



Company & GST Registration No. 200616038C

2 Kaki Bukit Avenue 2 #01-17/#01-18 /Heavy Vehicle #01-08/Spray Painting #02-27

Kaki Bukit Autohub Singapore 417921

Tel: 68420051

Fax: 67410510

Email: sales@n51.com.sg

Our Ref:

SKZ 8324 X

Your ref:

SNB 5203 Y

03 October 2022

SOMPO INSURANCE SINGAPORE PTE. LTD.

BY EMAIL motorsurvey@sompo.com.sg ONLY

50 RAFFLES PLACE #03-03

SINGAPORE LAND TOWER

SINGAPORE 048623

Attn: Motor Claims Department

Dear Sir/Madam,

DATE OF ACCIDENT : 01 Oct 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 **NG REN SHIN** to notify you of a road traffic

accident on **01 Oct 2022** at about **15:15 HRS**

along **BUKIT BATOK EAST AVE 3 (BLK 284)**

our client's vehicle **SKZ 8324 X & SNB 5203 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,



.....
N-51 AUTOMOTIVE PTE LTD

| | | | | | | | |
|---|--|--|--|----------------------|-----------------------------|--------------|--|
| VEHICLE NO: | SKZ 8324 X | | | MAKE & MODEL: | Peugeot 508 (AUTO) / MANUAL | | |
| DATE OF ACCIDENT: | 01/10/2022 | | | CC: | 1.6 Bluehdizet6 | | |
| TIME OF ACCIDENT: | 1515 HRS | | | | | | |
| LOCATION OF ACCIDENT: | Bukit Batok East Ave 3 (BK284) | | | | | | |
| EXACT PURPOSE USE DURING ACCIDENT: | EMPLOYMENT (PRIVATE USE) / PRIVATE HIRE | | | | | | |
| NAME OF OWNER: | Ng Ren shin | | | | | | |
| TEL NO: | H/P: 94504830 | | | OFFICE: | HOME: | | |
| NRIC: | S7613700E | | | | | | |
| ADDRESS: | 10 Prinsep link #12-10 S' 187948 | | | | | | |
| EMAIL: | rsng888@gmail.com | | | | | | |
| CLAIM TYPE: | OD (THIRD PARTY) / REPORTING ONLY | | | | | | |
| FLEET POLICY: | YES (NO) | | | | | | |
| INSURANCE COMPANY: | Sampo Insurance (S) Pte Ltd. | | | | | | |
| TYPE OF COVERAGE: | (Comprehensive) / Third Party / Third Party Fire & Theft | | | | | | |
| POLICY NO: | D22M7PV01011938 | | | | | | |
| NAME OF DRIVER: | AS ABOVE / IF NO: Ng Eng Lam | | | | | | |
| NRIC: | S0096279A | | | ANY PASSENGER: | 0 | | |
| DATE OF BIRTH: | 24/11/1948 | | | LICENCE PASSED DATE: | 05/Dec/1993 | | |
| OCCUPATION: | OUTDOOR (INDOOR) | | | | | | |
| GENDER: | (MALE) / FEMALE | | | | | | |
| CONTACT NO: | H/P: 8188418 | | | OFFICE: | HOME: | | |
| ADDRESS: | NO 56, Bukit Batok St 31 #28-13 S' 659445 | | | | | | |
| EMAIL: | rsng888@gmail.com | | | | | | |
| DOES DRIVER OWNED ANY VEHICLE: | (NO) / IF YES, REG NO: | | | NIL | | INSURER: NIL | |
| RELATIONSHIP: | Son | | | | | | |
| WEATHER CONDITION: | (CLEAR) / RAINING / OTHERS: | | | | | | |
| ROAD SURFACE: | (DRY) / WET / OTHER: | | | | | | |
| ANY INJURIES: | NO / (IF YES) WHO? Ng Eng Lam | | | | | | |
| NAME & CONTACT: | | | | | | | |
| NAME & CONTACT: | | | | | | | |
| POLICE REPORT: | NO / (IF YES) WHERE? J/2022/002/7034 | | | | | | |
| NOTICE OF INTENDED PROSECUTION GIVEN? | NO / IF YES, WHO? NIL | | | | | | |
| VEHICLE B REG NO: | SNB52034 | | | ANY PASSENGERS: | 0 | | |
| NAME OF DRIVER: | Tay Chin Lai | | | CONTACT NO: | 81130603 | | |
| 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: | NIL | | | WITNESS CONTACT: | | | |
| WAS THERE ANY VIDEO CAPTURE? | (YES) / NO | | | | | | |
| WAS THERE ANY AUDIO RECORDED? | YES (NO) | | | | | | |
| ACCIDENT SCENE PHOTOS TAKEN? | (YES) / NO | | | | | | |
| ACCIDENT PORTION: | Front Portion | | | | | | |
| Have you been approach by unknown person soliciting (s) / offering accident claims assistance? YES / NO | | | | | | | |
| WORKSHOP PARTICULAR: | N-S1 Automotive Pte Ltd | | | | | | |
| CONTACT NO: | 68420051 / 67440510 | | | | | | |
| CONTACT PERSON: | IRZNE Lion | | | | | | |
| FAX NO: | 67410510 | | | | | | |
| WORKSHOP EMAIL: | sales@n51.com.sg | | | | | | |

SKETCH PLAN

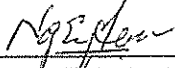
IMPORTANT NOTICE

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:

