

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

Our Ref: CC6/AIG18007144/Aha3

26th April 2018

## **CHAN CHOI FOONG**

38 Lorong Tanggam Singapore 798739

Dear Sir/Madam,

## ACCIDENT INVOLVING SKD 8614A AND SJG 5781R ON 09.04.2018

We refer to the above accident where we are acting for AIG Asia Pacific Insurance Pte Ltd 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 7 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,

Chong Poh Kin Case Handler DID: 6841 2132

FAX: 6741 4108

Email: vicalpeh@lkkauto.com

c.c. AIG Asia Pacific Insurance Pte Ltd (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: S66SS0020G / GST Reg. No.: M400017735

**IMPORTANT NOTE**: Please submit the completed Addendum form to the **same** Authorised Reporting Centre

with whom you submitted the Original Report.

	A	ADDENDUM
	RSON MAKING THE AME	
Original Report No:		Vehicle Registration No: SkD 86149
Name(as shown in NRIC):		NRIC/FIN/Passport No:
(*Vehicle Driver / Ve	hicle Owner) (*) Please o	delete as appropriate
Address :		Singapore( )
Contact (Tel)		Mobile No. :
Email Address :		
Date of Accident :	09/4/2018	Time of Accident:Hours
Place of Accident :		
Insurance Company:	MIS AIG ASIA PAI	LIFIC INSURANCE PTE LTD
		- By mall - Or Fox 1 6741 4108
		-OLE-WOILS VICALPEH@LKKAV
1		
Policyholder / Driver' Date:	s Signature	Reporting Centre Personnel's Signature Name: NRIC/FIN No.: Date: