

# ACCORD AUTO SERVICES PTE LTD

10 ANG MO KIO INDUSTRIAL PARK 2A

#03-11 AMK AUTOPOINT

SINGAPORE 568047

Tel: 6481 9518 / 6481 9517 Fax: 6481 9516

Email: [claims@mvcworkshop.com.sg](mailto:claims@mvcworkshop.com.sg)

Date: 22/02/2019

AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way

AIG Building #09-16

Singapore 079120

Att: Accident Claims Department

Fax: 6415 3727

Dear Sir/Mdm,

**NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2  
WORKING DAYS PURSUANT TO PARAGRAPH 6.2 OF PRE-ACTION  
PROTOCOL FOR NIMA CASES**

We have been appointed by **ACCORD CAR LEASING PTE LTD** to repair his motor vehicle no. **SKA553K**.

Please provide us the 10 surveyor name list and advise liability.

Please be informed that the said vehicle can be inspected at:

Accord Auto Services Pte Ltd

10 Ang Mo Kio Industrial Park 2A

#03-11 AMK Autopoint

Singapore 568047

If you fail to conduct the pre-repair inspection within the next 2 working days excluding any intervening Saturday, Sunday or Public Holiday, we will commence repairs thereafter without further reference to you.

Yours faithfully,

22/02/2019

Jessy Soe

***NB: Any settlement of offer is on the express condition that this settlement is in respect of our client's claim for property-related damages only and shall not preclude our client from claiming injury-related damages arising from this accident.***

MAAP19024640 / AMK Autopoint Pte Ltd - HQ  
 ENTRY DATE & TIME: 22/02/2019 10:46  
 SUBMITTED BY: Joelle Tan Siew Hoon

## 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 withholding of material facts may allow insurance companies to repudiate policy liability.
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 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.
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 aforesaid.

### ACCIDENT STATEMENT

Date Of Report	22/02/2019 10:46
Date Of Accident	21/02/2019 13:15
Exact Location Of Accident	ROCHOR ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA553K
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#### Insured/Policyholder

Name Of Registered Owner	ACCORD CAR LEASING PTE. LTD.
Co Reg No	201803722K
Email Address	ACCORDCARLEASING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97679518
Alternative Phone No	OFFICE-64819518

#### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	NEW GOLF 1.4 TSI AT 5K14Q5
Exact Purpose for which vehicle was being used at time of accident	GRAB
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

#### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5098053354-01
Cover Note Number	

#### Driver

Name of Driver	ATIKAH BINTE SA'AT
NRIC No	S9332039E
Date Of Birth	30/08/1993
Occupation	OUTDOOR
Date Of Driving Pass	18/12/2014
Driving Experience	4 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81279595
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address BLK 708 CLEMENTI WEST STREET 2 #09-313  
 Postcode 120708  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured OTHER - HIRER & LEASEE  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

#### General Information of the Accident

Type Of Accident CHAIN COLLISION  
 Weather Conditions CLEAR  
 Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles (including own vehicle) involved in the accident 3  
 Was any body injured in the Accident? NO  
 Was any injured conveyed to hospital by ambulance? NO  
 Was any other material or property damaged? YES  
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
 Number of Passengers (including Driver) 3  
 Passenger 1  
 NAME: : UNKNOWN  
 GENDER: : MALE  
 Passenger 2  
 NAME: : UNKNOWN  
 GENDER: : FEMALE

#### 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

PLEASE REFER TO ACCIDENT STATEMENT AS ATTACHED.

