20 Havelock Road
#02-54 Central Square
Singapore 059785
Tel: 68141873
Fax: 68153273

C RAMESH LAW PRACTICE

ADVOCATES & SOLICITORS
UEN No. 53294818A

We do not accept service of Court Documents via facsimile

17th March 2021

Our Reference : CR/DE-PD/21-200074
Your Reference : SJG 5730M

TO: **AIG ASIA PACIFIC INSURANCE PTE LTD** **By Email: ClaimsAdminSupport@aig.com**

Attention: Motor Claims Department

NOTICE OF ACCIDENT

Dear Sir,

We are instructed by our client to *notify* you of a road traffic accident on 16.03.2021 at about 14:05hrs along Pandan Loop involving our client's vehicle registration number **FBL 958A** and vehicle registration number **SJG 5730M** driven by your insured driver at the material time. A copy of Singapore accident Statement/traffic police report filled is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please be informed that the said vehicle can be inspected at:
Address : 25 Kaki Bukit Road 4
#03-62
Singapore 417800
Phone No. : 9327 6125

Please let us hear from you by the stipulated time.

Yours faithfully

C RAMESH LAW PRACTICE
Encl.

FOR SURVEYOR

Please initial here after completion of pre-repair inspection. Thank you.

Appointed surveyor

(Name & signature)

Date & time of inspection

SY0A213G0004 / YEW TEE AUTOMOBILE TECH PTE LTD [417800]
ENTRY DATE & TIME: 16/03/2021 17:08 (SGT)
SUBMITTED BY: TOH LEI MING
VERSION: 1 (16/03/2021 17:08 (SGT))

SINGAPORE ACCIDENT STATEMENT

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 witholding 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. This 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.

ACCIDENT STATEMENT

Date of Submission	16/03/2021 17:08 (SGT)
Date of Accident	16/03/2021 14:05 (SGT)
Exact Location of Accident	Pandan Loop, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBL958A

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ENG HONG JIE MERVIN
NRIC No	SXXXX284C
Email Address	MEHJ25@OUTLOOK.COM
Mobile Phone No	(Phone) +65-81251065
Alternative Phone No	(Home) +65-81251065

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	MW 125 3-WHEELER
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	5115724345-01
Cover Note Number	-

DRIVER

Name of Driver	ENG HONG JIE MERVIN
NRIC No	SXXXX284C

Date Of Driving Pass	16/01/2020
Driving experience	1 YEAR AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81251065
Alt. Phone Number	(Home) +65-81251065
Email Address	MEHJ25@OUTLOOK.COM
Address	45A EDGEFIELD PLAINS #17-06
Address complement	-
Postcode	828711
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Cross Junction
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJG5730M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	ENG HONG JIE MERVIN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBL958A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

WITNESS DETAILS

WITNESS 1

Name	-
Phone	(Phone) +65-90613351
Email	-

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.

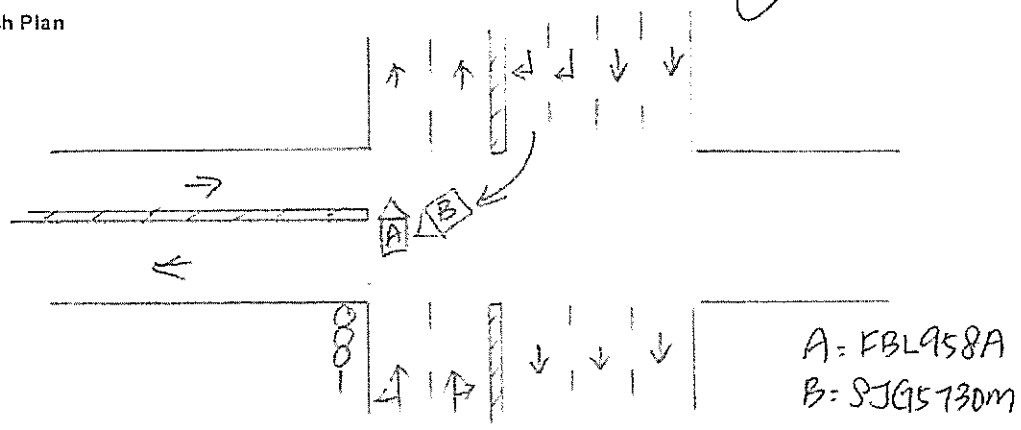
(collectively the "**Purposes**")

(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



SKETCH PLAN #2

Describe Circumstances of the Accident

Refer to Police Report.

