDE BRACKET LH						
5G0807050B	Guide Piece	1	pcs.	22.75	#1	22.75	24.34
	BUMPER SIDE BRACKET RH						
5G0805705R	Guide	1	pcs.	42.80	#1	42.80	45.80
	BUMPER CTR BRACKET						
5G0853677M 9B9	Cooling Air Grill Satin B	1	pcs.	149.05	#1	149.05	159.48
	BUMPER CTR LOWER GRILLE						
5G0853665N 9B9	Cooling Air Grill Satin B	1	pcs.	80.01	#1	80.01	85.61
	LHS LOWER GRILLE (UPPER)						
5G0853211G 9B9	Cover Part For Bumper Sat	1	pcs.	36.47	#1	36.47	39.02
	LHS LOWER GRILLE (CTR)						
5G0853665L 9B9	Cooling Air Grill Satin B	1	pcs.	80.01	#1	80.01	85.61
	LHS LOWER GRILLE (LOWER)						
	LABOUR	2	pcs.	840.00	#1	1,680.00	1,797.60
	SPRAY PAINT	2	pcs.	800.00	#1	1,600.00	1,712.00
	GREAT AMERICAN DIRECT SETTLEMENT						
	DOA: 18/09/2021						
	TP VEH: SBW6689D						
	SURVEY BY:						

Quotation valid till 01-10-2021

Tax Code	Labour	Material	GST %	GST	Total amount excl. GST	Total amount incl. GST
#1	760.00	5,086.48	7%	409.25	5,846.48	6,255.73
Total	760.00	5,086.48		409.25	5,846.48	6,255.73

LKK Auto Consultancy
the Repairer of the vehicle
• To resurvey before repair
• To display damage
• Parts prices are
• Third party survey

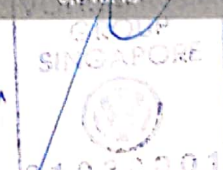
Customer

Supplemental information is subject to final approval from the Insurance Company

Acknowledged by Repairer

Signature:

Date:



Service Advisor

VOLKSWAGEN CENTRE SINGAPORE

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



Quotation

Non binding - Preview

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Company
GREAT
AMERICAN INSURANCE
3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
Singapore 039190

Customer Details:
Ms.
LIAN
POH SUAN,
213 SERANGOON AVENUE 4
#10-58
Singapore 550213

Document no.
Document date
Customer no.
Customer GST-ID
Dealer
Job order number
Job order date
Service Advisor

24-09-2021
5211035396
T15FC0029B
30001
2021036428/ 1
24-09-2021
YEN MEI WONG

License plate	Model code	First registration	VIN	Model	Mileage
SKB2911S	BQ12AZ	31-07-2018	WVWZZZAUZJW274310	Golf Trendline 1.0 I TSI 81kW DSG	58,246

—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).—

All invoices are denominated in SGD, unless otherwise stated.

NTUC VS Great American
out
Got video
* will not Revert to
claims OD *

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	20/09/2021 17:31 (SGT)
Date of Accident	18/09/2021 10:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	MSCP OF BLK 187 BEDOK NORTH STREET 4
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKB2911S

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIAN POH SUAN, BESSIE
NRIC No	S0077331Z
Email Address	bessielian@hotmail.com
Mobile Phone No	(Phone) +65-91298258
Alternative Phone No	+65-91298258

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Golf
Variant	TSI TL
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	1000

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5110564769-02
Cover Note Number	drivo PREMIUM

DRIVER

Name of Driver	TAN TIAN SOO
NRIC No	S0122198A

Date of Birth
Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

20/02/1950
Indoor
16/12/1969
51 YEARS AND 9 MONTHS
Male
(Phone) +65-97881280
*
bessielelian@hotmail.com
BLK 213 #10-58 SERANGOON AVENUE 4
*
550213
No
Spouse
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Hit and run / Vandalism / Damaged whilst parked
Clear
Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance?

No
2
No
-
Yes
0
No

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address
Was notice of intended Prosecution given?
If yes, against whom?

Yes
Traffic Police
(Phone) +65-65470000
(Fax) +65-65474900
10 Ubi Avenue 3 Singapore 408865
No
-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Reasons for not uploading a video of the accident
Was there any audio recorded?

Yes
Yes
VIDEO SIZE LARGE
No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour

SBW6689D
Mercedes
-
-
-

Category	Private car
Name of Driver	UNKNOWN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

WITNESS DETAILS

WITNESS 1

Name	MAXIE FENGSHAN
Phone	(Phone) +65-98411983
Email	-

INCOME MOTOR SERVICE CENTRE

Report No: MI

DOA 18/09/2021
Time 10:00 hrs

Report Date & Start Time 20/09/2021 17:16

Vehicle No: SKB129115 Reporting Type: ---

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.

20/09/21 / 17:16

Policyholder's Signature / Date & Time

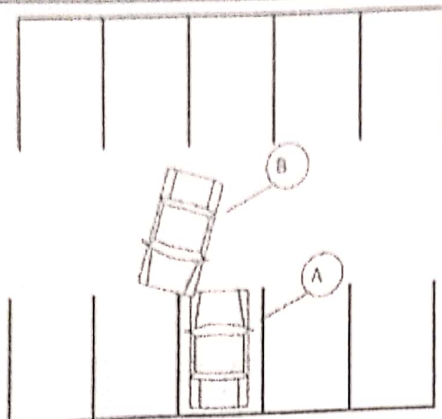
20/09/21 / 17:16

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

Ganesh (S993561)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel

SKETCH PLAN



MSCP OF BLK 187 BEDOK NORTH STREET 4

Vehicle A: SKB2911S

Vehicle B: SBW6689D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No. T202109187021

Declaration

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

20/09/21 / 17:16

Policyholder's Signature / Date & Time

20/09/21 / 17:16

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

Ganesh (S993561)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel



SINGAPORE
POLICE FORCE



T/20210918/7021

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No: T/20210918/7021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/09/2021 17:19		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: LIAN POH SUAN, BESSIE		Address: 213 SERANGOON AVENUE 4 #10-58 SINGAPORE 550213	
ID Type / ID No.: NRIC NO / S0077331Z		Contact No.: Home/Office: Mobile: 91298258	
Nationality: SINGAPORE CITIZEN		Email: BESSIELIAN@HOTMAIL.COM	
Sex: Female	Age: 72	Date of Birth: 11/08/1949	Type of Informant: Vehicle Owner
Race: Chinese		Language: English	Institution / School Name:
Occupation: Retiree		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 18/09/2021 10:15	Type of Location: Car Park
Location: BEDOK NORTH STREET 4				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 15 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SBW6689D	Car	MERCEDES BENZ	E Class	Blue		0
SKB2911S	Car	VOLKSWAGO N	Golf	Silver	Slightly Damaged	0



SINGAPORE
POLICE FORCE



T/20210918/7021

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20210918/7021

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	LIAN POH SUAN, BESSIE	ID No.	S0077331Z
Related Vehicle	NIL	Contact No.	91298258
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On Saturday 18 Sep 2021, my husband and I arrived at the carpark of 187A Bedok North Street 4 close to 9am. We parked at deck 1A of the carpark and left the carpark at 10.40am. While entering our car, we noted a lady who kept looking over towards the direction of our car. Sensing something amiss, we got out to check the front part of our car when we reached home. We noted that there were several damages to the car including i) scratches along the front bumper, ii) the black grill portion of the front bumper had a deep indent and was misaligned. At our daughter was staying in that area, she noted that a fellow neighbour had posted a video of a blue Mercedes (SBW6689D) who had brushed the front of my car while reversing into a car park lot. This neighbour was driving behind the blue Mercedes and had captured the entire incident of the hit. The incident took place at 10.11am local time. The driver of the blue Mercedes did not leave her contact nor approach us to provide her details, hence I am formally lodging a police report for this matter. I also have videos exceeding 2MB.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20210918/7021

3 of 3

Report No. T/20210918/7021

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
KALESWARI PALANI
Contact No.: 65476902

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
18/09/2021 17:19

Classification Of Case: