



# 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 : MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE P1

1 GATEWAY DRIVE #15-08  
WESTGATE TOWER  
SINGAPORE 608531

TEL : FAX :

ATTN : ACCOUNTS DEPT

YOUR REF NO : SHC1128Z

CLAIM TYPE : THIRD PARTY

TP INS. CO. : HSBC LIFE (SINGAPORE) PTE LTD

ACCIDENT DATE : 06/06/2023

TP VEH REG NO : SHC1128Z

## ESTIMATE

NO : QUOT202306-000012(00)

DATE : 07/06/2023

POLICY NO : SP2003902365

VEH REG NO : GBJ6248L

MAKE/MODEL : MERCEDES BENZ VITO 114 CDI  
PANEL VAN LONG AT ABS 5DR

CHASSIS NO : WDF44760323567924

ENGINE NO : 65195034993265

REG. DATE : 2019

## Estimate Repair Cost to Vehicle No : GBJ6248L

Description	Quantity	Unit Price	Amount
		<u>S\$</u>	<u>S\$</u>
<b>LABOUR</b>			
1 To panel beat LH rear fender & LH sliding and realign the same	1	600.00	600.00
2 To putty and spray LH sliding door & LH rear fender	1	600.00	600.00
3 To supply and paste decal on LH rear fender and LH sliding door	1	500.00	500.00
4 To apply rust-proofing on repaired panels	1	120.00	120.00
			<u>1,820.00</u>
		<b>TOTAL</b>	<b>S\$ 1,820.00</b>
		<b>ADD GST @ 8%</b>	<b>145.60</b>
		<b>GRAND TOTAL</b>	<b><u>S\$ 1,965.60</u></b>

SINGAPORE DOLLAR ONE THOUSAND NINE HUNDRED SIXTY-FIVE AND CENTS SIXTY 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

HSBC LIFE (SINGAPORE) PTE LTD  
38 BEACH ROAD #03-11  
SOUTH BEACH TOWER  
SINGAPORE 189767

10 July 2023

Attn: MOTOR CLAIMS DEPT

Dear Sirs / Madam,

RE: ACCIDENT INVOLVING VEHICLE NO.: GBJ6248L & SHC1128Z ON 06/06/2023 @ 16:00 HRS  
NICOLL HWY TOWARDS KPE TPE

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We hereby authorized by our client **MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE PTE LTD**,  
the owner/driver of the above mentioned vehicle No.: **GBJ6248L**

We notice that the above accident was caused by your insured/driver negligent driving and/or management  
of motor vehicle No.: **SHC1128Z**

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.: **GBJ6248L** and vehicle No.: **SHC1128Z** 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,

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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 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	07/06/2023 11:20 (SGT)
Reported by	Actual Driver
Date of Accident	06/06/2023 16:00 (SGT)
Exact Location of Accident	Nicoll Hwy, Singapore
Additional Location Information	TOWARDS KPE TPE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ6248L
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#### 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) +65-96554237
Alternative Phone No	(Office) +65-82821711

#### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Vito
Variant	-
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	2143

#### INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2003902365

#### DRIVER

Name of Driver	ONG AH CHING
NRIC No	SXXXX839D
Date Of Birth	24/09/1970

Occupation	Outdoor
Date Of Driving Pass	17/12/1991
Driving experience	31 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96554237
Alt. Phone Number	-
Email Address	too_tong.tan@mercedes-benz.com
Address	BLK 277A COMPASSVALE LINK #10-318
Address complement	-
Postcode	541277
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	Collision - Change/cross lane
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 06/06/23 AT AROUND 1600HRS I WAS DRIVING VEHICLE A (GBJ6248L) AT NICOLL HIGHWAY TOWARDS KPE TPE. AS I WAS MOVING STRAIGHT IN LANE, I SUDDENLY FELT AN IMPACT AND SAW THAT VEHICLE B (SHC1128Z) LANE CHANGED ONTO ME AND HIT MY REAR LEFT SIDE. WE STOPPED AND TOOK PICTURES ONLY AND NO ONE WAS INJURED AT THE MOMENT.

#### 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	SHC1128Z
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	Blue

Vehicle Category	Taxi
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**

1. Please correctly report the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized 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. 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 sited outside of Singapore, for one or more of the above Purposes.



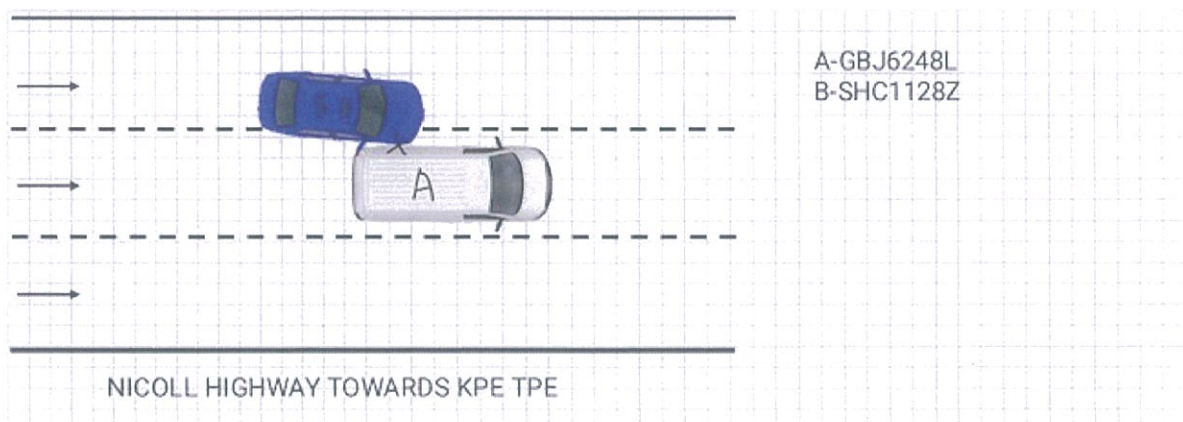
**FLASH ACCIDENT  
REPORTING OFFICER  
FRO ZIKRUL**



Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time  
06/06/23 1830HRS

Witnessed by Reporting Centre Personnel

**Sketch Plan**

Describe Circumstances of the Accident

ON 06/06/23 AT AROUND 1600HRS I WAS DRIVING VEHICLE A (GBJ6248L) AT NICOLL HIGHWAY TOWARDS KPE TPE. AS I WAS MOVING STRAIGHT IN LANE, I SUDDENLY FELT AN IMPACT AND SAW THAT VEHICLE B (SHC1128Z) LANE CHANGED ONTO ME AND HIT MY REAR LEFT SIDE. WE STOPPED AND TOOK PICTURES ONLY AND NO ONE WAS INJURED AT THE MOMENT.

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  
06/06/23 1830HRS

Witnessed by Reporting Centre Personnel

FLASH ACCIDENT  
REPORTING OFFICER  
FRO ZIKRUL

