



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 : ACCOUNTS DEPT

YOUR REF NO : SHC8871P

CLAIM TYPE : THIRD PARTY

TP INS. CO. : AXA INSURANCE SINGAPORE PTE LTD

ACCIDENT DATE : 30/04/2022

TP VEH REG NO : SHC8871P

ESTIMATE

NO : QUOT202206-000022(00)

DATE : 08/06/2022

POLICY NO : 999995580

VEH REG NO : GBG9296T

MAKE/MODEL : NISSAN NV350 PANEL VAN 2.5
5AT 5DR EURO V

CHASSIS NO : JN1MC2E26Z0009700

ENGINE NO : YD25002832B

REG. DATE : 2017

Estimate Repair Cost to Vehicle No : GBG9296T

Description	Quantity	Unit Price	Amount
		S\$	S\$
NET PRICE			
1 Tailgate	1	2,597.90	2,597.90
2 Tailgate weatherstrip	1	167.00	167.00
3 Tailgate trimboard clips	15	5.50	82.50
4 Tailgate centre logo	1	79.90	79.90
5 Tailgate 'NV350' emblem	1	85.25	85.25
6 Tailgate 'URVAN' emblem	1	85.25	85.25
7 Rear end panel (outer)	1	216.00	216.00
8 Rear bumper	1	667.20	667.20
9 Rear bumper reinforcement	1	667.20	667.20
10 Rear bumper retainer - LH	1	181.00	181.00
11 Rear bumper clips	15	5.50	82.50
12 Taillamp assy - LH	1	247.30	247.30
			5,159.00
		Less 10%	515.89
			4,643.11
SPECIAL NET			
13 Rear windscreen sealant	1	60.00	60.00
14 Tailgate "70km/h" sticker	1	25.00	25.00
15 Tailgate '5 pax' sticker	1	25.00	25.00
			110.00
LABOUR			
16 To remove and refit rear windscreen glass	1	150.00	150.00
17 To transfer damaged tailgate interior mechanism to new tailgate	1	120.00	120.00
18 To remove and refit rear bumper sensor	1	100.00	100.00
19 To check and rectify wiring system	1	80.00	80.00
20 To panel beat and straighten rear floorboard panel, LH rear rear chassis frame, to cut and weld rear end panel, including replacement of parts and align where necessary, to refit and adjust the same	1	1,000.00	1,000.00
21 To putty and spray paint on affected areas	1	1,000.00	1,000.00
22 To supply art works & paste decal on LH side panel and tailgate	1	1,800.00	1,800.00
			4,250.00



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1 GATEWAY DRIVE
#15-08 WESTGATE TOWER
SINGAPORE 608531

TEL : 6849 8118 FAX :

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5AT 5DR EURO V

CHASSIS NO : JN1MC2E26Z0009700

ENGINE NO : YD25002832B

REG. DATE : 2017

Estimate Repair Cost to Vehicle No : GBG9296T

Description	Quantity	Unit Price	Amount
		S\$	S\$
		TOTAL	S\$ 9,003.11
		ADD GST @ 7%	630.22
		GRAND TOTAL	S\$ 9,633.33

SINGAPORE DOLLAR NINE THOUSAND SIX HUNDRED THIRTY-THREE AND CENTS THIRTY-THREE ONLY

FOR TONG LUCK AUTO PTE LTD

AUTHORISED SIGNATURE



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

AXA INSURANCE SINGAPORE PTE LTD
8 SHENTON WAY
#24-01 AXA TOWER
SINGAPORE 068811

08 June 2022

Attn: MOTOR CLAIMS DEPT

Dear Sirs / Madam,

RE: ACCIDENT INVOLVING VEHICLE NO.: GBG9296T & SHC8871P ON 30/04/2022 @ 13:45 HRS
ALONG BEDOK NORTH ROAD

We hereby authorized by our client **DAIMLER FLEET MANAGEMENT S'PORE PTE LTD**, the owner/driver of the above mentioned vehicle No.: **GBG9296T**

We notice that the above accident was caused by your insured/driver negligent driving and/or management of motor vehicle No.: **SHC8871P**

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.: **GBG9296T** and vehicle No.: **SHC8871P** 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	01/05/2022 17:15 (SGT)
Date of Accident	30/04/2022 13:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG BEDOK NORTH ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG9296T
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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	derrick.lee@mercedes-benz.com
Mobile Phone No	(Phone) +65-68498118
Alternative Phone No	(Office) +65-68498118

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv350
Variant	PANEL VAN 2.5 5AT 5DR EURO V
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	2488

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	NA

DRIVER

Name of Driver	KATTA RAMALINGESWARA RAO
Work Permit No	GXXXX695R

Date Of Birth	30/10/1971
Occupation	Outdoor
Date Of Driving Pass	13/08/2004
Driving experience	17 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91051050
Alt. Phone Number	-
Email Address	rao82399923@gmail.com
Address	526 BEDOK NORTH STREET 3
Address complement	#08-468
Postcode	460526
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Paid Driver
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	Collision - Head to Rear
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 vehicle 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

I was traveling straight along Bedok north road as third party vehicle on my right come more to the left I slowed down to avoid hitting onto each other but when I was slowing down third party vehicle which was behind me collided onto my vehicle rear left area. No injuries involved.

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	SHC8871P
Vehicle Manufacturer	Hyundai
Vehicle Model	Ae ioniq
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Taxi
Name of Driver	PEK KHOON TECK
NRIC No	SXXXX104E

Contact Number	(Phone) +65-96221635
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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:

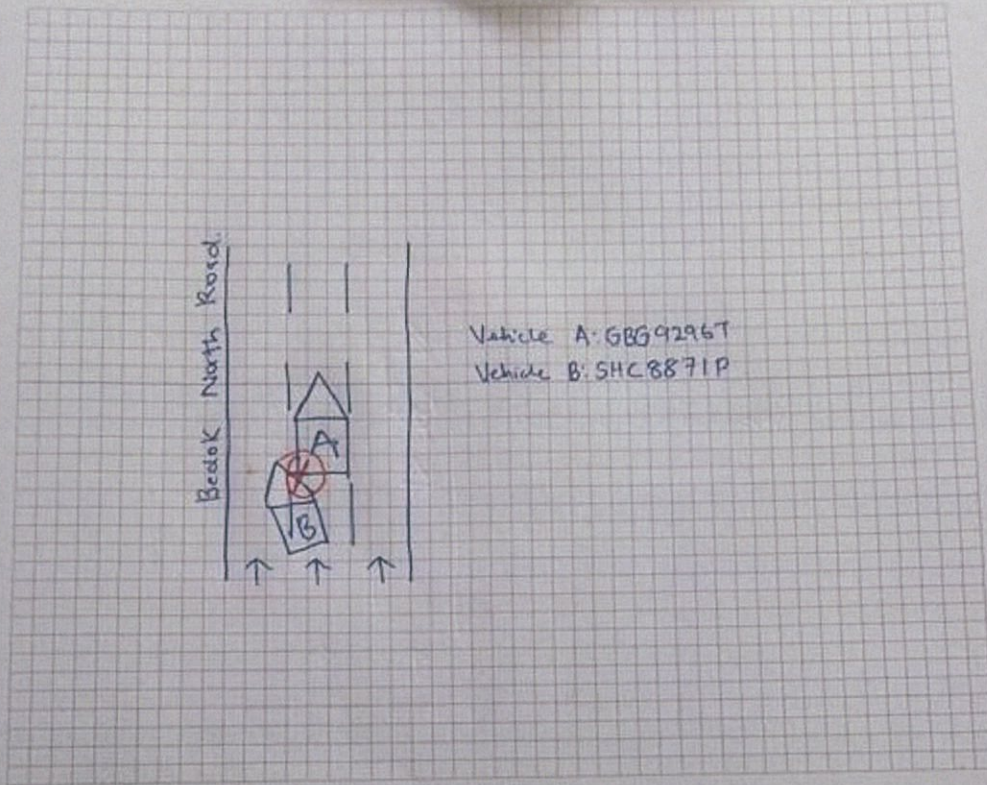
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

1 May 2022

ACCIDENT DIAGRAM

Ver. 30042021



Policyholder's Signature
Date & Time:

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

VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SAIFULLAH S/O SYED MASOOD

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

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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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:

1 May 2022

VERIFY BY AJAX MARS (ARC)

REPORTING OFFICER

MOHAMED SAIFULLAH S/O SYED MASOOD

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