# TwinCar AUTOMOTIVE PTE LTD

# Company Registration and GST No. 200714616M

2 Kaki Bukit Avenue 2 #01-17 Kaki Bukit Autohub, Singapore 417921

Tel: 67440510

Fax: 67410510

Email: claim@twincar.com.sg

Our Ref:

**SNQ 6606 H** 

Your ref:

**YP 9737 T** 

05 July 2024

## INDIA INTERNATIONAL INSURANCE PTE LTD

BY EMAIL motorclaim@iii.com.sg ONLY

64 CECIL STREET #04-00 & #05-00 IOB BUILDING SINGAPORE 049711

Attn: Motor Claims Department

Dear Sir/Madam,

DATE OF ACCIDENT: 05 July 2024

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS

PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by TWINCAR LEASING PTE LTD to notify you of a road traffic accident on 05 July 2024 at about 07:06 HOURS along KPE TWDS MCE B4 PIE(TUAS) our client's vehicle SNQ 6606 H & YP 9737 T you/your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please be inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,



VEHICLEND: SNQ 6606H	MAKE & MODEL: Toyota Shata Hybrid KUTO/MANUAL					
DATE OF ACCIDENT:	: 05/ 07 / 2024 cc: 1.5 :-					
TIME OF ACCIDENT:	0706 HRS					
EOCATION OF ACCIDENT:	KPE towards MCE before PIE (TURS)					
EXACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE					
NAME OF OWNER:	Twincar Leasing Pte Utol					
IEL NO:	H/p: 83802233 OFFICE: HOME:					
NRIC:	2015 330460					
ADDRESS:	2 Kaki Bukit Avenue 2 #01-17 Kaki Bukit Autohub 8 417.92					
4.	TWINCAR . RENTAL @ NSI . com. SG					
EMAIL:	OD / CHIRD PARTY / REPORTING ONLY					
CLAIM TYPE:						
100	ŸES /NO?					
INSURANCE COMPANY:	Allian 2					
TYPE OF COVERAGE:	Comprehensive) / Third Party / Third Party Fire & Theft					
POLICY NO:	SP 2007 987371					
NAME OF DRIVER:	AS ABOVE / IFNO: Tan Kay Aik					
NRIC:	81431447D ANY PASSENGER: 1 (2M)					
DATE OF BIRTH:	28 / 04 / 1960 LICENCE PASSED DATE: 12 / 03 / 1984					
OCCUPATION:	outdoor /(INDOOR).					
GENDER:	MALE FEMALE					
GONTACT NO:	H/P: 8877 7830 OFFICE: HOME:					
ADDRESS:	Apt BIK 637A Tampines Street 62 # 11-14 3 521637					
EMAIL:						
OOES DRIVER OWNED ANY VEHICLE:	IF YES, REG NO: INSURER;					
ELATIONSHIP:	Horer					
WEATHER CONDITION:	CLEAR) RAINING / OTHERS:					
OAD SURFACE:	(DRY) / WET / OTHER:					
NY INJURIES:	NO / IRYES, WHO?					
IAME & CONTACT:	Tan Key Aik (8877 7830)					
IAME & CONTACT:	1. (at) reg AIR ( 00+1 1000 )					
<del></del>	SIGN LEVES WHITEEN					
OLICE REPORT:	NO)/ IF YES; WHERE?					
OTICE OF INTENDED PROSECUTION GIVEN?	NO/ IF YES, WHO?  ANY PASSENGERS: NA					
EHICLE B REG NO:						
AME OF DRIVER:	Namadasan Odna					
EHICLE C REG NO:	ANY PASSENGERS:					
EHICLE D REG NO:	ANY PASSENGERS:					
EHICLE E REG NO:	ANY PASSENGERS:					
EHICLE FREG NO:	ANY PASSENGERS:					
EHICLE G REG NO:	ANY PASSENGERS:					
thy Witness? IF yes, Name?	- Witness Contact:					
AS THERE ANY VIDEO CAPTURE?	DES/NO.					
AS THERE ANY AUDIO RECORDED?	SES / NO					
CCIDENT SCENE PHOTOS TAKEN?	YES)/ NO					
CCIDENT PORTION:	Rear portion					
yế you been approach by unknown person soliciting Is	17 offerling accident claims assistance? YES (NO)					
ORKSHOP PARTICULAR:	Twincar Automotive Pte Ltd					
DNTACT NO:	68420051 / 67440510					
ONTACT PERSON:	3 deve 88215151					
X NO:	67410510					
ORKSHOP EMAIL:	sales@n51.com.sg					

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Declaration

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

Policyholdar's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

#### 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 Actual Driver.
- Information provided must be as <u>fruthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 faise reporting may be referred to the Traffic Police Department for investigation.
- 6. This report will be forwarded by the insurers to 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.
- 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.
- 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 GtA 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.

Policyholder's Ergnature / Dale & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

	KPE towards MCE	
	RPE founds MCE before PIE (Tuas)	······································
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	vehicle A: SNB 6606 H	
	Vehicle B: YP:97377	
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