# LAWRENCE LEE & CO

Advocates & Solicitors

李伟平律师楼 UEN: 53159236K

Your Ref:

(Please advise)

Our ref:

LWP/KMM/4745/21/wt

21 December 2021

133 New Bridge Road #13-10 Chinatown Point Singapore 059413 tel: 6533 3680 fax: 6533 3689 email: info@lawrencelee.com.sg

This is a letter of claim issued pursuant to the Personal Injury Protocol Practice Direction of the State Courts

Grab Rentals Pte. Ltd. 6 Battery Road #38-04 Singapore 049909

CERTIFICATE OF POSTING

Dear Sirs

# ACCIDENT ALONG ANDERSON RD ON 31.08.21 **INVOLVING GBG5970G & SLR4689A**

We act for Starhub Cable Vision Ltd, owner of the above vehicle GBG5970G.

We are instructed to claim damages against you in connection with the above road traffic accident involving our client's vehicle and m/vehicle registration no. SLR4689A owned by you and driven by your servant/agent one Lim Kim Beng at the material time.

We are instructed that the accident was caused by your servant/agent's negligent driving, management and/or control of your vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

### **Particulars**

1.	Cost of repairs	\$ 9,500.00
2.	Loss of use (8 days X \$120pd)	\$ 960.00
	<u>Disbursements</u>	
3.	Survey fee	\$ 737.00
4.	LTA fee	\$ 7.49
5.	Legal costs	\$ 900.00
6.	Miscellaneous	\$ 100.00

A copy of each of the following documents is enclosed:

- 1. LTA search with receipt;
- 2. Our client's LTA online enquiry;
- 3. Our client's GIA report;

- 4. Invoice from K & M Leasing Pte Ltd dated 11.09.21; and
- 5. Survey report no. 202/TP/2021 and invoice no. 100921-202 from Sincere Appraisal Services Pte Ltd.

#### Please note that:

- a. If you are insured and you wish to claim under your insurance policy, you should immediately pass this letter to your insurer.
- b. You or your insurer should send us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.
- c. If you have any witnesses or photographs of the accident scene, please send to us the witnesses' names/addresses/contact nos. or the photographs within 14 days of your receipt of this letter.
- d. If you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.
- e. In the event that your vehicle had been driven by someone not in the capacity as your servant/agent, please inform us in writing within 14 days otherwise we will name you as a defendant in the Writ that may be issued and you may be liable for legal costs.

Yours faithfully

LEE WEE PENG LAWRENCE Paralegal: Ms Tay Wan Ting

Email: wanting@lawrencelee.com.sg

Encs by email only

Cc India International Insurance Pte Ltd

(Insurer of SLR4689A)

64 Cecil Street

#04-02 IOB Building

Singapore 049711

Cc Client

**EMAIL** 

POST/EMAIL

# **Enquire Vehicle Owner Details**

# Enquire Vehicle Owner Details ( As At 31 Aug 2021 / 10:45:00 )

Vehicle Owner Details				
Ourser ID Times				
Owner ID Type:  Company				
Owner ID:				
201617200G				
Owner Name:				
GRAB RENTALS PTE. LTD.				
Registered Address Type:				
Private Residential (Condo Apt or House) / Shopping / Office Complexes				
Registered Block/House No.:				
6				
Registered Street Name:				
BATTERY ROAD				
Registered Unit No.:				
# 38 - 04				
Registered Building Name:				
-				
Registered Postal Code:				
049909				

**Vehicle Insurance Details** 

Vehicle No.:

**SLR4689A** 

Make Description/Model:

# MAZDA / MAZDA3 SEDAN 1.5 AT EU6

Insurance Company Name:

# MSIG INSURANCE (SINGAPORE) PTE LTD

Insurance Company Name:

# INDIA INT'L INS PTE LTD

Disclaimer message:

Your search is displaying 2 records as there is an overlap in the period covered by the insurance policies. You may wish to contact the insurance companies for more information.

