

CHIA S ARUL LLC
ADVOCATES & SOLICITORS
UEN 201330709H

ARULCHELVAN S • A. RAVIDASS

Our Ref : SLZ1995T.aj/goodfellas

Your Ref :

3 February 2021

AXA INSURANCE PTE LTD
ATTENTION: MOTOR CLAIMS DEPARTMENT

BY EMAIL

Dear Sir,

RE: PROPERTY DAMAGE CLAIM
CLAIMANT : I-SMILES SERVICES
ACCIDENT INVOLVING SLZ 1995T & SKG 2164E ALONG CTE TOWARDS CITY
(BEFORE PIE JURONG EXIT) ON 01/02/2021

1. We act for **I-SMILES SERVICES**, the owner of motor vehicle no **SLZ 1995T**, 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. **SKG 2164E** 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:

Workshop	GOODFELLAS AUTO SERVICE CENTRE PTE LTD
Address	7 SOON LEE STREET, #01-37 ISPACE SINGAPORE 627608
Contact Person	MR. ADRIAN
Tel:	9788 5358 / 8721 6988

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,



CHIA S ARUL LLC

cc: Client (By Email)

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: