



26th January 2021

Sompo Insurance Singapore Pte. Ltd.

Attn : Motor Claim Department

Dear Sir/Madam,

Road Traffic Accident Involving SJL 4230 U (Our Ref) and FBH 7928 L (Your Ref)

Dated 24ND JANUARY 2021, Time around 1900HRS

@ Havelock Road/ Clemenceau Ave Towards River Valley Road

We represent our client ; LAM MUI KHENG to notify you of the aforesaid road traffic accident involving our client’s vehicle registration number: SJL 4230 U and your insured’s vehicle registration number: FBH 7928 L. Enclosed herewith a copy of the Singapore Accident Statement filed for your reference.

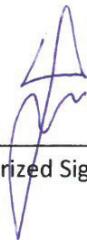
We hereby give you **NOTICE** that we are claiming against FBH 7928 L for damages, costs and disbursements as a result of the aforesaid road traffic accident.

Please let us know within 2 working days from today, your insured’s and your intention to conduct a pre-repair survey on our client’s vehicle, along with your list of at least ten (10) motor surveyors.

If we do not receive any reply from you within the stipulated timeline, we shall proceed to appoint our own surveyor and proceed with the necessary repair for our client’s vehicle without further reference to your insured or you.

Contact Person	Eric Lee	8269 9999
Email Address	teamautopl@gmail.com	
Survey Address	160 Sin Ming Dr, #01-14 Sin Ming AutoCity Singapore 575722	

Kindly cc a copy of this letter to your insured for his/her acknowledgement.



 Authorized Signatory

Email: sm@idac.com.sg Tel no: 6555 6888

***If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.**

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 24/01/2021 (dd/mm/yy) Time of Accident: 19 : 00 (24-HR-FORMAT)
Vehicle No. : SJL 4230 U Vehicle Make & Model / Engine (cc): HONDA Stream 1799cc Private Hire: (Y / N)
Exact location of Accident: Havelock Road/ Clemenceau Ave Towards River Valley Road
Policyholder's Name / IC No. : LAW MUI KHENG S1562828F
Driver's Name / IC No. : IVAN LIM ZONGJUN S9525172B (As Above)
Driver's Contact No. : 9383 9058 Company Contact No / Owner Contact No: 9826 2494
Driver's Address: APT BLK 920 JURONG WEST STREET 92 #04-81 S640920
Owner Email address : Jeanettelaw@yahoo.com.sg Insurance Company : AIG
Driver Email address : IvanLZ795@yahoo.com.sg

Relationship between Owner & Driver: (Please **CIRCLE** one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: CHILDREN

What do you wish to claim? (Please TICK one only)

Own Insurance / Other Vehicle (The one you want to claim against) / Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident?

Private use / Work purpose

Occupation (nature of job) Indoor/ Outdoor

***No. of Passengers (Including Driver):** 01

*Passanger Name: _____ Gender: -

*Passanger Name: _____ Gender: -

Weather condition & Road conditions? (On the day of accident)

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? Yes / No

Any Injuries: Yes / No (If YES) Injured Person' Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: Yes / No (If YES) Which Police Station: POLICE STATION JURONG WEST

The Other Party(s) Details:

1. Driver's Name / IC No: _____ Vehicle No: FBH 7928 L

Driver's Contact No: _____ Insurance Company : _____

2. Driver's Name / IC No (If Any): _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company : _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____

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.



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.:



**SINGAPORE
POLICE FORCE**



T/20210124/2076

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 3

Report No T/20210124/2076

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/01/2021 22:59	Vide Report No.: A/20210124/0131	Station Diary No.: 102
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Informant's Particulars

Name of Informant: IVAN LIM ZONGJUN		Address: APT BLK 920 JURONG WEST STREET 92 #04-81 SINGAPORE 640920	
ID Type / ID No.: NRIC NO / S9525172B		Contact No.: Home/Office: Mobile: 93839058	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 25	Date of Birth: 15/07/1995	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Police officer		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/01/2021 19:00	Type of Location: filter lane
Location: HAVELOCK ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH7928L	Motorcycle	YAMAHA	JUPITER 135 MANUAL	White	Slightly Damaged	1
SJL4230U	Car	HONDA	STREAM 1.8 RSZ A	Grey	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20210124/2076

2 of 3

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No T/20210124/2076

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJL4230U	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800134182-02	26/11/2020	25/11/2021

Brief Details.

On 24/01/2021 at about 1900hrs, the weather was clear, and I was driving car bearing plate number SJL4230U along filter lane of junction Havelock Road / Clemenceau Ave towards River valley road. Upon signaling, I turned towards the left filter lane. I then stop at the filter lane as I was giving way to the oncoming vehicle. Suddenly a motorcycle bearing plate number FBH7928L collided into my right rear. I step out of my vehicle and went to check on the impact of the collision and the rider. My right rear bumper to right rim is damaged. The motorcyclist sustained a few injuries and could not move his left knee. As such, I decided to call for ambulance. Traffic police came and I was issued case card to vide to A/20210124/0131.



**SINGAPORE
POLICE FORCE**



T/20210124/2076

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

3 of 3

Report No T/20210124/2076

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /

Sgt 2 MUHAMMAD SHAKIR ZUFAYRI BIN
AZMAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

24/01/2021 22:59

Officer In Charge Of Case:

TP / GIT /

Sgt 2 DAVID YAP

Contact No.: 96192349

Classification Of Case:

Authentication Stamp



SN 126

Signature :

Singapore Police Force

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 26 Jan 2021 / 10:54:00

Receipt Date/Time : 26 Jan 2021 / 10:54:00

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210126-000969

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - FBH7928L As at 24 Jan 2021/19:00:00 Insurance Co: SOMPO INSURANCE SINGAPORE PTE. LTD.				
1	Insurance Enquiry - FBH7928L Enquiry Fee 20210126105247337042	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
Paid By				
	426569XXXXXX8855		eNETS Credit Card	7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.