

TwinCar AUTOMOTIVE PTE LTD

Company Registration and GST No. 200714616M

2 Kaki Bukit Avenue 2 #01-17 Kaki Bukit Autohub, Singapore 417921

Tel: 67440510

Fax: 67410510

Email: sales@n51.com.sg

Our Ref:

SGD 1321 M

Your ref:

SHA 2505 Y

25 July 2022

AXA INSURANCE PTE LTD

BY EMAIL motor.survey@axa.com.sg ONLY

ROBINSON ROAD

P.O.BOX 1094

SINGAPORE 902144

Attn: Motor Claims Department

Dear Sir/Madam,

DATE OF ACCIDENT : 25 July 2022

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS

PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by **WONG SZE SHUN** to notify you of a road traffic

accident on **25 July 2022** at about **14:35 HRS**

along **PIE TWDS TUAS B4 STEVEN RD EXIT**

our client's vehicle **SGD 1321 M & SHA 2505 Y** driven by you/your insured at the material time.

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 be inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,



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TwinCar Automotive Pte Ltd

VEHICLE NO:	SGD 1321 M			MAKE & MODEL:	Mercedes E250			VEHICLE TYPE:	AUTOMOBILE		
DATE OF ACCIDENT:	25.07.2022										
TIME OF ACCIDENT:	1435 HRS										
LOCATION OF ACCIDENT:	PE towards Tuas before Steven Road Exit.										
EXACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT			<input checked="" type="checkbox"/> PRIVATE USE			<input type="checkbox"/> PRIVATE HIRE				
NAME OF OWNER:	WONG SZE SHUN.										
TEL NO:	H/P: 8338 0310			OFFICE:			HOME:				
NRIC:	S 8087537A										
ADDRESS:	107 Tampines Street 86 #07-25 (R) 528533										
EMAIL:	justin@modernok.sg										
CLAIM TYPE:	OD / <input checked="" type="checkbox"/> THIRD PARTY / <input type="checkbox"/> REPORTING ONLY										
FLEET POLICY:	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>										
INSURANCE COMPANY:	NTUC.										
TYPE OF COVERAGE:	<input checked="" type="checkbox"/> Comprehensive <input type="checkbox"/> Third Party / <input type="checkbox"/> Third Party Fire & Theft										
POLICY NO:	5119185433-01.										
NAME OF DRIVER:	<input checked="" type="checkbox"/> AS ABOVE <input type="checkbox"/> IF NO:										
NRIC:	ANY PASSENGER: N.A.										
DATE OF BIRTH:	03/10/1980			LICENCE PASSED DATE: 02/09/2009							
OCCUPATION:	<input checked="" type="checkbox"/> OUTDOOR <input type="checkbox"/> INDOOR										
GENDER:	<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE										
CONTACT NO:	H/P:			OFFICE:			HOME:				
ADDRESS:											
EMAIL:											
DOES DRIVER OWNED ANY VEHICLE:	NO / IF YES, REG NO:			INSURER:							
RELATIONSHIP:	Owner										
WEATHER CONDITION:	<input checked="" type="checkbox"/> CLEAR <input type="checkbox"/> RAINING <input type="checkbox"/> OTHERS:										
ROAD SURFACE:	<input checked="" type="checkbox"/> DRY <input type="checkbox"/> WET <input type="checkbox"/> OTHER:										
ANY INJURIES:	NO <input checked="" type="checkbox"/> IF YES, WHO? Wong Sze Shun (H/P: 8338 0310)										
NAME & CONTACT:											
NAME & CONTACT:											
POLICE REPORT:	<input checked="" type="checkbox"/> NO <input type="checkbox"/> IF YES, WHERE?										
NOTICE OF INTENDED PROSECUTION GIVEN?	<input checked="" type="checkbox"/> NO <input type="checkbox"/> IF YES, WHO?										
VEHICLE B REG NO:	SHA 2505 Y.			ANY PASSENGERS:			02 (IM) (IF).				
NAME OF DRIVER:	Lim Chee Meng			CONTACT NO:							
VEHICLE C REG NO:				ANY PASSENGERS:							
VEHICLE D REG NO:				ANY PASSENGERS:							
VEHICLE E REG NO:				ANY PASSENGERS:							
VEHICLE F REG NO:				ANY PASSENGERS:							
VEHICLE G REG NO:				ANY PASSENGERS:							
ANY WITNESS? IF YES, NAME:	N.A.			WITNESS CONTACT:			N.A.				
WAS THERE ANY VIDEO CAPTURE?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>										
WAS THERE ANY AUDIO RECORDED?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>										
ACCIDENT SCENE PHOTOS TAKEN?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO										
ACCIDENT PORTION:	Rear Portion.										
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>										
WORKSHOP PARTICULAR:	Twincar Automotive Pte Ltd.										
CONTACT NO:	68420051 / 67440510										
CONTACT PERSON:	JOSEPH TAN.										
FAX NO:	67410510										
WORKSHOP EMAIL:	sales@n51.com.sg										

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 Actual 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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)

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop 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) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "**Insurers**"), the Insurers' lawyers/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 with 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

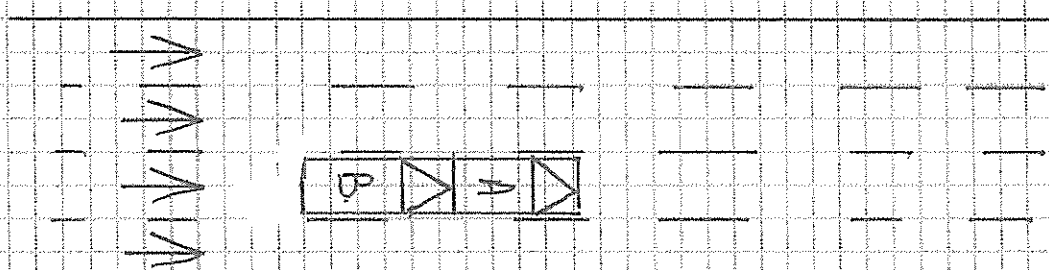
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan


④ SGP 1321 M	
③ SHA 2505 Y.	
	
PIE towards Tuas before Steven Road Exit	


Describe Circumstance of the Accident

On 25/07/2022 at @ 1425 hrs, I was travelling in my vehicle (86D 1321M) along PIE towards Tuas before Steven Road exit on the 2nd lane from the right. I slowed down and stopped due to traffic jam ahead. Suddenly, a taxi (2HA 25058) from behind collided onto the rear portion of my vehicle.

Declaration

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


Policyholder's Signature / Date & Time


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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)