

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 67414108

Our Ref: CC4/EQI18003857/Wmb3

12 APRIL 2018

SP ELECTRICAL PTE LTD
BLK 1020 TAI SENG AVENUE 
#02-3508
SINGAPORE 534416

Dear Sir/Madam,

## ACCIDENT INVOLVING GBC 8154Y AND SKR 2959X ON 09/02/2018

We refer to the above accident where we are acting for EQ INSURANCE COMPANY LIMITED to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD)(if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

Bevan Lim Case Handler DID: 6749 4274 FAX: 6741 4108

Email: bevanlim@lkkauto.com

c.c. EQ INSURANCE COMPANY LIMITED (Motor Claims Dept)



## GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours: Monday to Friday, 09:00 – 17:00 UEN: S66550020G / 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

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(A)	PARTICULARS OF PERSO	NMAKINGTHEAMENDM	IENTS:	
	Original Report No :		Vehicle Registration No:	GBL 81547
			NRIC/FIN/Passport No :	
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate			
	Address :			Singapore(
	Contact (Tel) :		Mobile No. :	
	Date of Accident :	69/02/218	Time of Accident :I	900
	Place of Accident ;	ANSON ROAD	TOWARDS TELOK AYER HAW	KER CENTRY
	Insurance Company:	EQ INSURANCE		
(B)	ADDITIONALINFORMAT			
		Of Accidence 30	100 DE 09/02/2018	. HIM I ALL
	- KINAM and	nend e ct		
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	Policyholder / Driver's Sign Date:	ature	Reporting Centre Perso Name: NRIC/FINNo.:	nnel's Signature

Date: