# **CPc**

#### C PAGLAR & CO

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Facsimile: (65) 6536 8706 Email: pri@cpaglar.com.sg

SERVICE OF COURT DOCUMENTS BY FACSIMILE WILL NOT BE ACCEPTED

PLEASE QUOTE OUR FILE REFERENCE WHEN REPLYING

Your Reference:

SHC 2597X

Our Reference:

CP/PRI/SJE1440/21- sf

Date:

14th June 2021

To:

M/S AXA INSURANCE PTE LTD

**ATTN: MOTOR CLAIMS DEPT** 

By Email

Dear Sirs,

NOTICE OF ROAD TRAFFIC ACCIDENT ON ROAD TRAFFIC ACCIDENT ON  $13^{TH}$  JUNE 2021 INVOLVING MOTOR VEHICLE NO. <u>SJE 1440L</u> AND SHC 2597X ALONG 83 PUNGGOL CENTRAL AT ABOUT 1350 HOURS. PURSUANT TO PARAGRAPH 2.2 OF THE PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by **Loke Jin Hong** to notify you of a road traffic on 13<sup>th</sup> **June 2021** at about 1350 hours along 83 **Punggol Central** involving our client's vehicle registration number **SJE 1440L** and vehicle registration number **SHC 2597X** driven by your insured/ insured driver. A copy of the Singapore accident statement report filed 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 REPLY BY EMAIL ONLY: pri@cpaglar.com.sg

#### DO NOT REPLY BY FAX.

Yours faithfully,

C PAGLAR & CO. Enc.

CC.

[Client by Fax: 6747 - 2373] - (SJE 1440L)

SS1Y216E0005 / SME MOTOR PTE LTD ENTRY DATE & TIME: 14/06/2021 15:20 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (14/06/2021 15:20 (SGT))

## SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

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

4. The issue and acceptance of this Form by insurance companies is not an admission of policy flability on the part of the insurance companies.

The issue and acceptance of this Form by insurance companies in the administration of patient of the patient of the policy for investigation.
 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.
 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.

#### Date of Submission ...... 14/06/2021 15:20 (SGT) 13/06/2021 13:50 (SGT) Date of Accident 83 Punggol Central, Singapore 828761 **Exact Location of Accident** WATERWAY POINT ENTRANCE TO CARPARK Additional Location Information Singapore Country/State of Loss ...... SJE1440L Vehicle Registration Number A THE RESERVE OF THE PARTY OF T Nagre processioner 181 2010 1 H - F . . . is company? . .. . . . . . LOKE JIN HONG Name Of Registered Owner ..... SXXXX415Z NRIC No. Email Address jksloke@hotmail.com (Phone) +65-98551648 Mobile Phone No +65-98551648 Alternative Phone No ..... 100 MARK THE AND THE A VEHICLE PARTICULARS Honda Manufacturer Fit Model Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Private car Vehicle Category .... .... Auto Transmission ..... 1300 A CONTRACTOR OF THE CONTRACTOR INSURANCE COMPANY TIME TO A STATE OF THE STATE OF **ECICS Limited** Comprehensive No MPC20P00172200 Policy Number ...... Cover Note Number DRIVER ONG CHEE HIAN Name of Driver SXXXX093B

Date Of Birth	04/03/1985
Occupation	Indoor
Date Of Driving Pass	31/07/2009
Driving experience	11 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-85115151
Alt. Phone Number	•
Email Address	cedric.ongch@gmail.com
Address	BLK 302 HOUGANG AVE 5 #12-437
Address complement	•
Postcode	530302
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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	The second state of the se
Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry
OTHER INFOSMATION	The control of the co
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
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
BETALS OF POLICE ACTION	The state of the s
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	•
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GROWSTANCES OF ABCIDENT	
VEHICLE B WAS TURNING INTO WATERWAY POINT TAXI ST (SJE1440L) LEFT SIDE PORTION. THE TAXI DRIVER ADMITTE	AND AND CUT INTO MY LANE AND HIT ONTO MY CAR ED HIS FAULT.
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No
DETAILS OF CLARK	EVI HICHE EPOPER IN T
Vehicle Registration Number	SHC2597X
Vehicle Manufacturer	-
Vehicle Model	•
Vehicle Variant	•
Vehicle Colour	<u>.</u>
Vehicle Category	Taxi
Name of Driver	KOH SENG CHYE
Contact Number	(Phone) +65-96207491
Address	•

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

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