

advocates & solicitors commissioner for oaths & notary public

GOH TECK WEE

WONG TZE ROY

WONG FUNG KWAI

SOON WEI SONG

133 New Bridge Road #16-09 Chinatown Point Singapore 059413
Tel: 6538 5868 Fax: 6538 4898 (Not for service of Court documents) Email: mail@gohjpwong.com
Goh JP & Wong LLC is a law corporation with limited liability. GST/UEN: 201406078M

YOUR REF:

OUR REF:

GTW.ACC.7063.22.wk

WHEN REPLYING, PLEASE QUOTE OUR REFERENCE NO

DATE:

25 July 2022

Lee Yoon Loke

Block 117 Simei Street 1 #05-550 Singapore 510117

Dear Sirs

NOTIFICATION OF ACCIDENT

SUBJECT MATTER: TRAFFIC ACCIDENT INVOLVING FBP 150S & SH 6818B ON 20.7.2022 ALONG CHUN TIN ROAD

We act for Muhammad Izzuddin Bin Mislan in the above matter.

We are instructed to notify you of the above accident on 20th July 2022 at about 2224 hrs along Chun Tin Road involving our client's motorcycle FBP 150S and motorcar SH 6818B driven by you at the material time. A copy of the Traffic Accident Report filed is enclosed.

As a result of the accident, our client's motorcycle FBP 150S has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days (excluding Saturdays, Sundays and Public Holidays) of your receipt of this notice whether you or your insurer would like to conduct a prerepair inspection of the vehicle or whether you or your insurer waive the pre-repair inspection. 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.

Kindly advise your surveyor to liaise with the workshop directly for repair estimates and post re-repair inspection, if required.

Yours faithfully

Goh JP & Wong LLC

Enc.

Cc AXA Insurance Singapore Pte Ltd

Attention: Motor Claims Department

By email: motor.doc@axa.com.sg / motor.survey@axa.com.sg

SN07227L000H / NTUC Income Insurance Co-operative Ltd ENTRY DATE & TIME: 21/07/2022 14:34 (SGT) SUBMITTED BY: Indra Aziz

VERSION: 1 (21/07/2022 14:34 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed</u> 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

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 21/07/2022 14:34 (SGT) Reported by Date of Accident 20/07/2022 22:24 (SGT) **Exact Location of Accident** Singapore Additional Location Information CHUN TIN RD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **FBP150S**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner MUHAMMAD IZZUDDIN BIN MISLAN NRIC No

Email Address Mobile Phone No

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Yamaha Model YZF-R15 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? Vehicle Category Transmission

CC

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

NTUC Income Insurance Co-operative Ltd 5120111645-01

No - Claiming third party

Motorcycle

Manual

150

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

MUHAMMAD IZZUDDIN BIN MISLAN

Indoor



Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver

Male

Yes

27/08/2019

2 YEARS AND 11 MONTHS

No

Dry

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collision - Head to Rear Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Nο Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement

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

I WAS STATIONARY AT CHUN TIN RD AWAITING FOR TRAFFIC IN UPPER BUKIT TIMAH ROAD TO MOVE OUT WHEN THE OTHER VEHICLE (TAXI SH6818B) WHICH WAS COMING FROM CHEONG CHIN NAM RD DID NOT OBSERVE THE STOP LINE AND COLLIDED INTO THE REAR OF MY VEHICLE. THE LEFT FRONT WHEEL OF THE TAXI HAD COLLIDED INTO THE EXHAUST ON THE RIGHT SIDE OF MY VEHICLE CAUSING MY VEHICLE TO FALL ONTO THE ROAD.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Yes No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category

SH6818B Hyundai

Taxi

Accident report SN07227L000H

Name of Driver			-
Contact Number			_
Address			-
Address complement			-
Postcode			-
Insurance Company Name			-
Nature Of Damage			-
Details of property damaged in a	accident		-
No. Of Passenger (Including Dri	ver)		4

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Declaration		
We decime the foregoing particular	rs are true in every respect	
Ahr -		Andrew .
ticylester's Signature Cote & Pre 21072022 14:00	Discer's Signature (# driver is not the policyholder) / Date & Time	Were sed by Reporting Centre Personnel Mora Rizza Syah Bin Aziz S994949

SKETCH PLAN

IMPORTANT NOTICE

- 1. Pease report **correctly** the details of the accident to speed up the claims process.
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- Information provided must be as truthful and accounte as possible. Any will disrepresentation or withholding of material facts may above resurrance companies to reputible policy subsity.
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- 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 Oata Protection Act (POPA)

Funderstand, acknowledge, agree and consent that

funderstand, acknowledge, agree and corecent that (a) My insurer , my windshop and the General insurance Association of Singapore ("GIA") may lare permitted to collect, use, disclose and/or process my personal databjerscoal information set out in this (form) and any other personal information provided by me or passessed by my insurer (collectively the "Parsonal Information") and disclose and transfer such Parsonal information to all insurer(s) who have misured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectedly referred to as the "insurers"), the insurers' line years from (firm, the Monetary Authority of Singapore and any relevant government agency (authority (such as the police), for the purpose(s) of.

(i) processing, handing and/or dealing with my claims including the softlement of the claims and any necessiony investigations relating to the claims.

(ii) awastigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enguines by me:

(b) administring my claims (lockuling the making 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 insured(s) who have insured vehicle(s) involved in the accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose under process my Personal information for one or more of the above Perposes, and

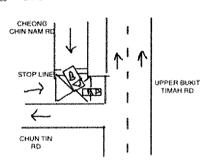
(c) my Personal information may can be disclosed by any of the insurers and/or GIA to their third party service providers or algents (including their law yers haw firms), which may be seed outside of Singapore, for one or more of the above Reposes.

Poscyholder's Signature i Date & Time 21072022 14:00

Disver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre INORA RIZZA SYAH BIN AZIZ S994949

Sketch Plan



A FBP150S R: \$56681.88