



## 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 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	29/04/2023 12:23 (SGT)
Reported by	Actual Driver
Date of Accident	20/01/2023 09:30 (SGT)
Exact Location of Accident	29 Fernvale Rd, Singapore 797416
Additional Location Information	HIGHPARK RESIDENCE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNJ104R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE PTE LTD
Company Reg No	1XXXXX778Z
Email Address	too_tong.tan@mercedes-benz.com
Mobile Phone No	(Phone) +65-94819062
Alternative Phone No	(Office) +65-82821711

### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	S450I
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	2999

### INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2003907937

### DRIVER

Name of Driver	TEO KOK CHYE
NRIC No	SXXXX280J
Date Of Birth	31/05/1965



Occupation .....	Indoor
Date Of Driving Pass .....	10/03/1983
Driving experience .....	39 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-94819062
Alt. Phone Number .....	-
Email Address .....	too_tong.tan@mercedes-benz.com
Address .....	116 SIMEI STREET 1 #10-580
Address complement .....	-
Postcode .....	520116
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 .....	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 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

ON 20/01/23 AT ABOUT 0930HRS, I WENT TO 29 FERNVALE ROAD, HIGH PARK RESIDENCE TO WASH VEHICLE A (SNJ104R) THAT'S WHEN I NOTICED THERE WERE DAMAGES TO THE REAR PORTION OF VEHICLE A. NO INJURIES.

I AM REPORTING ON BEHALF OF VEHICLE A.

#### 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 .....	UNKNOWN
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-

Vehicle Category .....	NA / Unknown
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

## SKETCH PLAN

### IMPORTANT NOTICE

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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 center 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/sit outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

280423 1830

FLASH ACCIDENT REPORTING OFFICER

FRO AMIN

Witnessed by Reporting Centre Personnel

### Sketch Plan

<p>A - SNJ104R B - UNKNOWN</p>		<p>29 FERNVALE ROAD HIGH PARK RESIDENCE BASEMENT CARPARK</p>
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Describe Circumstances of the Accident

ON 20/01/23 AT ABOUT 0930HRS, I WENT TO 29 FERNVALE ROAD, HIGH PARK RESIDENCE TO WASH VEHICLE A (SNJ104R) THAT'S WHEN I NOTICED THERE WERE DAMAGES TO THE REAR PORTION OF VEHICLE A. NO INJURIES.

I AM REPORTING ON BEHALF OF VEHICLE A.

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  
280423 1830

Witnessed by Reporting Centre Personnel

FLASH ACCIDENT  
REPORTING OFFICER

FRO AMIN





Mercedes-Benz

Cycle & Carriage  
Industries Pte Limited  
Authorised Dealer  
Company No. 196400367W  
GST Reg No. MR-8500111-X

## ESTIMATE FOR SNJ104R

ALLIANZ INSURANCE SINGAPORE PTE.  
LTD.  
MOTOR CLAIM DEPARTMENT  
79 ROBINSON ROAD  
#09-01  
SINGAPORE 068897  
67143369

### Vehicle & Document Information

WIP No **64754**  
Reg No/Reg Date **SNJ104R / 16/12/2022**  
Date In/Mileage **/ 0**  
Chassis No **W1K2231602A1659786**  
Engine No **25693030553090**  
Make/Model **MB/S 450 SEDAN LONG**  
Colour/Trim **025 595 Nautic Blue/ 048 801 Nappa Black**

Account No	Terms	Date/Time Printed	CSE	Operator			
WA000001	Credit	05/05/2023/ 10:31	CH	371 / Go Chee Han			
Description of Goods / Services				Qty	Unit Price	Disc%	Amount

Z REQUEST								
Customer Request								
M BPNSUN								
POLICY NO/ACC DATE : SP2003907937 // 20-1-2023								
DRIVE IN/EXCESS : 28-4-2023 // TBA								
DATE IN/DATE SURVEY:								
BY/AUTHORIZED ON :								
A BPILAB								
DISASSEMBLE AND REPLACE ATTACHED DAMAGED PARTS & REFINISH.								
A BPIRES								
RESPRAY REAR BUMPER								
A BPILAB								
USING XENTRY DIAGNOSTIC TO CHECK ON CONTROL UNIT RESET MEMORY TO IDENTIFICATION STANDARD. NETT								
A BPILAB								
CHECK REAR LIGHTING SYSTEM AND WATER TEST FOR ANY LEAKAGE. NETT								
A BPILAB								
CHECK DAMPING FOR RADAR BEAM ON REAR BUMPER (AFTER QUICK TEST)								
M	REAR BUMPER	1.00	2182.24	00.00		2182.24		
M	LH/REAR BUMPER TRIM STRIP	1.00	116.36	00.00		116.36		
M	RH/REAR BUMPER TRIM STRIP	1.00	116.36	00.00		116.36		
M	REAR BUMPER LOWER PART	1.00	775.93	00.00		775.93		
M	LH/TAILO PIPE TRIM STRIP	1.00	221.12	00.00		221.12		
M	LH/RER BUMPER MOUNTING RAIL	1.00	150.19	00.00		150.19		
M	LH/OUTER REAR LAMP COMBINATION	1.00	833.67	00.00		833.67		

**Go Chee Han**  
DID : 6771 4336 HP : 9181 7717  
Email : cheehan.go@cyclecarriage.com.sg  
Cycle & Carriage Industries Pte Ltd  
Customer Service Centre - Pandan Loop

Confirmed & accepted by

Nett **7,635.87**  
8% GST on **7635.87** **610.87**  
**Total Payable 8,246.74**

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

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Singapore 128378  
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Fax: 6779 5383  
www.mercedes-benz.com.sg



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