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: VIDEO WILL BE SEND VIA EMAIL  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMA7858L  
 Vehicle Make/Model/Colour TOYOTA / COROLLA / ALTIS  
 Details Of Properties  
 Vehicle Category PRIVATE HIRE  
 Name of Driver DANNY TEO SOO HUP (ZHANG SIHE)  
 NRIC/Passport Number S7839759D  
 Contact Number  
 Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

GBF5162C

Vehicle Make/Model/Colour

VOLKSWAGEN / CADDY

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

MOHAMED GABRIEL IMRON S/O MOHAMED ELLIAS

NRIC/Passport Number

S9400051C

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

## Sketch Plan

SKETCH PLANIMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to reassess policy liability.
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. The report will be forwarded by the insurers of 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.
7. By the lodgment 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 GIA 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

**ACCORD CAR LEASING PTE LTD**  
 ROC NO. 201803722K  
 1009 Bukit Merah Lane 3  
 #01-80 Singapore 159723

Policyholder's Signature  
 Date & Time:

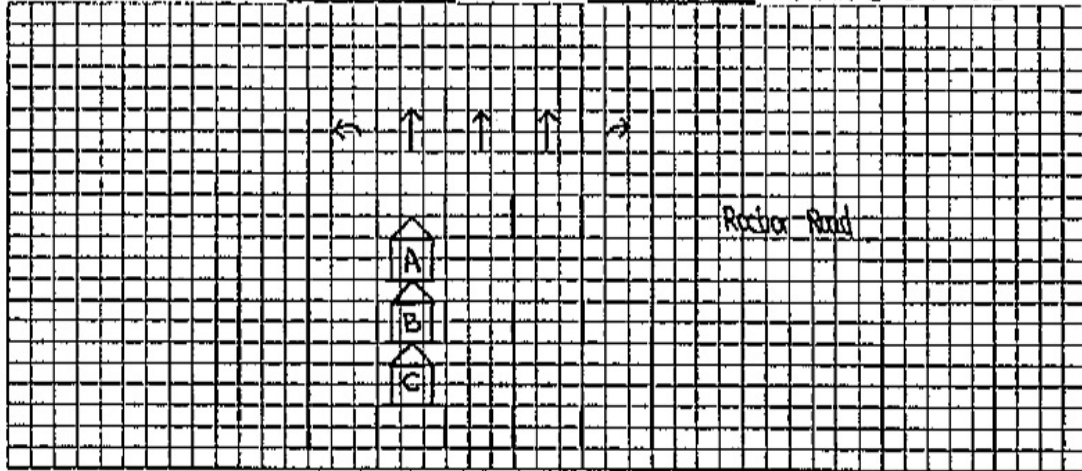
Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:

Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

*Walek Tan*  
 AMK AUTOPOINT PTE LTD  
 22.02. 2019

## Sketch Plan #2

SKETCH PLAN Vehicle A: SKA 553K Vehicle B: SMA7858L Vehicle C: 6BF5162C



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Date of Accident: 21/02/2019 Time of Accident: 1:15pm

On 21/02/2019 around 1:15pm, I was travelling along Rochor Road. The traffic was moving slowly. My front vehicle was moving slowly and braked so I follow suit. Suddenly I felt an impact from rear portion, vehicle B (SMA7858L) hit onto rear portion of my vehicle. I alighted and realised there were chain collision with vehicle B (SMA7858L) and vehicle C (6BF5162C).

## DECLARATION

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

ACCORD CAR LEASING PTE LTD  
 ROC NO. 201803722K  
 Date & Time:  
 1009 Bukit Merah Lane 3  
 #01-80 Singapore 159723

Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:

Reporting Centre Personnel's Signature  
 Name: Joelle Tan  
 NRIC/FIN No.: AMK AUTOPPOINT PTE LTD  
 22.02.2019

2/22/2019

Receipt

[> Back to OneMotoring](#)

Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 22 Feb 2019 / 15:46:36

Receipt Date/Time : 22 Feb 2019 / 15:46:36

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-190222-002759

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SMA7858L				
As at 22 Feb 2019/13:15:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SMA7858L Enquiry Fee 20190222154454986750	7.00	0.49	7.49
	<b>Sub-Total</b>	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	<b>Rounding Difference</b>			0.04
	<b>Total Amount Payable</b>			7.45
Paid By				
	xxxxxxxxxxxx5538	Credit Card: Visa/MasterCard		7.45
	<b>Total</b>			7.45
	<b>Cash Change</b>			0.00
	<b>Tendered Amount</b>			7.45
	<b>Excess Refundable Amount</b>			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.