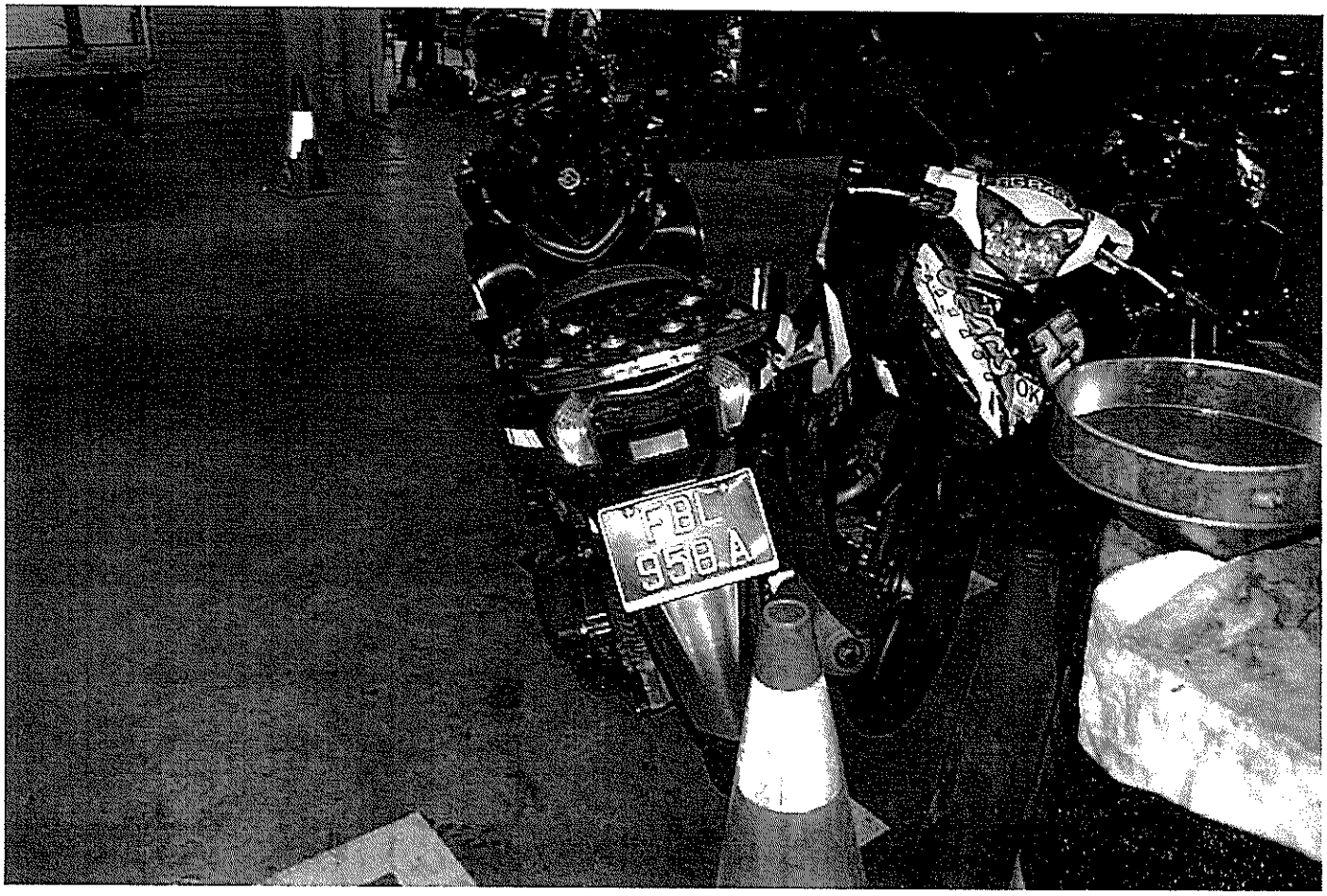
Declaration

I/We declare the foregoing particulars are true in every respect.

