Chunni Motor Work

PTE LTD

BY MAIL

Your Ref: SGA 473 K

RECEIVED
2 1 FEB 2018
LONPAG

S'PORE

17/17/17/VPO5/020284

Date: 13-02-2018

M/s Lonpac Insurance Bhd 100 Beach Road #19-00 Shaw Towers Singapore189702

Our Ref: SHD 3207 K (141217)

WITHOUT PREJUDICE

Attention: The Officer-In-Charge

Motor Claims Department

Dear Sir/Madam

ACCIDENT INVOLVING SHD 3207 K & SGA 473 E AT THE JUNCTION OF BUANGKOK DRIVE X HOUGANG AVENUE 6 ON 14-12-2017

We refer to our client's Letter of Demand dated 29-01-2018 together with all the necessary supporting documents inclusive the Video footage.

From the Video footage, the liability is clear.

We are instructed by our client to enclose the Addendum with the police report of SHD 3207 K for your kind attention.

This is a Direct Settlement, kindly reciprocate to expedite this matter and revert with your offer of an amicable settlement as soon as possible.

Thank you.

Yours faithfully,

For CHUNNI MOTOR WORK PTE LTD

Claims Department

Enc



Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	••••			
(A)	PARTICULARS OF PER	RSON MAKING THE AMENDMENTS	:			
	Original Report No :	MCD617164950-01	_Vehicle Registration No: SHD 3207K			
	Name(as shownin NRIC):	Thulasidharan Nair s/o Bhaskaran	_NRIC/FIN/PassportNo: S 1842746E			
	Vehicle Driver / Vehicle Owner) () Please delete as appropriate					
	Address :		Singapore(
	Contact (Tel) :		Mobile No.:			
Email Address :						
	Date of Accident :	14/12/2017	_Time of Accident : 22:00Hrs			
Place of Accident : Buangkok Drive x Hougang Ave 6						
InsuranceCompany: First Capital Insurance Ltd						
В)	ADDITIONALINEODA	MATION/AMENDMENTS:				
	Submit Police Report	menaments: t No.:T/20180207/2105				
			A STATE OF THE PARTY OF THE PAR			



Police Station Of Origin:

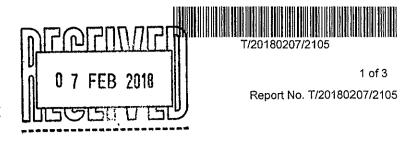
Pasir Ris N.P.C

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

REPORT OF A TRAFFIC ACCIDENT



Date/Time Report Made: 07/02/2018 15:21		Vide Report No.:	Station Diary No.:			
Informa	nt's Particu	lars				
Name of Informant:			Address:			
THULASIDHARAN NAIR S/O			APT BLK 60 GEYLANG BAHRU #03-3311 SINGAPORE			
BHASKA	RAN PILLA	N	330060			
ID Type.	/ ID No.:		Contact No.:	Contact No.:		
NRIC NO) / S184374	ŀ6E	Home/Office: Mobile: 84246397			
Nationali	•		Email:			
	ORE CITIZ					
Sex: Age: Date of Birth:			Type of Informant:			
Male	54	16/10/1963	Driver			
Race:		Language:	Institution / School Name:			
Malayale	е					
Occupation:			Driving Licence Information:			
Taxi driver			Class: 3	Date of Expiry:		

General Infor	mation of the Accide	ent				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 14/12/2017 22:0	00	Type of Location: X-Junction	
Location: Junction of R BUANGKOK HOUGANG						
Weather:		Road Surface:			Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Wo	Traffic Control: Traffic Light - Working		Traffic Volume: Light	
Type of Collis	sion:	wipe - Opposite Direct	ion		one conveyed by ulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGA473E	Car				Slightly	1
					Damaged	
SHD3207K	Car				Slightly	2
				₩	Damaged	

Details of Person Involved	
Any Pedestrian Involved: No	·
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





2 of 3 Report No. T/20180207/2105

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Tel No: 1800-5852999

CONTINUATION OF REPORT

Driver				
Name	THULASIDHARAN NAIR S/O BHASKARAN PILLAI	ID No.	S1843746E	
Related Vehicle	NIL		Contact No.	84246397
Hospital/Clinic	NIL •		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL ·	Date Disc	harge NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	Injury NIL	

Brief Details.

On the 14/12/2017 at about 2150hrs, I (SHD3207K) was travelling along Buangkok Drive junction of Hougang Avenue 6. At that point of time, I was with 2 passengers on bord my taxi. I was travelling at the extreme left lane, with the intention of going straight. The traffic light at that point of time, was green in my favor. I had already passed the stop line when suddenly another vehicle (SGA473E) from the opposite side, made a right turn without giving way to me and subsequently collided onto the front portion of my taxi. My bumper was dented and the front left light glass cover was damaged due to the collision.

At the point of the accident, there were no injury sustained on both parties. I do have a CCTV footage to support my claims, and those footages are already with my company. I do not have the full particulars of the person, I only have his name as Lee Biaw Kok, S1136182Z, HP:90700532.





3 of 3 Report No. T/20180207/2105

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Tel No: 1800-5852999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The	e,Report:	Signature Of Informant:
G / Sgt 2 AMAL NADHIRAH BINTE JU	JFRI /	Jums
Signature Of Interpreter:		Date/Time:
Not applicable		07/02/2018 15:21
, , , , , , , , , , , , , , , , , , ,		
Officer In Charge Of Case:		Classification Of Case:
TP / GIA / Staff Sgt TANG SIEW PING		
Contact No.: 65476430	Challen Comment of the Company of th	
	SINGAPORE	
Authentication Stamp POLICE F		CE
NP168		
·		SIGNATURE