

SERVICE CENTRE Block 6 Defu Lane 10 #01-556 Singapore 539187

SPRAY CENTRE Block 5 Defu Lane 10 #01-574 Singapore 539186 Tel: 6280 8927 Fax: 6280 4205

Date: 11/11/2021

Motor Claims Department

To: ATA INSURCING SING CPOTE PLE LED

Please be informed that an accident involving my vehicle(s) no. SHD 32 47W  Canberra Street time 0730 am.	had taken place at /along on date on date on date on date of the d
Singapore 068811  Dear Sir/Mdm,  NOTIFICAT  Please be informed that an accident involving my vehicle(s) no.  SHD 32470  (anbern street time 0130 and stipulated timeline under the NIMA protocol.  If we do not hear from you within 2 working days	y/our vehicle no . GBG 1997 G and had taken place at /along on date 10 11 a a your nominated SJE for our consideration within s, we shall proceed to repair the vehicle without furt
Please be informed that an accident involving my vehicle(s) no.  SHD 32 470  Canberra Street time 0130 am  Kindly let us have a list of ten surveyors as y stipulated timeline under the NIMA protocol.  If we do not hear from you within 2 working days	y/our vehicle no . GBG 1997 G and had taken place at /along on date 10 11 a a your nominated SJE for our consideration within s, we shall proceed to repair the vehicle without furt
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	PRI Date / Time
	Company Name
	Surveyor
	Contact No.
	Signature
	DECIMA A NUME END. ID A ENTRO
	DISMANTLED PARTS
	Date / Time
	Surveyor
A	AFTER REPAIR
	Date / Time
S	Surveyor