CHEONG CHEONG MOTOR SERVICE PTE LTD

BLK 5032 Ang Mo Kio Ind Park 2 #01-293 Singapore 569535

Tel: 6481 4152 Fax: 6481 4157 E-mail add: c2msvc@singnet.com.sg website: cheongcheong.com

Reg No: 201007833E

TO : CHINA TAIPING INSURANCE SINGAPORE PTE LTD

ATTN: MOTOR CLAIM DEPT

DATE: 19TH APRIL 2022

Dear Sir,

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS PURSUANT TO PARAGRAPH I6.2 OF PRE-ACTION PROTOCOL FOR NIMA CASE

We act for BAVANI D/O BALACHANDRAN appointed the undermentioned workshop to repair her motor vehicle SMY 8550 R claim against your client vehicle GBD 5818 E accident on 11/04/2022.

Please be informed that the said vehicle can be inspected at :

CHEONG CHEONG MOTOR SERVICE PTE LTD BLK 5032 ANG MO KIO IND PARK 2 #01-293

SINGAPORE 569535 TEL: 6481 4152

FAX: 6481 4157

If you fail to conduct the pre-repair inspection within the next 2 working days excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference to you.

Regards, Angela Ng /Willy Lim

Sign by surveyor:



SC1K224C0005 / ComfortDelGro Engineering Pte Ltd [579701] ENTRY DATE & TIME: 12/04/2022 15:14 (SGT) SUBMITTED BY: Rohani

VERSION: 1 (12/04/2022 15:14 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

12/04/2022 15:14 (SGT) 11/04/2022 11:30 (SGT) Woodlands Industrial Park E9, Singapore SLIP ROAD Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMY8550R

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No Email Address Mobile Phone No

Alternative Phone No

BAVANI D/O BALACHANDRAN

S7717952F

bavanipl@singnet.com.sg (Phone) +65-97377051

+65-97823759

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Mercedes

E250

Private use

No - Claiming third party

Private car Auto 2000

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number Cover Note Number

MSIG Insurance (Singapore) Pte. Ltd.

Comprehensive

No

A300542167 QMY

DRIVER

Name of Driver NRIC No

PRAPAHARAN S/O LETCHUMANAN S7079510H



Date Of Birth20/09/1970OccupationIndoorDate Of Driving Pass13/03/1993

Driving experience 29 YEARS AND 1 MONTH

Gender Ma

Mobile Number (Phone) +65-97823759

Alt. Phone Number

Email Address bavanipl@singnet.com.sg

Address BLK 715 WOODLANDS DRIVE 70 #02-144

Address complement

Postcode 730715
Is the driver the policyholder? No
If No, Relationship of the Driver with the Insured Spouse
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 - Head to Rear

Weather Conditions Clear Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Number of Passengers (Including Driver)

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?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO STATEMENT AND SKETCH

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle CategoryCommercial vehicleName of DriverNG WEE YANGNRIC NoS9112915I

Contact Number (Phone) +65-97521278

Address



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

SKETCH PLAN

IMPORTANT NOTICE

- 1. Manso report correctly the details of the accident to speed up the cinhas process.
- 2. This Ferremust be completed by the Policyholder and/or the Authorised Diver
- 3. Information provided must be as truthful and accurate as powerful; Any wife insequescritation or withholding of material facts may allow insurance companies to regulable, policy liability.
- 4. The issue and acceptance of this FermLy insurance companies is not an admission of pulsy fability on the part of the lecurance companies.
- 6 Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the CIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a few burnade available open application by interested parties.
- 7. By the ladgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of this report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Tunderstand, acknowledge, agree and consent that :

(a) My insurer, any workshop and the General Insurance Association of Singapore ("GIA") may three pointitied to colect, use, disclose and fur process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (colectively the "Personal Information") and disclose and transfer such Personal Information to administratively who have insured vehicle(s) involved in this accident (at insurer(s) who have insured vehicle(s) involved in this accident (at insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the hourers law yet allow firms, the Marietary 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 colons;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me,
- (iv) administering my claims (including the making of correspondence, statements, involces, reports or natices 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); undier
- (v) complying with applicable law in administering, processing, handing and/or dealing with my claims.

(cellectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the fusurers' law yereflaw. (irms, may/are perintled to collect, use, disclose audior process my flare and information for one or more of the above Purposes; and

(c) my Personal Enformation may team be discladed by any of the Insurers and/or GIA to their yind party service providers or agents (including their law yers new terms), which may be said outside of physicians for one or may be of the above Purposes.

Policy Older's Signature / Date &

Time

Sketch Plan

Universe Signature (Eddriver is not the policyholder) / Date & Jimo

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