

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

ARULCHELVAN S • DANIEL WOO

Our Ref : SLV 200G (Jr)

Your Ref : To be advised

13 January 2021

**INDIA INTERNATIONAL INSURANCE PTE. LTD.**

**BY EMAIL ONLY**

Dear Sirs,

**RE: PROPERTY DAMAGE CLAIM**  
**CLAIMANT : WORK WORK PTE LTD**  
**ACCIDENT INVOLVING SLV 200G & SHD 3708G ALONG BAYFRONT AVENUE**  
**TOWARDS MBS CASINO ON 13 JANUARY 2021**  
**PRE-REPAIR SURVEY NOTICE**

1. We act for WORK WORK PTE LTD, the owner of motor vehicle no. SLV 200G 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. SHD 3708G 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 vehicle at:

<b>Workshop</b>	<b>A-TEC Automotive Pte Ltd</b>
<b>Address</b>	<b>8 Kaki Bukit Avenue 4 #04 - 20 Premier Singapore 415875</b>
<b>Contact Person</b>	<b>Ms. Peggie (6384 5206)</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)

Our Ref : SLV 200G (Jr)

Your Ref : To be advised

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

SURVEYOR:

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Name:  
Date/Time:

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Name of Surveyor:  
Contact Number:  
Date/Time:

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

SURVEYOR:

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Name:  
Date/Time:

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Name of Surveyor:  
Contact Number:  
Date/Time:

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**POST-REPAIR SURVEY**  
WORKSHOP:

SURVEYOR:

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Name:  
Date/Time:

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Name of Surveyor:  
Contact Number:  
Date/Time:

# Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars ( As At 13 Jan 2021 / 03:55:00 )

## Vehicle Insurance Details

Vehicle No.:

**SHD3708G**

Make Description/Model:

**TOYOTA / PRIUS HYBRID 1.8 CVT**

Insurance Company Name:

**INDIA INT'L INS PTE LTD**

Business Transaction Reference No.:

**20210113182023513953**

**Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).**

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OK →

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