

Teo Keng Siang LLC

Advocates & Solicitors • Notary Public • Commissioner For Oaths

111 North Bridge Road #29-07/08 Peninsula Plaza Singapore 179098
ROC: 201510228C GST Reg No.: 201510228C

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Email: KSTEOCO@singnet.com.sg

(FAX – NOT FOR SERVICE OF COURT DOCUMENTS)

Our Ref : TKSF/M492-ACC-46135.22/sf (mc)
Your Ref : FBQ 5147 P
Date : 26 May 2022

Secretary in charge: Janice

Tel : 6333 4222 (ext 62)

Fax : 6333 5676 / 6333 5688

Email : janice.kee@ksteoptr.com

To: **Sompo Insurance Singapore Pte Ltd.**
50 Raffles Place
#05-01/06 Singapore Land Tower
Singapore 048623
Attn: Motor Claim Dept

WITHOUT PREJUDICE
BY EMAIL

Dear Sirs

RE: ACCIDENT INVOLVING SNE 977 P / FBQ 5147 P ON 24/5/22 ALONG JALAN DATOH

We are instructed by **Tng Kok Leng** to notify you of a road traffic accident on **24/5/22** at about **19:30 hours** at **ALONG JALAN DATOH** involving our client's vehicle registration number **SNE 977 P** and vehicle registration number **FBQ 5147 P** driven by you at the material time. A copy of our client's Singapore accident statement is enclosed. Kindly let us have a copy your Singapore accident statement report on an urgent basis.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer 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 note that our client's motor vehicle **SNE 977 P** is now at the following workshop:-

Massive Trading & Auto
Blk 5038 Ang Mo Kio Industrial Park 2
#01-405
Singapore 569541
Contact: 9108 2728 Anthony

Yours faithfully,



M/s Teo Keng Siang LLC
encs

****Survey was conducted by:-**

Name of Surveyor:

Date of Survey:

Time of Survey:

Signature



SL03225P0007 / Lai Hual (Meng Kee) Motor Pte Ltd
 ENTRY DATE & TIME: -
 SUBMITTED BY: (To Be Confirmed)
 VERSION: 1 (25/05/2022 14:10 (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 withholding of material facts may allow insurance companies to repudiate policy liability.
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	24/05/2022 19:30 (SGT)
Exact Location of Accident	Jln Dato, Singapore
Additional Location Information	Towards Balestier Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNE977P

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Tng Kok Leng
NRIC No	SXXXX931E
Email Address	eric.90052202@gmail.com
Mobile Phone No	(Phone) +65-90052202
Alternative Phone No	+65-90052202

VEHICLE PARTICULARS

Manufacturer	BMW
Model	Z4
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1997

INSURANCE COMPANY

Name of Insurance Company	AIQ Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	7210145948
Cover Note Number	-

DRIVER

Name of Driver	Tng Kok Leng
NRIC No	SXXXX931E

(Draft)

Date Of Birth	08/08/1972
Occupation	Indoor
Date Of Driving Pass	17/06/1991
Driving experience	30 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90052202
Alt. Phone Number	+65-90052202
Email Address	eric.90052202@gmail.com
Address	Blk 36 Ah Hood Road #12-02
Address complement	-
Postcode	329980
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	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

Please refer to the sketch plan.

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBQ5147P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	Azar
Contact Number	(Phone) +65-86603560
Address	-
Address complement	-

▲
(Draft)


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

Describe Circumstances of the Accident

I was traveling on Jalan Datoh towards Balestier Road. I stopped my car due to cars in front of me and the motorcyclist bang into my rear.


Declaration

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


Policyholder's Signature / Date &
Time

25/05/2022

Driver's Signature (If driver is not the policyholder) / Date
& Time


Witnessed by Reporting Centre
Personnel

Angie Soh