

**CHIA S ARUL LLC**  
ADVOCATES & SOLICITORS  
UEN 201330709H

ARULCHELVAN S • RUTHRA RAM • DON TAN

Our Ref : SLB 9461R (wk)

Your Ref : To be advised

31 January 2023

**Lonpac Insurance Bhd**

**BY EMAIL**

Dear Sirs,

**RE: PROPERTY DAMAGE CLAIM**  
**CLAIMANT : TAN YU HENG JOEL**  
**ACCIDENT INVOLVING SLB 9461R & SFD 1233X ALONG PIE ON 30**  
**JANUARY 2023**  
**PRE-REPAIR SURVEY NOTICE**

1. We act for Tan Yu Heng Joel, the owner of motor vehicle no. SLB 9461R which was involved in the aforesaid accident.
2. We hereby in compliance with the Pre-Action Protocol for Non-Injury Motor Accident Claims, Appendix C of the State Courts Practice Directions Amendment No. 1 of 2016 ("the **NIMA Protocol**") give you **NOTICE** that we are claiming against your insured motor vehicle no. SFD 1233X for damages, costs and disbursements as a result of your insured driver's negligence.
3. Please let us know if you wish to conduct a pre-repair survey on our client's motor vehicle at:

<b>Workshop</b>	<b>Kim Motoring</b>
<b>Address</b>	<b>60 Jalan Lam Huat, #02-20 Carros Centre, Singapore 737869</b>
<b>Contact Person</b>	<b>Mr. Sylvester (8687 3233)</b>

4. Pursuant to paragraph 2.3 of the NIMA Protocol, in the event we do not receive your response within next **two (2) working days** (excluding any Saturday, Sunday or public holiday), our client will instruct the workshop to commence appraisal and repairs to the damaged motor vehicle without further reference to you.
5. Please advise the appointed surveyor to endorse on page 2 of this letter after the completion of each inspection.

Yours faithfully,

**MR ARULCHELVAN S**  
cc: Client (By Email)

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**PRE-REPAIR SURVEY (1)**  
WORKSHOP:

SURVEYOR:

\_\_\_\_\_  
Name:  
Date/Time:

\_\_\_\_\_  
Name of Surveyor:  
Contact Number:  
Date/Time:

**PRE-REPAIR SURVEY (2)**  
WORKSHOP:

SURVEYOR:

\_\_\_\_\_  
Name:  
Date/Time:

\_\_\_\_\_  
Name of Surveyor:  
Contact Number:  
Date/Time:

**POST-REPAIR SURVEY**  
WORKSHOP:

SURVEYOR:

\_\_\_\_\_  
Name:  
Date/Time:

\_\_\_\_\_  
Name of Surveyor:  
Contact Number:  
Date/Time: