


Cheonghoh Law Corporation

(Incorporated with limited liability) Blk 53 Chin Swee Road #03-05 . Singapore 160053
Co. Reg No.201108070G Tel: 63378700 Fax: 63373700 E-mail: mail@cheonghoh.sg

In reply please quote our Reference Number

Our Ref: LCH.lg/SMSL-90368.19

13.05.19

 **BY FAX NO. 68357416 AND BY HAND**
AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way #07-16
Singapore 079120

BY CERTIFICATE OF POSTING
Chia Lingxian
34 Farleigh Avenue
Singapore 557870

BY CERTIFICATE OF POSTING

Dear Sirs

We are instructed by Tan Bros Gas Supply to notify you of a road traffic accident on 09.05.19 at about 11:45 am at Farleigh Road - Infront House No. 36) involving our client's vehicle registration number GZ 1311 B and vehicle registration number SLH 8441 Z driven by your insured driver/you/your driver at the material time. A copy of the Singapore accident statement filed is available.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

For the avoidance of doubt, our client will be claiming for compensation for loss of use/rental of a replacement vehicle in the instances enumerated in the State Courts Practice Direction Amendment No. 1 of 2016 paragraphs 7.1 and 7.2 of the Appendix C of the Pre-action Protocol for Non-Injury Motor Accident Cases which compensation is additional to any other claim for loss of use/rental of a replacement vehicle which our client may make against your insured and/or your insured's driver and or you/your driver.

Yours faithfully

Cheonghoh Law Corporation

encs:

This is a computer-generated document and requires no signature

cc: client (via e-mail/fax only) - GZ 1311 B

Enquire Vehicle & Owner Information (Vehicle No. SLH8441Z As At 09 May 2019 / 11:45:00)**Law Firm Search Details**

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: SMSL-90368.19/LG

Current Owner Details

Owner ID Type: Singapore NRIC

Owner ID: S8620524F

Owner Name: CHIA LINGXIAN

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House
No.: 34

Registered Street Name: FARLEIGH AVENUE

Registered Unit No.: -

Registered Building Name: -

Registered Postal Code: 557870

Current Vehicle Details

Vehicle No.: SLH8441Z

Make Description/Model: MAZDA / MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT

Insurance Company Name: AIG ASIA PACIFIC INSURANCE PTE. LTD.

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	10/05/2019 09:18
Date Of Accident	09/05/2019 11:45
Exact Location Of Accident	FARLEIGH RD (INFRONT HOUSE NO. 36)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ1311B
Insured/Policyholder	
Name Of Registered Owner	TAN BROS GAS SUPPLY
Co Reg No	36674400C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91747821
Alternative Phone No	OFFICE-64551169

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107823946
Cover Note Number	

Driver

Name of Driver	LOO KWONG FATT
NRIC No	S8463758J
Date Of Birth	18/06/1984
Occupation	OUTDOOR
Date Of Driving Pass	04/12/2010
Driving Experience	8 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91747821
Fax Number	
Contact Number	OFFICE-64551169
EEmail Address	NOEMAIL

Address	APT BLK 408 PANDAN GARDENS #07-38 SINGAPORE
Postcode	600408
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
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)	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

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLH8441Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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. 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.

TAN BROS GAS SUPPLY

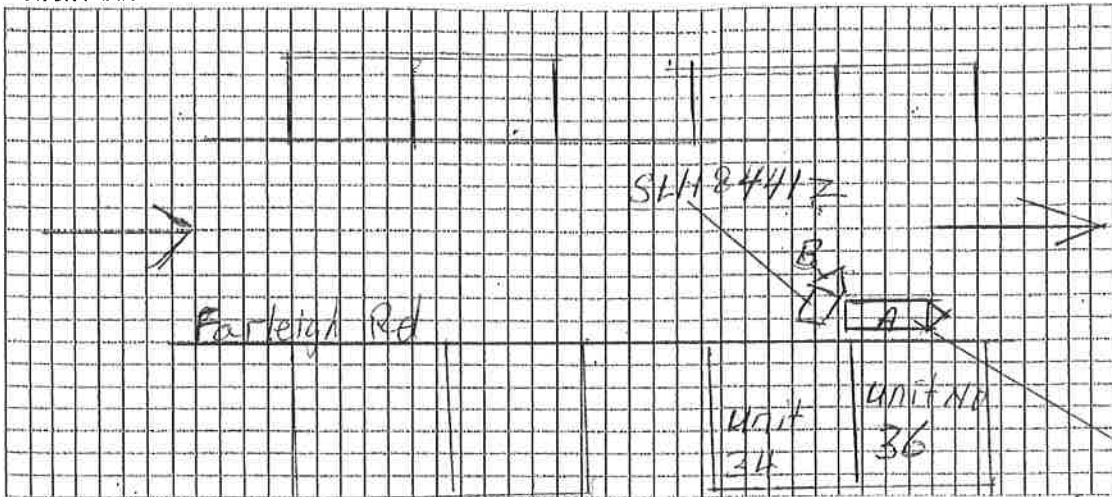
Policyholder's Signature
Date & Time:

600

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

my vehicle is parked at Farleigh Rd in front of unit no. 36 to deliver gas cylinders to the owner. After I handed the cylinders, owner and I come out of the unit and walked towards my vehicle. Together we saw the vehicle B had its right side portion hit onto my rear left side portion. The hit resulted vehicle B driver not able to step out of her car and I volunteered to move forward my vehicle. Instead of stepping out of her car to discuss on the hit, vehicle B driver drove away.

DECLARATION

I/We declare the foregoing particulars are true in every respect.
TAN BROS GAS SUPPLY

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.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