Save as PDF

OK →

Print

# > Back to OneMotoring

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	398C
Vehicle Details	
Vehicle No.:	GBG5970G
Vehicle to be Exported:	Yes
Intended Deregistration Date:	01 Sep 2021
Vehicle Make:	NISSAN
Vehicle Model:	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC
Primary Colour:	Silver
Manufacturing Year:	2017
Engine No.:	K9KC400D057385
Chassis No.:	VSKYBAM20Z0146165
Maximum Power Output:	-
Open Market Value:	\$20,119.00
Original Registration Date:	11 Sep 2017
First Registration Date:	11 Sep 2017
Transfer Count:	0
Actual ARF Paid:	\$1,006.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	_
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	10 Sep 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$40,212.00
COE Rebate Amount:	\$24,227.00
Total Rebate Amount:	\$24,227.00

The information contained herein is correct as at 01 Sep 2021

SJ04218V000N-01 / JP Knights Pte Ltd ENTRY DATE & TIME: 31/08/2021 18:09 (SGT) SUBMITTED BY: Caymen VERSION: 2 (01/09/2021 09:55 (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
- 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	31/08/2021 18:09 (SGT)
Date of Accident	31/08/2021 10:45 (SGT)
Exact Location of Accident	Anderson Rd, Singapore
Additional Location Information	
Country/State of Loss	Singapore
DETAILS OF	OVIN VELICIE

# Vehicle Registration Number GBG5970G INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner STARHUB CABLE VISION LTD Company Reg No 1XXXXX398C Email Address mywu@starhub.com Mobile Phone No (Phone) +65-98592059 Alternative Phone No (Office) +65-68255085 Manufacturer Nissan Model Nv200 Variant Exact purpose for which vehicle was being used at time of accident Employment Are you claiming under your own insurance policy for repair to No - Claiming third party C

Vehicle Category Transmission CC	Commercial vehicle Auto 1461
INSURANCE COMPANY	
Name of Insurance Company	India International Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	D19MFL000071_02
Cover Note Number	-
DRIVER	in the secretary expension of the second

Name of Driver CHANG HIANG KWANG NRIC No SXXXX678J



Date Of Birth 19/07/1966 Occupation Outdoor Date Of Driving Pass 06/09/1990 Driving experience 30 YEARS AND 11 MONTHS Gender Male Mobile Number (Phone) +65-98592059 Alt. Phone Number Email Address desmondc@starhub.com Address BLOCK 291 BISHAN STREET 24 Address complement #19-37 Postcode 570291 Is the driver the policyholder? No If No. Relationship of the Driver with the Insured Employee 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 - Change/cross lane Weather Conditions Raining Road Surface Wet 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 vehicle 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? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 31/08/2021 AT AROUND 1045HRS, I VEHICLE A(GBG5970G) WAS DRIVING ALONG ANDERSON ROAD INTENTING TO TURN RIGHT TOWARDS ORANGE GROVE ROAD AT ABOUT 40KM/HR. AS THE ROAD WAS WET AND RAINING, I SUDDENLY FELT AND IMPACT ON MY LEFT FRONT AND MY VEHICLE MOVED FORWARD. I REALISED THAT VEHICLE B(SLR4689A) HAS SIDE HIT ME. THERE WAS NO ONE INJURED AT THAT POINT OF TIME. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident FILE NOT SUITABLE Was there any audio recorded? No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

SLR4689A

Mazda

Whate

Whate

White

LIM KIM BENG



NRIU NO	SXXXX255I
Contact Number	-
Address	BLOCK 747 PASIR RIS STREET 71
Address complement	#07-50
Postcode	510747
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	<u>.</u>
No. Of Passenger (Including Driver)	1

#### 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

Lunderstand, acknowledge, agree and consent that :

- (a) My insurer, my w orkshop 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) w ho have insured vehicle(s) involved in this accident (all insurer(s) w ho have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law yers/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 w ith 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

er is not the policyholder) / Date

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 3\ |08/202\ | 1700

Witnessed by Reporting Centre Personnel Nawww

Sketch Plan



A-GBG 5970 G. B-SLR 4689 A

6/8

Describe Circumstances of the Accident

ON 31/08/2021 AT AROUND 1045HRS, I VEHICLE A(GBG5970G) WAS DRIVING ALONG ANDERSON ROAD INTENTING TO TURN RIGHT TOWARDS ORANGE GR9VE ROAD AT ABOUT 40KM/HR. AS THE ROAD WAS WET AND RAINING, I SUDDENLY FELT AND IMPACT ON MY LEFT FRONT AND MY VEHICLE MOVED FORWARD. I REALISED THAT VEHICLE B(SLR4689A) HAS SIDE HIT ME. THERE WAS NO ONE INJURED AT THAT POINT OF TIME.

### Declaration

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

Policyholder's Signature / Date &

Driver's Signature (if driver is not the policyholder) / Date

1505/80/15 emit 8 1700 Witnessed by Reporting Centre Personnel Dawnal





