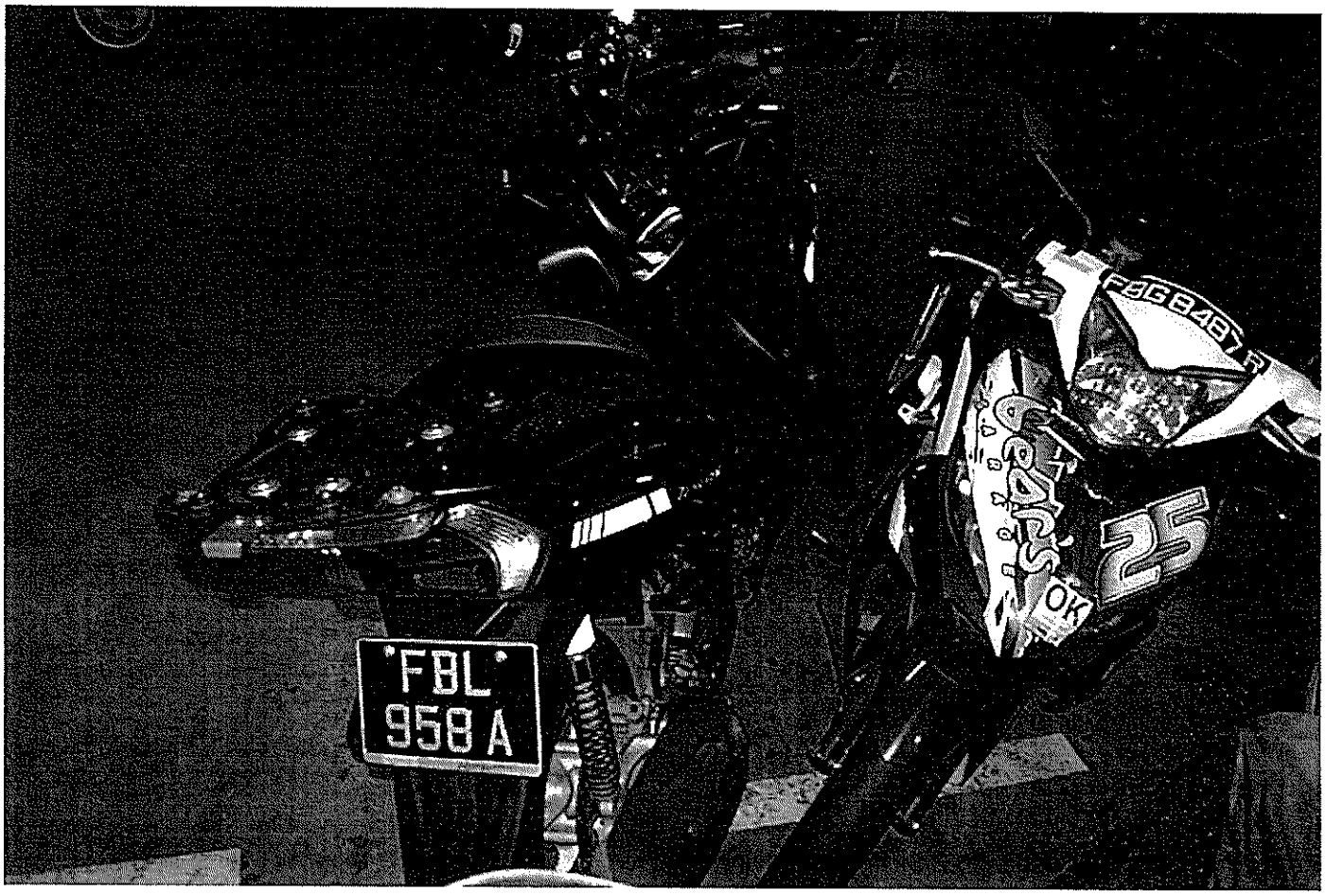
Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel

