

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

Tel: 6333 4222 Fax: 6333 5676 / 5688

Email: KSTEOCO@singnet.com.sg

(FAX – NOT FOR SERVICE OF COURT DOCUMENTS)

Our Ref : TKS/A818-ACC-46187.22/sl
Your Ref : SHA 7969 J
Date : 7 June 2022

Secretary in charge: Shirley

Tel : 6333 4222 (ext 59)

Fax : 6333 5676 / 6333 5688

Email : shirley.loh@ksteoptr.com

To: **AXA Insurance Singapore Pte Ltd**
8 Shenton Way
#07-01/02
AXA Tower
Singapore 068811
Attn: Motor Claims Dept

WITHOUT PREJUDICE
BY FAX 6880 5501 & BY EMAIL

Dear Sirs

RE: ACCIDENT INVOLVING FBT 15 D / SHA 7969 J ON 03/06/22 ALONG TAMPINES CENTRAL 5

We are instructed by Lim Chen Kai to notify you of a road traffic accident on **03/06/22 at about 19:00 hours at ALONG TAMPINES CENTRAL 5** involving our client's vehicle registration number **FBT 15 D** and vehicle registration number **SHA 7969 J** 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 **FBT 15 D** is now at the following workshop:-

ADVANCE REPUBLIC MOTOR PTE LTD

68 Kaki Bukit Avenue 6

#04-06, Ark@KB

Singapore 417896

Person I/C : Jimmy

Contact : 6384 4888 / 9450 9220

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

Name of Surveyor:

Date of Survey:

Time of Survey:

Yours faithfully,



M/s Teo Keng Siang LLC

Encs (By Email)



**SINGAPORE
POLICE FORCE**



G/20220604/7031

1 of 2

POLICE REPORT (NP299)

Report No. G/20220604/7031

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 04/06/2022 12:53	Vide Report No.	Station Diary No.
Name Of Informant LIM CHEN KAI	Address 601B TAMPINES AVENUE 9 #12-818 SINGAPORE 522601	
ID Type / ID No. NRIC NO / S8847179B	Contact No. Home/Office: Mobile: 96641416	
Nationality SINGAPORE CITIZEN	Email Address KAI23V@HOTMAIL.COM	
Occupation Delivery man using motorised personal mobility aids/devices	Sex Male	Age 33
Institution/School Name	Date of Birth 27/11/1988	Race Chinese
	Language English	
Date/Time Of Incident 03/06/2022 19:00 - 03/06/2022 19:05	Location Of Incident 601B TAMPINES AVENUE 9 #12-818 SINGAPORE 522601	

Brief details.

I was riding along tampines mall and century square. when i change lane then there was the red light in front and 1 car was coming out of the carpark so i had to stop for my own safety. but unfortunately i was hit behind by a car. i proceed to make my delivery till i complete the delivery then i know i was hit behind by that car

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 04/06/2022 12:53
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20220604/7031

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220604/7031

Subjects Involved			
Suspect			
Person Name	Unknown		
Gender	Unknown	Occupation	Taxi driver
Victim			
Person Name	LIM CHEN KAI		
ID Type	NRIC NO	ID No	S8847179B
Gender	Male	Age	33
Race	Chinese	Language	English
Occupation	Delivery man using motorised personal mobility aids/devices	Address	601B TAMPINES AVENUE 9 #12-818 SINGAPORE 522601
Mobile No	96641416	Is Informant A Victim?	Yes
Person Name LIM CHEN KAI (Informant)			

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:
04/06/2022 12:53

Classification Of Case:

SN072264000F / NTUC Income Insurance Co-operative Ltd
ENTRY DATE & TIME: 04/06/2022 14:47 (SGT)
SUBMITTED BY: Mohammad Ikhsan Bin Abdul Aziz
VERSION: 1 (04/06/2022 14:47 (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 willful 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	04/06/2022 14:47 (SGT)
Date of Accident	03/06/2022 19:00 (SGT)
Exact Location of Accident	Tampines Central 5, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBT15D
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM CHEN KAI
NRIC No	S8847179B
Email Address	KAI23V@HOTMAIL.COM
Mobile Phone No	(Phone) +65-96641416
Alternative Phone No	+65-96641416

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	T155
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 your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Manual
CC	160

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	5125657753
Cover Note Number	-

DRIVER

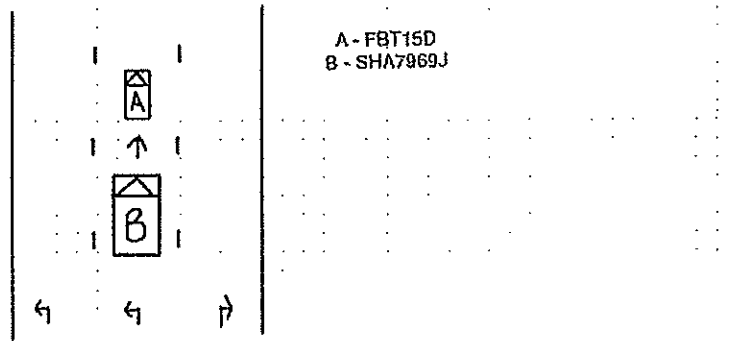
Name of Driver	LIM CHEN KAI
NRIC No	S8847179B

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

SKETCH PLAN #2



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A large rectangular area with horizontal lines for describing the circumstances of the accident. A diagonal line is drawn across the entire area, from the bottom-left corner to the top-right corner, indicating that no description is provided.

DECLARATION

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

Policyholder's Signature

Date & Time: 04062022 & 1500HRS

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: Md Ikhsan

NNIC/FIN No.: S098395

