

SERVICE CENTRE Block 6 Defu Lane 10 #01-556 Singapore 539187

SPRAY CENTRE Block 5 Defu Lane 10 #01-574 Singapore 539186 Tel: 6280 8927 Fax: 6280 4205

Date: 16 08 22		
. 10 100 22		
O: LON PAC INSURANCE BHD		
Motor Claims Department	_	
Department		
Singapore		
ear Sir/Mdm,		
NOTIF	ICATION OF ACCIDENT	
ease be informed that an accident involvir	ng my/our vehicle no . GZ 363 Z	
XD9463+	ng my/our vehicle no . GZ 3637Z had taken place	an at /al-
Drchard Tower Load	had taken place on date 1	at /alon
ne 10.30am	O d	5 08 22
ndly let us have a list of to		
pulated timeline under the NIMA protocol	s as your nominated SJE for our consideration	n within
dider the Wilvia protocol	I.	
we do not hear from you within 2 working	- d	
ice and our client shall claim for the addi	g days, we shall proceed to repair the vehicle wi	thout fur
/ou.	g days, we shall proceed to repair the vehicle wi itional loss of use arising from the giving of this	notifica
~		
urs Sincerely		
	PRI	
	Date / Time	
	Date / Time	
	Company Name Surveyor	
	Company Name Surveyor Contact No.	
	Company Name Surveyor	
	Company Name Surveyor Contact No.	
	Company Name Surveyor Contact No. Signature	
	Company Name Surveyor Contact No. Signature DISMANTLED PARTS Date / Time	
	Company Name Surveyor Contact No. Signature DISMANTLED PARTS	
	Company Name Surveyor Contact No. Signature DISMANTLED PARTS Date / Time Surveyor	
	Company Name Surveyor Contact No. Signature DISMANTLED PARTS Date / Time	