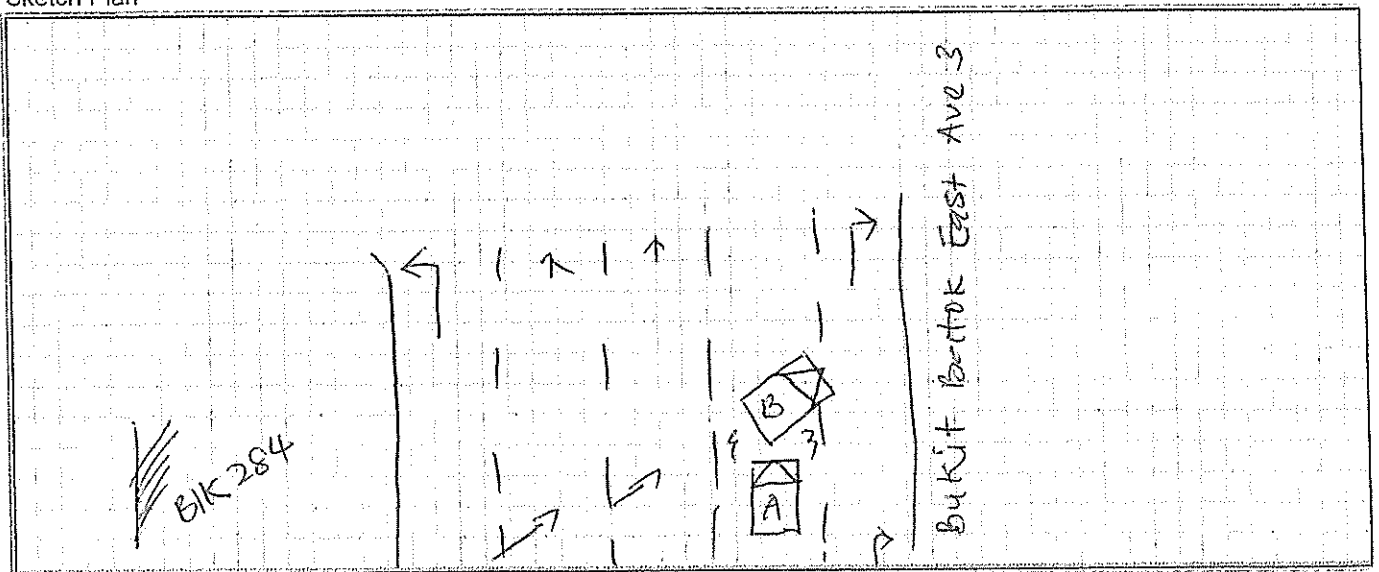
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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




Describe Circumstance of the Accident

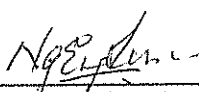
refer to police report

J/2022/002/7034

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)



SINGAPORE POLICE FORCE



J/20221002/7034

1 of 2

Report No. J/20221002/7034

POLICE REPORT (NP299)

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

| | | |
|--|---|-------------------|
| Date/Time Report Made 02/10/2022 16:19 | Vide Report No. | Station Diary No. |
| Name Of Informant NG ENG LAM | Address 56 BUKIT BATOK STREET 31 #28-13 SINGAPORE 659445 | |
| ID Type / ID No. NRIC NO / S0096279A | Contact No. Home/Office: Mobile: 81888418 | |
| Nationality SINGAPORE CITIZEN | Email Address ENGLAM2003@HOTMAIL.COM | |
| Occupation Consultant | Sex Male | Age 73 |
| Institution/School Name | Date of Birth 24/11/1948 | Race Chinese |
| Date/Time Of Incident 01/10/2022 15:15 - 01/10/2022 15:20 | Language English | |
| | Location Of Incident 56 BUKIT BATOK STREET 31 #28-13 SINGAPORE 659445 | |

Brief details.

I was driving my car SKZ8324X along Bukit Batok East Ave 3 in the right most lane. I had just passed by blk 284 Bukit Batok East Ave 3 on my left and was approaching traffic junction intersection with Bukit Batok East Ave 6. Suddenly a black Kia cerato SNB 5203 Y swerved into my lane without signalling. I immediately slammed on my brakes fully but was unable to avoid hitting the said car. Both my car air bags were deployed and my car windscreen was cracked. The said car suffered minor damage on its rear bumper while my car was quite badly damaged and The accident was captured on my in-car

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:
02/10/2022 16:19

Classification Of Case:



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20221002/7034

camera. The other driver and I exchanged particulars and he drove off in his car. The other driver gave his name as TAY CHIN LAI S7012085J. My car couldn't be started and I had to get it towed to a car workshop. I was in a state of shock after the accident. I could not sleep properly last night and woke up having shortness of breath and felt pain in my chest, neck and back. I was seen by a doctor at Ng Teng Fong Hospital A&E department and given 5 days medical leave. I would like the police to investigate this matter as I felt that the said driver had endangered my life by driving in such an irresponsible manner and hope that action can be taken against him if he is found to have committed any traffic offence.

| Subjects Involved | | | |
|-------------------|------------------------|---------------------------|---|
| Victim | | | |
| Person Name | NG ENG LAM | | |
| ID Type | NRIC NO | ID No | S0096279A |
| Gender | Male | Age | 73 |
| Race | Chinese | Language | English |
| Occupation | Consultant | Address | 56 BUKIT BATOK STREET 31 #28-13 SINGAPORE 659445 |
| Mobile No | 81888418 | Is Informant A Victim? | Yes |
| | | | |
| Person Name | NG ENG LAM (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:
02/10/2022 16:19

Classification Of Case: