

TwinCar AUTOMOTIVE PTE LTD

Kaki Bukit Autohub

2 Kaki Bukit Ave 2, #01-17

Singapore 417921

Tel No. : +65 6744 0510 / 6842 0051 Fax No. : +65 6741 0510

Company Reg. No. : 200714616M

GST Registration No. : 200714616M

Our Ref: **GW 8807 H**

Your ref: **SGT 991 B**

05 April 2021

AUTO & GENERAL INSURANCE (S) PTE LTD

SINGAPORE SHOPPING CENTRE

190 CLEMENCEAU AVENUE #03-01

SINGAPORE 239924

Attn: Motor Claims Department

BY EMAIL claims@budgetdirect.com.sg ONLY

Dear Sir/Madam,

DATE OF ACCIDENT: 02 Apr 2021

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by **KHAISENG TRADING & FISH FARM PTE LTD** to notify you of a road traffic accident on **02 Apr 2021** at about **11:07 HRS** along **SERANGOON RD B4 WHAMPOA SOUTH** involving our client's vehicle **GW 8807 H & SGT 991 B** driven by you/your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer 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 inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,



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Twincar Automotive Pte Ltd

VEHICLE NO:	GW 8807H		MAKE & MODEL:	Nissan Doublecab		AUTO	<input checked="" type="radio"/> MANUAL
DATE OF ACCIDENT:	02/04/2021		CC:				
TIME OF ACCIDENT:	1107 HRS						
LOCATION OF ACCIDENT:	Serangoon Road before Whampoa South.						
EXACT PURPOSE USE DURING ACCIDENT:	<input checked="" type="radio"/> EMPLOYMENT / <input type="radio"/> PRIVATE USE / <input type="radio"/> PRIVATE HIRE						
NAME OF OWNER:	Khaiseng Trading & Fish Farm Pte Ltd.						
TEL NO:	H/P: 9635 8707		OFFICE:	HOME:			
NRIC:	199705228M.						
ADDRESS:	181 Neo Tiew Road Singapore 719023.						
EMAIL:	Khaisengfishfarm@outlook.com.						
CLAIM TYPE:	OD / <input checked="" type="radio"/> THIRD PARTY / <input type="radio"/> REPORTING ONLY						
FLEET POLICY:	YES <input checked="" type="radio"/> NO <input type="radio"/>						
INSURANCE COMPANY:	Longac Insurance						
TYPE OF COVERAGE:	Comprehensive / <input checked="" type="radio"/> Third Party / <input type="radio"/> Third Party Fire & Theft						
POLICY NO:	Z/20/VC00/109264.						
NAME OF DRIVER:	AS ABOVE / IF NO: TEO KHAI SENG.						
NRIC:	S 1382905E.		ANY PASSENGER:	N/A			
DATE OF BIRTH:	30/05/1959		LICENCE PASSED DATE:	13/03/1980.			
OCCUPATION:	<input checked="" type="radio"/> OUTDOOR / <input type="radio"/> INDOOR						
GENDER:	<input checked="" type="radio"/> MALE / <input type="radio"/> FEMALE						
CONTACT NO:	H/P: 9635 8707.		OFFICE:	HOME:			
ADDRESS:	181 Neo Tiew Road SG 719023.						
EMAIL:	-						
DOES DRIVER OWNED ANY VEHICLE:	NO/ IF YES, REG NO:		S1P		INSURER:		
RELATIONSHIP:	Owner						
WEATHER CONDITION:	<input checked="" type="radio"/> CLEAR / <input type="radio"/> RAINING / <input type="radio"/> OTHERS:						
ROAD SURFACE:	<input checked="" type="radio"/> DRY / <input type="radio"/> WET / <input type="radio"/> OTHER:						
ANY INJURIES:	<input checked="" type="radio"/> NO / <input type="radio"/> IF YES, WHO?						
NAME & CONTACT:							
NAME & CONTACT:							
POLICE REPORT:	<input checked="" type="radio"/> NO / <input type="radio"/> IF YES, WHERE?						
NOTICE OF INTENDED PROSECUTION GIVEN?	<input checked="" type="radio"/> NO / <input type="radio"/> IF YES, WHO?						
VEHICLE B REG NO:	SGT 991 B		ANY PASSENGERS:				
NAME OF DRIVER:	Wong Kok Kee.		CONTACT NO:				
VEHICLE C REG NO:			ANY PASSENGERS:				
VEHICLE D REG NO:			ANY PASSENGERS:				
VEHICLE E REG NO:			ANY PASSENGERS:				
VEHICLE F REG NO:			ANY PASSENGERS:				
VEHICLE G REG NO:			ANY PASSENGERS:				
ANY WITNESS? IF YES, NAME:			WITNESS CONTACT:				
HAS THERE ANY VIDEO CAPTURE?	YES <input checked="" type="radio"/> NO <input type="radio"/>						
HAS THERE ANY AUDIO RECORDED?	YES <input checked="" type="radio"/> NO <input type="radio"/>						
ACCIDENT SCENE PHOTOS TAKEN?	<input checked="" type="radio"/> YES / <input type="radio"/> NO						
ACCIDENT PORTION:	Rear Portion -						
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES <input checked="" type="radio"/> NO <input type="radio"/>						
WORKSHOP PARTICULAR:	Twozcar.						
CONTACT NO:	68420051 / 67440510						
CONTACT PERSON:	JOSEPH TAN.						
AX NO:	67410510						
WORKSHOP EMAIL:	sales@n51.com.sg						

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.



[Signature]

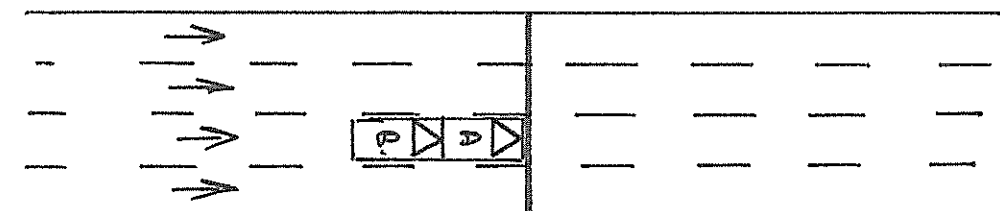
Policyholder's Signature / Date & Time

[Signature]

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Serangoon Road before Whampoa South

(A) GW 28074

(B) SGT 9918

Describe Circumstances of the Accident

On 02/04/2021, at @ 1107 hrs, I stopped my vehicle (GW 8807H) along Serangoon Road before Whampoa South on the 2nd lane from the right due to red light. Suddenly, a car (SGT 9918) from behind collided onto the rear portion of my vehicle.

Declaration

We declare the foregoing particulars are true in every respect.



Z/100
Policyholder's Signature / Date & Time

Z/100
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel