

**CHIA S ARUL LLC**  
ADVOCATES & SOLICITORS  
UEN 201330709H

ARULCHELVAN S • DANIEL WOO

Our Ref : FBH 9275Z (wk)

Your Ref : To be advised

15 December 2020

**Sompo Insurance Singapore Pte Ltd**

**BY EMAIL ONLY**

Dear Sirs,

**RE: PROPERTY DAMAGE CLAIM**  
**CLAIMANT : RENT-A-BIKE PTE LTD**  
**ACCIDENT INVOLVING FBH 9275Z & XD 8817C ALONG TAMPINES AVENUE**  
**7 ON 27 NOVEMBER 2019**  
**PRE-REPAIR SURVEY NOTICE**

1. We act for Rent-A-Bike Pte Ltd, the owner of motor cycle no. FBH 9275Z which was involved in the aforesaid accident.
2. We hereby in compliance with the Pre-Action Protocol for Non-Injury Motor Accident Claims, Appendix C of the State Courts Practice Directions Amendment No. 1 of 2016 ("the **NIMA Protocol**") give you **NOTICE** that we are claiming against your insured motor vehicle no. XD 8817C for damages, costs and disbursements as a result of your insured driver's negligence.
3. Please let us know if you wish to conduct a pre-repair survey on our client's motor cycle at:

<b>Address</b>	<b>464 Macpherson Road Singapore 368182</b>
<b>Contact Person</b>	<b>Mr. Jacky Siah (8380 2233)</b>

4. Pursuant to paragraph 2.3 of the NIMA Protocol, in the event we do not receive your response within next **two (2) working days** (excluding any Saturday, Sunday or public holiday), our client will instruct the workshop to commence appraisal and repairs to the damaged motor vehicle without further reference to you.
5. Please advise the appointed surveyor to endorse on page 2 of this letter after the completion of each inspection.

Yours faithfully,

**MR ARULCHELVAN S**  
cc: Client (By Email)

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**PRE-REPAIR SURVEY (1)**  
WORKSHOP:

SURVEYOR:

\_\_\_\_\_  
Name:  
Date/Time:

\_\_\_\_\_  
Name of Surveyor:  
Contact Number:  
Date/Time:

**PRE-REPAIR SURVEY (2)**  
WORKSHOP:

SURVEYOR:

\_\_\_\_\_  
Name:  
Date/Time:

\_\_\_\_\_  
Name of Surveyor:  
Contact Number:  
Date/Time:

**POST-REPAIR SURVEY**  
WORKSHOP:

SURVEYOR:

\_\_\_\_\_  
Name:  
Date/Time:

\_\_\_\_\_  
Name of Surveyor:  
Contact Number:  
Date/Time: