

MG SOLUTION PTE LTD

23 Kaki Bukit Ave 4 (South Wing) #04-01
Vicom Inspection Centre, Singapore 415933
Tel: 6243 1373 Fax: 6243 1376
Co. Reg. No. : 201427944N

Date : 14/10/2022

To : INDIA INTERNATIONAL INSURANCE PTE LTD
Tel : 6347 6100
Fax : 6224 4174
Email : motorclaim@iii.com.sg / gabriel@iii.com.sg

By Fax & Email

Attn: Motor Claims Department

Dear Sir,

Re: Accident involving motor vehicle Nos. SMK 3655D and PC 4641T
along BKE towards PIE (Tuas) before PIE (Changi Airport) on 14/10/2022
exit.

We are instructed by MOHAMMAD IBRAHIM BIN KARIM (Name of Claimant) to notify you of a road traffic accident on the above mentioned. A copy of the Singapore Accident Statement / Traffic Police Report filed is enclosed.

As a result of the accident, our client's / customer's vehicle has been damaged. Before our client / we 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 / we shall proceed to repair the vehicle without further reference to you.

Thank you.

Yours faithfully,



MS. HENG YOKE HONG
HP: 8121 1373

FOR SURVEYOR

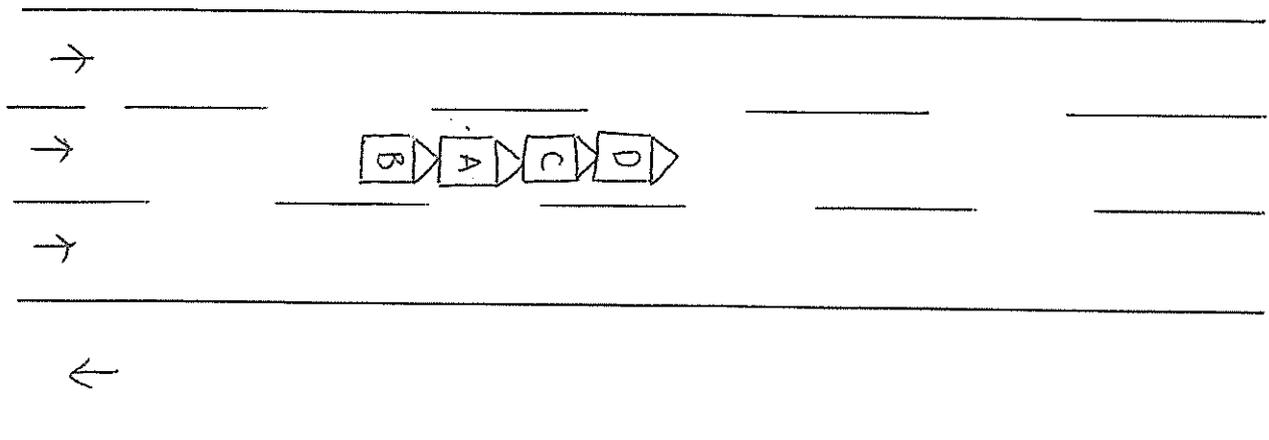
Please initial here after completion of pre-repair inspection. Thank you.

Appointed Surveyor: _____
(Name & Signature)

Date & Time of Inspection: _____

SKETCH PLAN

BKE toward PIE (MAS) before PIE (Changi Airport)



(A) SMK3655D (B) PC4641T
 (C) GBD64885 (D) YP5799R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Report to TP Report

20/11/14

7028

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

DECLARATION

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

[Signature]

Policyholder's Signature
 Date & Time:

[Signature]

Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:



Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMK3655D	NTUC Income Insurance Co-Operative Limited	5130105962	07/09/2022	06/09/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Passenger				
Name	KATHRYN		ID No.	NIL
Related Vehicle	SMK3655D (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
Driver				
Name	MOHMAD IBRAHIM BIN KARIM		ID No.	S1188758I
Related Vehicle	SMK3655D (Car)		Contact No.	84828322
Hospital/Clinic	SUNSHINE CLINIC FAMILY PRACTICE & SURGERY		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	14/10/2022		Date	NIL
No. of Days granted Medical Leave	07		Degree of	Serious

Brief Details.

On 14/10/2022 (Date) at about 0945 hours at along BKE towards PIE (Tuas) before PIE (Changi Airport) exit. I was travelling on middle lane and my front vehicle slow down and stop due to heavy traffic hence I follow suit.

Suddenly, I heard a loud bang from behind and the impact forced my vehicle (A) to move forward to hit onto the rear portion of Vehicle (C). When I alighted I realized it was vehicle (B) who hit my rear portion of my vehicle (A) causing damages to my front & rear portion of my vehicle. It was a chain collision of total 4 vehicles involved. I wish to state that I have 1 female passenger inside the vehicle. After the accident, I went to consult a doctor and was given 07 days MC for my injury.

- (A) SMK3655D
- (B) PC4641T
- (C) GBD6488S
- (D) YP5799R



**SINGAPORE
POLICE FORCE**



T/20221014/7028

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20221014/7028

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



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Tel No: 65470000

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CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
YAN MINGSHENG DANIEL
Contact No.: 65476252

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
14/10/2022 14:56

Classification Of Case: