

tzeyong.lui

Follow up with Ins. Co.

From: Zayyer (LKKAuto) [zayyer@lkkauto.com]
Sent: Monday, August 29, 2016 5:47 PM
To: tzeyong.lui
Cc: zhewei.kek@transcab.com.sg; jasminetan@transcab.com.sg; claims@transcab.com.sg; Admin A; Zayyer (LKKAuto)
Subject: Date of accident on 6/6/2016 involving vehicles SKR 2918P & SHC 5071B

TCS Ref: AAD1608-056 (AYA).

WITHOUT PREJUDICE

Your Ref: SHC 5071B

Date of accident on 6/6/2016 involving vehicles SKR 2918P & SHC 5071B

We refer to the above matter.

Our insured is adamant that your client collided into his parked / stationary car by changing lane.

Enclosed herewith is the statement of our insured for your record purposes.

We would like to request video footage, witness, photos to support your claim for our necessary to follow up.
Thanks.

Best Regards,

Zayer | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841 2409, email: zayyer@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

no video.

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

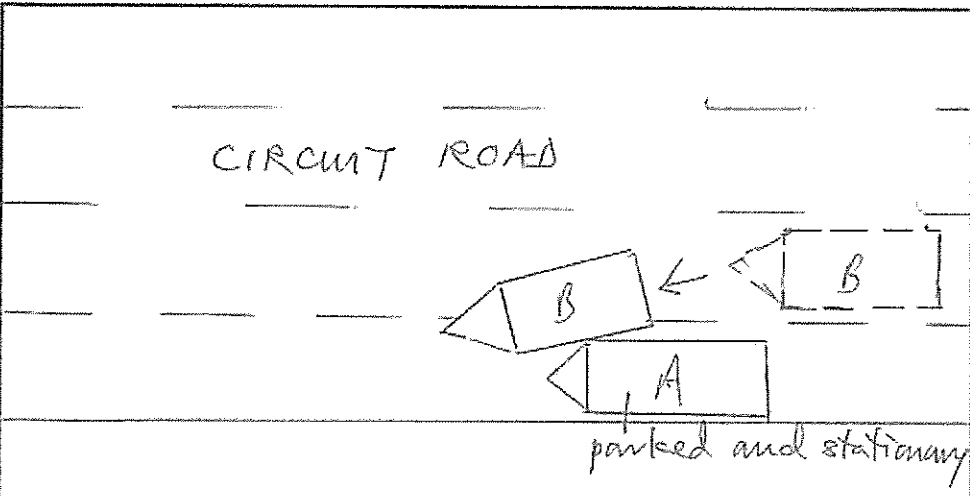
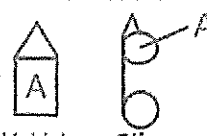
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 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.
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.

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

| | |
|--|---|
|  | <u>Number Plate</u> A - SKR 2918P B - SHC 5071B |
| | <u>Legend</u>  Vehicle Bike |

Accident Sketch Plan

Describe Circumstances of the Accident

| | | |
|---|-------------|--------------------|
| Date of Accident: | 6 JUNE 2016 | ALONG CIRCUIT ROAD |
| Time of Accident: | 10:30 AM | |
| I ONG TREN SUNG (IC No: S0054701H) WOULD LIKE TO REPORT THE ACCIDENT AS FOLLOWS:- | | |
| MY VEHICLE WAS PARKED ALONG CIRCUIT ROAD WAITING FOR SOMEONE. | | |
| THEN 3RD PARTY VEHICLE, SHC5071B CUT INSIDE MY LANE TO WANT TO ALIGHT HIS PASSENGER. | | |
| AT THAT INSTANCE, 3RD PARTY VEHICLE LEFT SIDE MIRROR HIT ONTO MY VEHICLE. | | |
| I THEN CAME DOWN FROM MY VEHICLE TO INSPECT ANY DAMAGE TO MY VEHICLE AND I CANNOT SEE ANY VISIBLE DAMAGE TO MY VEHICLE. | | |
| 3RD PARTY PASSENGER THEN ALIGHT FROM 3RD PARTY VEHICLE AND I SAW 3RD PARTY LEFT SIDE MIRROR SLIGHT DAMAGE AND 3RD PARTY DRIVER THEN ADJUST BACK HIS SIDE MIRROR AND SAID NOTHING WRONG. | | |
| I TOOK SOME DAMAGE PHOTOS AND WE THEN DROVE OFF. | | |
| LATE REPORT IS BECAUSE 3RD PARTY AND I AGREED NOTHING IS WRONG AND NO NEED TO REPORT. I ONLY WAS INFORMED THAT I NEED TO REPORT ONLY WHEN I RECEIVED A LETTER FROM INSURANCE COMPANY REGARDING THIS INCIDENT. | | |
| NO INJURIES IN THIS INCIDENT AND THIS IS FOR REPORTING PURPOSES. | | |

Declaration

We declare the foregoing particulars are true in every respect.

PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. KINDLY CHECK YOUR POLICY FOR MORE DETAILS.

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel