



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC3/EQ116003083/H1wb3

24 MAY 2017

WATERFRONT SERVICES PTE LTD

334 KRETA AYER ROAD

#03-12

SINGAPORE 080334

ATTN: HR / MANAGEMENT

Dear Sir/Madam,

ACCIDENT INVOLVING XB 7192M AND SHC 3368J ON 06.02.2016

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.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

If you have evidence/information to proof that we should not settle the third party claim, kindly let us have them in writing within the next 10 days i.e. by 02/06/2017, after we shall proceed with negotiation with Third Party claimant on the **without prejudice basis** and any settlement should not bind any claims whatsoever by you/your driver against the other party's insurer arising from this particular accident.

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,

Zaini

Case Handler

DID: 6841 2132

FAX: 6741 4108

Email: Zaini@lkkauto.com

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

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE : Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No : XB 7192m.
Name(as shown in NRIC): _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No : _____
Address : _____
Contact (Tel) : _____ (H/P) : _____
(Email) : _____
Date of Accident : 06.02.2017 Time of Accident : 12:30.
Place of Accident : Along Tanjong pagar District X Keppel Road
Insurance Company : EQ Insurance Company Ltd.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amendments to address of the location of accident and the date
of the accident:
- From kepple road to keppel road
- From 07/02/2016 to 06/02/2016
That's all //
//

Signature of Vehicle Owner / Driver
Date: