



C RAMESH LAW PRACTICE

ADVOCATES & SOLICITORS
UEN No. 53294818A

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

We do not accept service of Court Documents via facsimile

12th September 2021

Our Reference: CR/DE-PD/21-200144

Your Reference: TBA (SGR17A)

AIG ASIA PACIFIC INSURANCE PTE LTD

78 Shenton Way
#07-16 Chartis Building
Singapore 079120

WITHOUT PREJUDICE

Email: claimsadmins@support@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 10.09.2021 at about 22:20hrs along Ang Mo Kio Industrial Park Two involving our client's vehicle registration number FBN 2677L and vehicle registration number SGR 17A 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



SINGAPORE POLICE FORCE



T/20210911/7042

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

Report No. T/20210911/7042

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/09/2021 23:33		Vide Report No.: F/20210910/0189		Station Diary No.:	
Informant's Particulars					
Name of Informant: SAHADEVAN BALAMURUGAN			Address:		
ID Type / ID No.: FIN NO / G5399458Q			Contact No.: Home/Office: Mobile: 81184403		
Nationality: INDIAN			Email: BALACIVIL98.ER@GMAIL.COM		
Sex: Male	Age: 33	Date of Birth: 25/07/1988	Type of Informant: Rider		
Race: Indian		Language: English		Institution / School Name:	
Occupation: Resident technical officer		Driving Licence Information: Class: 2B Date of Expiry: 29/06/2026			

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/09/2021 22:20	Type of Location: Bend
Location: ANG MO KIO INDUSTRIAL PARK 2				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Side Swipe - Opposite Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBN2677L	Motorcycle					0
SGR17A	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



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

Report No. T/20210911/7042

CONTINUATION OF REPORT

Rider				
Name	SAHADEVAN BALAMURUGAN		ID No.	G5399458Q
Related Vehicle	FBN2677L (Motorcycle)		Contact No.	81184403
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.		Class of Driving Licence & Expiry	Class: 2B Date of Expiry: 29/06/2026
Date	10/09/2021		Date	11/09/2021
No. of Days granted Medical Leave	07	Degree of	Slight	
Driver				
Name	Unknown Driver		ID No.	NIL
Related Vehicle	SGR17A (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL	

Brief Details.

On the above mentioned date and time, I was riding the motorcycle FBN2677L along Ang Mo Kio industrial park 2. As I was approaching a bend of the said road, suddenly motor vehicle SGR17A which was travelling from the opposite side of the said road lost control while negotiating the bend and collided into my motorcycle. I was injured as a result of the accident and was conveyed to the hospital after the ambulance and traffic police arrived to the scene.

I wish to state that the vehicle lost control and ended up over the turf area after the said accident.

I also wish to add that I have a witness to the accident and the number of the witness is 90251992



**SINGAPORE
POLICE FORCE**



T/20210911/7042

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

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Report No. T/20210911/7042

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
MUHAMMAD AFIQ BIN RAHMAT
Contact No.: 65476171

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
11/09/2021 23:33

Classification Of Case:

Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars (As At 10 Sep 2021 / 22:20:00)

Vehicle Insurance Details

Vehicle No.:

SGR17A

Make Description/Model:

TOYOTA / RAV4 2.0 PREMIUM SUV (AUTO) (2WD)

Insurance Company Name:

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Business Transaction Reference No.:

20210913121652945389

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

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