Margaret Loh

Woon Choo Kwok From:

Wednesday, 1 August 2018 5:08 PM Sent: To: Katherine Wong; Margaret Loh

Cc: Foo Ai Ngoh

Subject: FW: OUR REF: 1808-02 // YOUR REF: SJZ5203T REQ FOR PRE- REPAIRINSPECTION

SJQ1137A

Attachments: GIA REPORT FOR SJQ1137A.pdf

SIZ5203T alleged rollision with SJQ 1137A Dear officers

fya

Best Regards

Kwok Woon Choo

Senior Admin Officer, Claims Services

Tel: 6643 1330 Fax: 6225 7402 | woonchoo_kwok@sg.msig-asia.com





Insurer Claims Team of the Year

MSIG Insurance (Singapore) Pte Ltd 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | T: +65 6220

9644 | F: +65 6225 6371 | Co. Reg. No. 200412212G | msig.com.sg

TP-3000

NCD- Yes (Protector)

A Member of MS&AD INSURANCE GROUP

From: Koh Lay Hoon

Sent: Wednesday, August 01, 2018 5:05 PM

To: Woon Choo Kwok < WoonChoo_Kwok@sg.msig-asia.com>

Subject: FW: OUR REF: 1808-02 // YOUR REF: SJZ5203T REQ FOR PRE- REPAIRINSPECTION SJQ1137A

From: Teamwork Garage Pte Ltd [mailto:claims@teamworkgarage.com]

Sent: Wednesday, August 01, 2018 4:55 PM

To: Claims <claims@sg.msig-asia.com>; Hasrianah Binte Hassan <hasrianah@sg.msig-asia.com>

Cc: claims@teamworkgarage.com

Subject: RE: OUR REF: 1808-02 // YOUR REF: SJZ5203T REQ FOR PRE- REPAIRINSPECTION SJQ1137A

Dear Motor Claims,

Please see attached for GIA report.

Regards,

Vivi Teamwork Garage Pte Ltd Blk 53 Ubi Avenue 1 #01-24

Paya Ubi Industrial Park Singapore 408934

Tel: 6844 2475 Fax:6844 2474

From: Teamwork Garage Pte Ltd

Sent: Wednesday, 1 August 2018 4:43 PM
To: 'MSIG - CLAIMS'; Hasrianah Binte Hassan

Cc: claims@teamworkgarage.com

Subject: OUR REF: 1808-02 // YOUR REF: SJZ5203T REQ FOR PRE- REPAIRINSPECTION SJQ1137A

WITHOUT PREJUDICE

OUR REF: 1808-02 YOUR REF: SJZ5203T

Dear Sir/Madam,

PRE-REPAIR INSPECTION FOR SJQ1137A ACCIDENT INVOLVING SJQ1137A AND SJZ5203T ON 28.07.18

We refer to the above matter and enclosed herewith our client's GIA report and Notification of Pre-repair inspection for your attention.

Please let us have your list of surveyors for us to select as stated in the Practice Direction – Amendment No. 1 of 2016; Pre-action Protocol within 2 working days as of the date of our notice to you.

Please take note: We will not entertain any of your surveyor calling us for the above inspection, without you giving us your list of surveyors for us to select by the Practice Direction of Pre-repair Inspection.

Regards,

Vivi Teamwork Garage Pte Ltd Blk 53 Ubi Avenue 1 #01-24 Paya Ubi Industrial Park Singapore 408934 Tel: 6844 2475 Fax:6844 2474 This e-mail (including any attachments) may contain information that is privileged or confidential. The sending of this e-mail to any person other than the intended recipient is not a waiver of the privilege or confidentiality that attaches to it. If you are not the intended recipient, please notify the sender immediately, delete the email and do not copy, distribute or disclose its contents.

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 Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 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 Insurence 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 aforesald.

all formations comments a comment of a comment of the comment of t	ACCIDENT STATEMENT	
Date Of Report	31/07/2018 17:10	
Date Of Accident	28/07/2018 11:20	
Exact Location Of Accident	HAIG RD TWDS AMBER RD AT JLN TEMBUSU JUNC	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJQ1137A	

SJQ1137A

Insured/Policyholder

Name Of Registered Owner ROSET LIMOUSINE SERVICES PTE LTD

Co Reg No 200406722Z **Email Address** NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-68445225

Vehicle Particulars

Manufacturer TOYOTA Model **ALTIS** Exact Purpose for which vehicle was being used at **GRAB**

time of accident

NO

Are you claiming under your own insurance policy for repair to your vehicle?

If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE HIRE

Insurance Company

EQ INSURANCE COMPANY LTD Name of Insurance Company

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number DMCFHQ17-000185

Cover Note Number

Driver

Name of Driver LIM HUNG TENG

NRIC No S8724922J Date Of Birth 19/08/1987 Occupation **OUTDOOR Date Of Driving Pass** 26/10/2007

Driving Experience 10 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94231133

Fax Number Contact Number

EMail Address NOEMAIL Address

BLK 709 TAMPINES ST 71

#04-110

Postcode

520709

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

£

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

I WAS ON HAIG ROAD TURNING RIGHT ONTO JLN TEMBUSU JUNC, BEFORE MOVING OFF I CHECKED AND MAKE SURE THERE WAS NO ONCOMING VEH.OUT OF A SUDDEN A CAR OVERTOOK ME FROM MY RIGHT AND WENT ONTO THE OPPOSITE DIRECTION AND HIT ONTO THE FRT RIGHT PORTION OF MY VEH.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NΩ

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJZ5203T

Vehicle Make/Model/Colour

BMW 320

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

DING HAI S6960778J

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

Approximate Age Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

LIM HUNG TENG

BACK & NECK SJQ1137A

YES

NO

Accident Sketch Plan

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Hate O tens: —

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Date & Time.

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Individual Statement

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