



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

22 September 2022

Attn: MOTOR CLAIMS DEPT

Dear Sirs / Madam,

RE: ACCIDENT INVOLVING VEHICLE NO.: SMZ2835D & SH9052Z ON 19/09/2022 @ 07:00 HRS
LORONG CHUAN

We hereby authorized by our client **DAIMLER FLEET MANAGEMENT S'PORE PTE LTD**, the owner/driver of the above mentioned vehicle No.: **SMZ2835D**

We notice that the above accident was caused by your insured/driver negligent driving and/or management of motor vehicle No.: **SH9052Z**

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.: **SMZ2835D** and vehicle No.: **SH9052Z** 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



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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

ESTIMATE

NO : QUOT202209-000038(00)
DATE : 22/09/2022
POLICY NO : 999995580
VEH REG NO : SMZ2835D
MAKE/MODEL : MERCEDES BENZ GLB 180
AMG LINE
CHASSIS NO : W1N2476842W100445
ENGINE NO : 28291480493339
REG. DATE : 2020

YOUR REF NO : SH9052Z
CLAIM TYPE : THIRD PARTY
TP INS. CO. : AXA INSURANCE SINGAPORE PTE LTD
ACCIDENT DATE : 19/09/2022
TP VEH REG NO : SH9052Z

Estimate Repair Cost to Vehicle No : SMZ2835D

Description	Quantity	Unit Price	Amount
		S\$	S\$
NET PRICE			
1 Front bumper	1	1,578.00	1,578.00
2 Front bumper outer garnish	1	135.00	135.00
3 Front bumper side retainer RH	1	55.00	55.00
4 Front bumper sensor RH	1	215.00	215.00
5 Headlamp RH	1	3,480.00	3,480.00
6 Front wheel arch panel RH	1	250.00	250.00
			5,713.00
		Less 10%	571.30
			5,141.70
LABOUR			
7 To check and rectify wiring system	1	80.00	80.00
8 To panel beat front bumper, including replacement of parts and align where necessary, to refit and adjust the same	1	650.00	650.00
9 To putty and spray paint on affected areas	1	800.00	800.00
10 To apply rust-proofing on replaced and repaired panels	1	150.00	150.00
			1,680.00
		TOTAL	S\$ 6,821.70
		ADD GST @ 7%	477.52
		GRAND TOTAL	S\$ 7,299.22

SINGAPORE DOLLAR SEVEN THOUSAND TWO HUNDRED NINETY-NINE AND CENTS TWENTY-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 Actual Driver
3. Information provided must be as truthful and accurate as possible. Any willful 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	20/09/2022 00:50 (SGT)
Reported by	Driver
Date of Accident	19/09/2022 07:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Lorong Chuan
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ2835D
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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	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	GLB 180 AMG LINE
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	Private car
Transmission	Auto
CC	0

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	999995580

DRIVER

Name of Driver	LAU KIT LING
NRIC No	SXXXX950I
Date Of Birth	27/12/1982
Occupation	Indoor

Date Of Driving Pass	01/09/2003
Driving experience	19 YEARS
Gender	Female
Mobile Number	(Phone) +65-91133523
Alt. Phone Number	-
Email Address	angelalau82@gmail.com
Address	Charlton Park, 139 Aroozoo Avenue
Address complement	-
Postcode	539890
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?	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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

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

My vehicle was parked stationary waiting for my passenger to alight when suddenly vehicle B brushed against my vehicle. My front right was badly scratched. No injury involved.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH9052Z
Vehicle Manufacturer	Hyundai
Vehicle Model	Ae ioniq
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	KOH AH CHWEE

NRIC No	SXXXX597C
Contact Number	(Phone) +65-96262795
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

PASSENGER 1

Name	PASSENGER 1
Gender	Male

PASSENGER 2

Name	PASSENGER 2
Gender	Female

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 SHARIL BIN SATAR**

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

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was parked stationary waiting for my passenger to alight when suddenly vehicle B brushed against my vehicle. My front right was badly scratched. No injury involved.