IMAGES

IMAGES #2

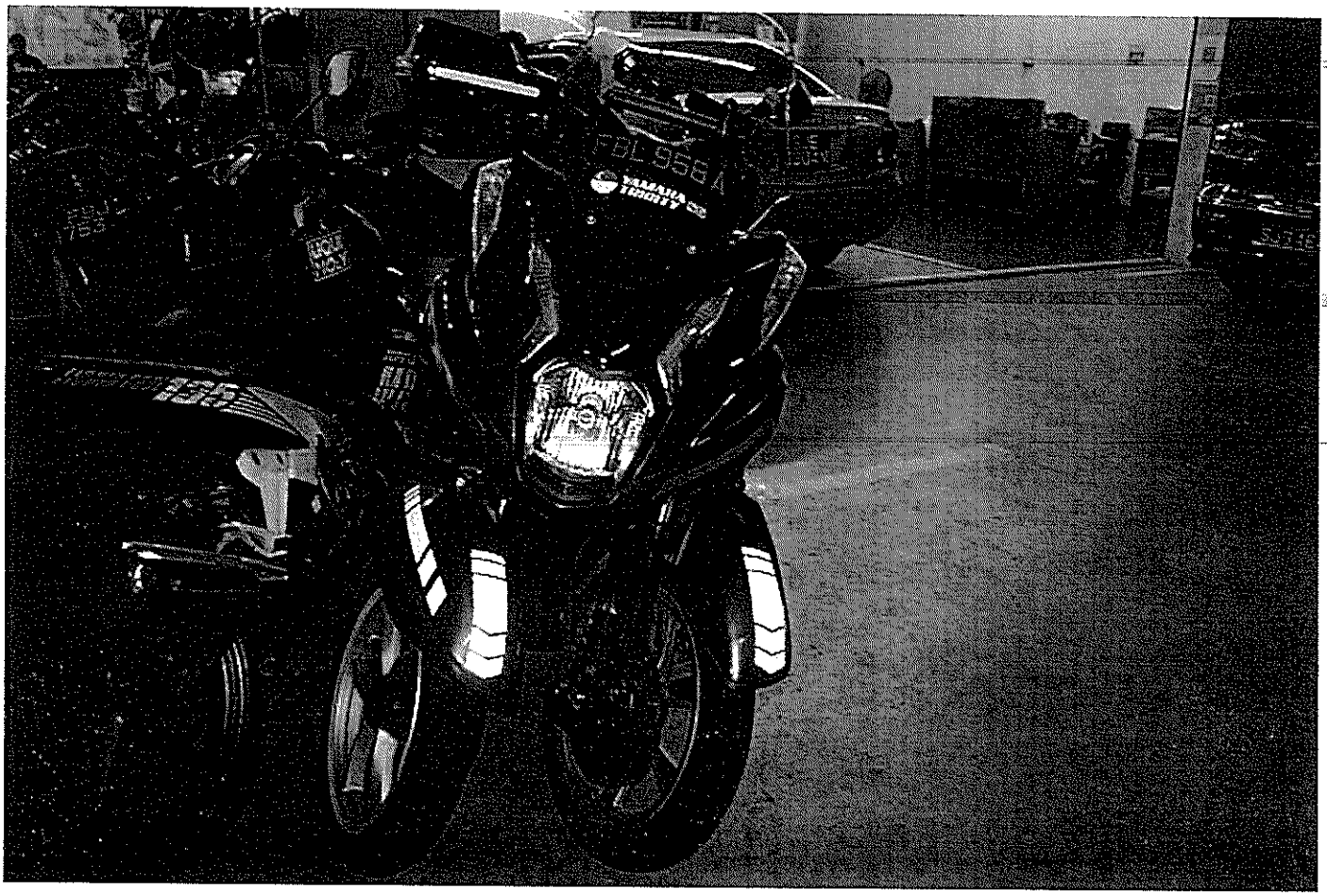


IMAGES #3



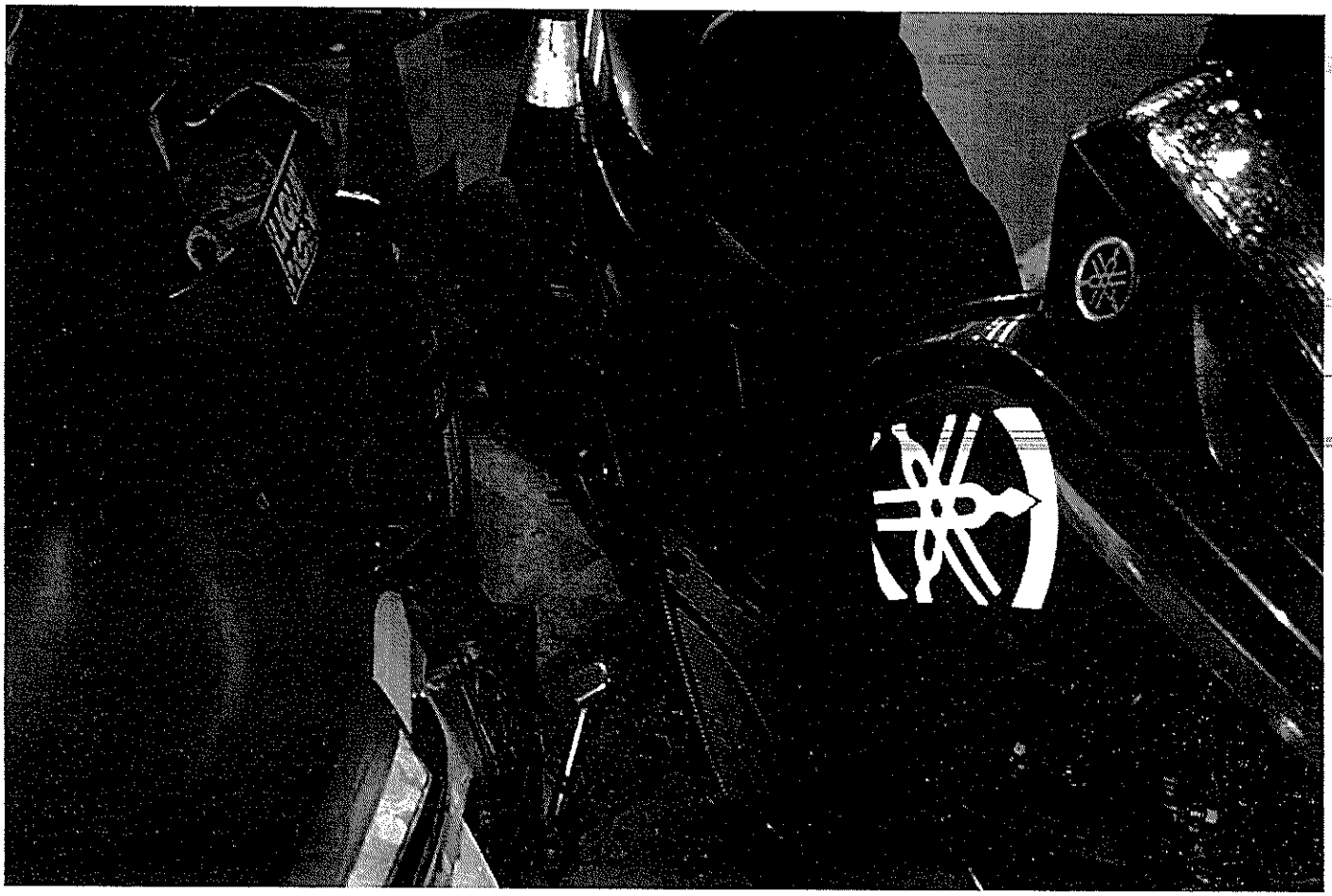
IMAGES #4

IMAGES #5



IMAGES #6

IMAGES #7



POLICE REPORT

SINGAPORE POLICE FORCE

T/20210316/7020

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20210316/7020

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
16/03/2021 16:02		

Informant's Particulars

Name of Informant:			Address:	
MERVIN ENG HONG JIE			45A EDGEFIELD PLAINS #17-06 SINGAPORE 828711	
ID Type / ID No.:			Contact No.:	
NRIC NO / S9619284C			Home/Office:	Mobile: 81251065
Nationality:			Email:	
SINGAPORE CITIZEN			MEHJ25@OUTLOOK.COM	
Sex:	Age:	Date of Birth:	Type of Informant:	
Male	24	02/06/1996	Rider	
Race:			Language:	Institution / School Name:
Chinese			English	
Occupation:			Driving Licence Information:	
LALAMOVE DELIVERY			Class: 2B,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 16/03/2021 14:05	Type of Location: X-Junction
Location: PANDAN LOOP				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBL958A	Motorcycle	YAMAHA	MW 125 3-WHEELER	Grey	Seriously Damaged	0
