

N-51 AUTOMOTIVE PTE LTD

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:

SKU 8751 Y

Your ref:

SG 6299 D

06 October 2022

MS FIRST CAPITAL INSURANCE LIMITED

BY EMAIL MotorClaims@msfirstcapital.com.sg ONLY

6 RAFFLES QUAY

#21-00

SINGAPORE 048580

Attn: Motor Claims Department

Dear Sir/Madam,

DATE OF ACCIDENT : 05 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 **CHUA KEE CHANG, BERNARD** to notify you of a road traffic accident on **05 Oct 2022** at about **17:50 HRS** along **TAMPINES CONCOURSE TWDS AVE 9, TURNING LEFT ONTO TAMPINES CENTRAL 8** our client's vehicle **SKU 8751 Y & SG 6299 D** 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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N-51 AUTOMOTIVE PTE LTD

VEHICLE NO:	SKY 8751Y	MAKE & MODEL	Honda Civic	<input checked="" type="radio"/> AUTO / <input type="radio"/> MANUAL
DATE OF ACCIDENT:	05/10/2022	CC:		
TIME OF ACCIDENT:	1750	HRS		
LOCATION OF ACCIDENT:	Tampines Concourse towards Ave 9, turning left onto			
EXACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE			Tampines Central 8
NAME OF OWNER:	Chua Kee Chang, Bernard			
TEL NO:	H/P: 9222 0358	OFFICE:	HOME:	
NRIC:	S8947394B			
ADDRESS:	945 Tampines Ave 4 #07-328 (S) 520945			
EMAIL:	CKC Bernard@gmail.com			
CLAIM TYPE:	<input checked="" type="radio"/> OD / <input type="radio"/> THIRD PARTY / <input type="radio"/> REPORTING ONLY			
FLEET POLICY:	YES / <input checked="" type="radio"/> NO?			
INSURANCE COMPANY:	NTUC			
TYPE OF COVERAGE:	<input checked="" type="radio"/> Comprehensive / <input type="radio"/> Third Party / <input type="radio"/> Third Party Fire & Theft			
POLICY NO:	5130026788			
NAME OF DRIVER:	AS ABOVE / IF NO:			
NRIC:	AS above	ANY PASSENGER:	1(F)	
DATE OF BIRTH:	25/12/1989	LICENCE PASSED DATE:	17/03/2009	
OCCUPATION:	<input checked="" type="radio"/> OUTDOOR / <input type="radio"/> INDOOR			
GENDER:	<input checked="" type="radio"/> MALE / <input type="radio"/> FEMALE			
CONTACT NO:	H/P: AS above	OFFICE:	HOME:	
ADDRESS:	945 Tampines Ave 4 #07-328 (S) 520945			
EMAIL:	AS above			
DOES DRIVER OWNED ANY VEHICLE:	<input checked="" type="radio"/> NO	IF YES, REG NO:	INSURER:	
RELATIONSHIP:	owner			
WEATHER CONDITION:	<input checked="" type="radio"/> CLEAR / <input type="radio"/> RAINING / <input type="radio"/> OTHERS:			
ROAD SURFACE:	<input checked="" type="radio"/> DRY / <input type="radio"/> WET / <input type="radio"/> OTHER:			
ANY INJURIES:	NO / IF <input checked="" type="radio"/> YES, WHO?			
NAME & CONTACT:	Chua Kee Chang, Bernard, 9222 0358			
NAME & CONTACT:	Lee Chiew May, 9850 3209			
POLICE REPORT:	<input checked="" type="radio"/> NO / IF YES, WHERE?			
NOTICE OF INTENDED PROSECUTION GIVEN?	<input checked="" type="radio"/> NO / IF YES, WHO?			
VEHICLE B REG NO:	SG 6299D	ANY PASSENGERS:	unknown	
NAME OF DRIVER:	Muhammed Burhan Saputra	CONTACT NO:	unknown	
VEHICLE C REG NO:	Bin mohamed Noor	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:		WITNESS CONTACT:		
WAS THERE ANY VIDEO CAPTURE?	<input checked="" type="radio"/> YES	<input type="radio"/> NO		
WAS THERE ANY AUDIO RECORDED?	<input checked="" type="radio"/> YES	<input type="radio"/> NO		
ACCIDENT SCENE PHOTOS TAKEN?	<input checked="" type="radio"/> YES	<input type="radio"/> NO		
ACCIDENT PORTION:	Rear right portion			
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?				<input checked="" type="radio"/> YES <input type="radio"/> NO
WORKSHOP PARTICULAR:	N-51 Automotive Pte Ltd			
CONTACT NO:	68420051 / 67440510			
CONTACT PERSON:	Jun Ming			
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.



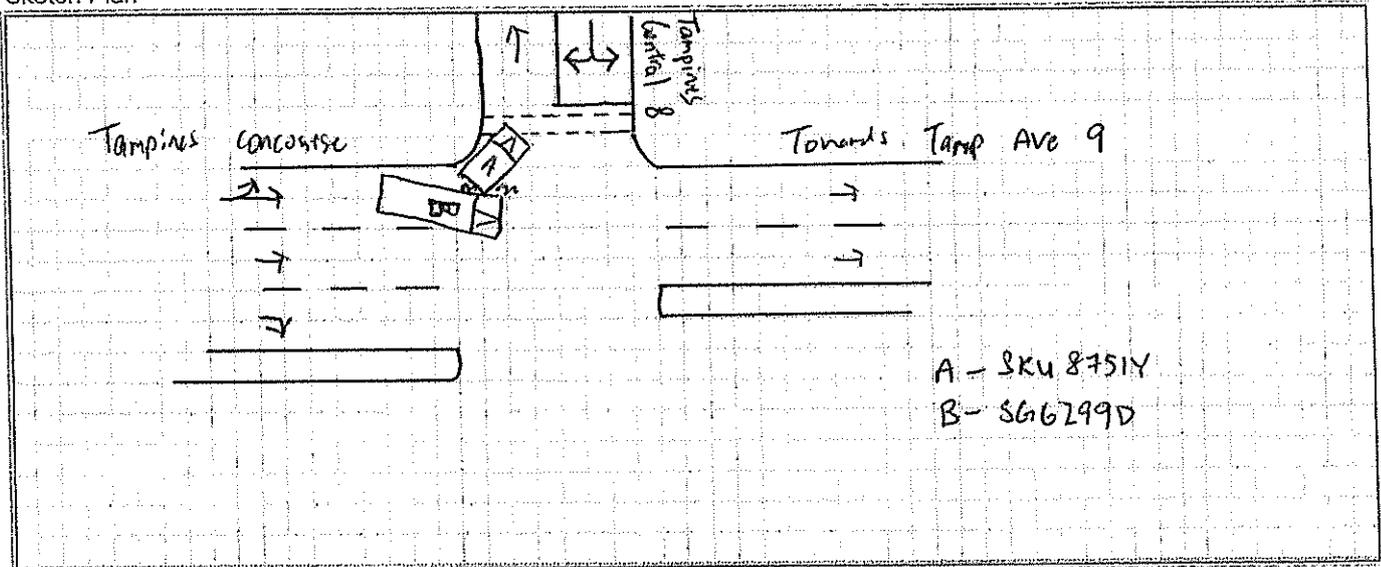
Policyholder's Signature / Date & Time



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

As per above date and time, I was driving my vehicle SKU 2751Y along Tampines Concourse rd towards Tampines Ave 9 on the extreme left lane. While making a left turn onto Tampines central 8 with the traffic light was green, there was a cyclist crossing the road. As such, I slowed down my vehicle and stopped for the cyclist to cross. Out of sudden, I felt an impact from the rear. I alighted and discovered Veh (B) SG6299D front left portion collided onto my vehicle rear right portion. Video Footage attached.

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)