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
MOHAMED SHARIL BIN SATAR**

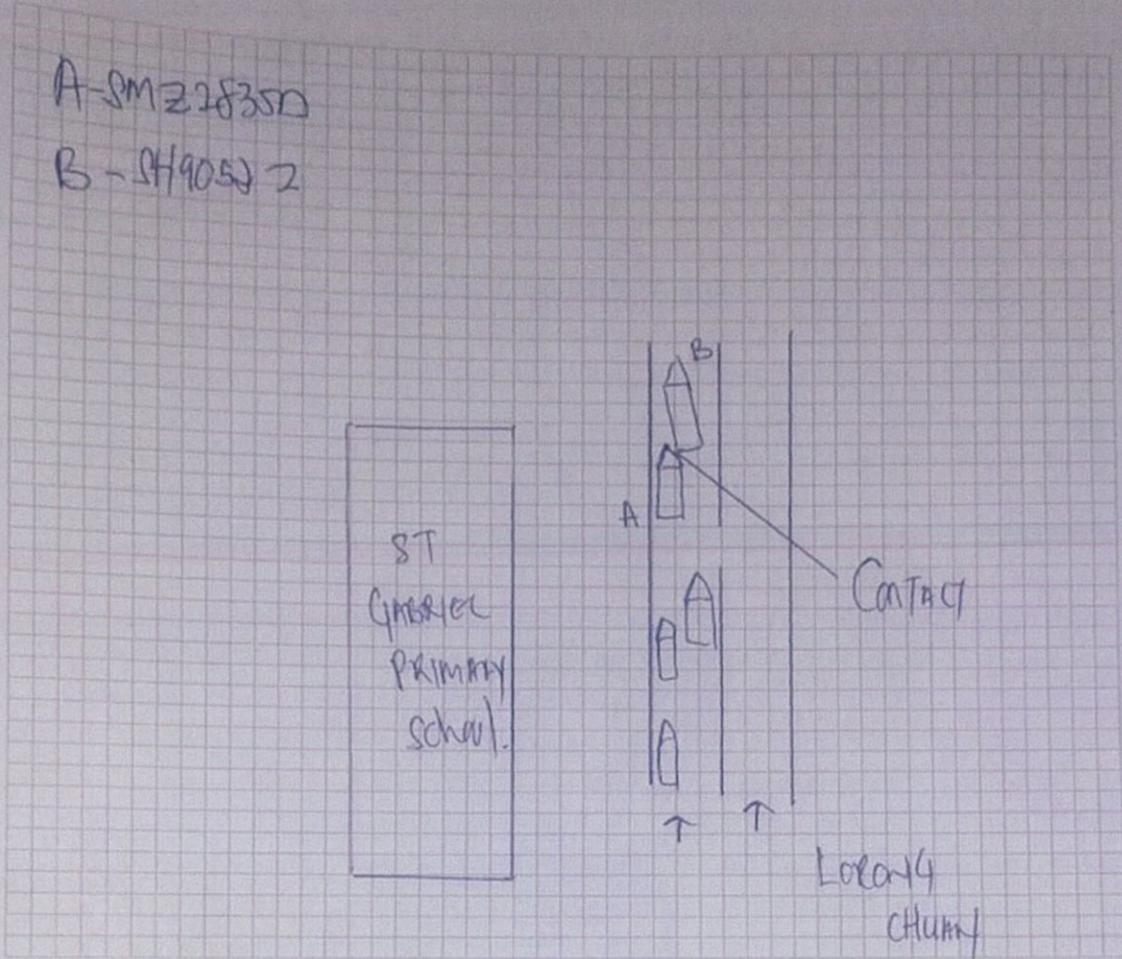
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

ACCIDENT DIAGRAM

Ver. Jun2022

A - SM 2283SD

B - SH905J 2



Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer
Mohamed Sharil Bin Satar

Witnessed by Reporting Centre Personnel