SJG5730M	Car	HONDA	CIVIC		Seriously Damaged	0

POLICE REPORT #2

SINGAPORE POLICE FORCE

T/20210316/7020

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20210316/7020

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBL958A	NTUC Income Insurance Co-Operative Limited	5115724345-01	26/11/2020	25/11/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Rider				
Name	MERVIN ENG HONG JIE		ID No.	S9619284C
Related Vehicle	FBL958A (Motorcycle)		Contact No.	81251065
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY		Class of Driving Licence & Expiry	Class: 2B,3 Date of Expiry: NIL
Date	16/03/2021		Date	16/03/2021
No. of Days granted Medical Leave	05		Degree of	Slight

Brief Details.
ON THE STATED VENUE, DATE AND TIME, I, VEHICLE A, BEARING MOTOR PLATE FBL958A WAS TRAVELLING STRAIGHT IN MY LANE ON THE MOST LEFT LANE FROM PANDAN LOOP TO WEST COAST ROAD, AT THE POINT OF TIME THE TRAFFIC LIGHT IS GREEN AND IS IN MY FAVOUR.

SUDDENLY, VEHICLE B, BEARING CAR PLATE SJG5730M TURN RIGHT FROM WEST COAST RD AND BANG ME FROM THE RIGHT. I FALL TO THE GROUND LANDING ON THE LEFT SIDE OF MY BODY.

AFTER THE ACCIDENT, I SUFFERED INJURIES ON MY NECK AND BACK. SO I WENT TO OUR FAMILY PHYSICIAN CLINIC & SURGERY TO CONSULT A DOCTOR AND RECEIVED 5 DAYS OF MC.

WITNESS CONTACT NO:
+65 9061 3351

POLICE REPORT #3

SINGAPORE
POLICE FORCE

T/20210316/7020

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20210316/7020

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 16/03/2021 16:02
Officer In Charge Of Case: TP / TPIB / MUHAMMAD RIZWAN BIN KAMALUDIN Contact No.: 65476185	Classification Of Case:

Authentication Stamp

NP168

Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars (As At 16 Mar 2021 / 14:05:00)

Vehicle Insurance Details

Vehicle No.:

SJG5730M

Make Description/Model:

HONDA / CIVIC IMA A

Insurance Company Name:

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Business Transaction Reference No.:

20210317101928721956

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

Save as PDF

OK →

Print