CROSSBORDERS LLC

Advocates & Solicitors | Commissioner for Oaths | Notary Public

MAIN OFFICE 133 NEW BRIDGE ROAD #23-03/04/05 CHINATOWN POINT SINGAPORE 059413

Our Ref:

TK.ANG (SMK7770C)

Your Ref:

SMQ89501

TEL: 6438 1323 FAX: 6438 2313

11 April 2023

Allianz Insurance Singapore Pte Ltd.

BY EMAIL ONLY

79 Robinson Road #09-01

Singapore 068897

Attn: Motor Claims Department

Dear Sirs

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION CLAIMANT: SATRIA AYU BIN RAMJUDI

TRAFFIC ACCIDENT ON 20 APRIL 2022 AT 17:00 HRS ALONG LENTOR AVENUE

INVOLVING VEHICLES NO. SMK7770C & SMQ8950L

We are instructed by SATRIA AYU BIN RAMJUDI to notify you of a road accident on 20 APRIL 2022 at about 17:00 hrs along LENTOR AVENUE involving our client's vehicle registration number SMK7770C and vehicle registration number SMQ8950L driven by your insured at the material time. A copy of the Singapore accident statement/traffic police report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know within 2 working days (excluding any intervening Saturday, Sunday and Public Holiday) 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 informed that the said vehicle can be inspected at:

Venue:

GOH LEE HWA AUTOMOBILE PTE LTD

Address:

Block 5033 Ang Mo Kio Industrial Park 2

#01-255

Singapore 569536

Contact:

Mr Ang (8498 3980)

Please liaise with the above workshop directly.

Yours faithfully

Email: corene@crossbordersllc.com /

huiting@crossbordersllc.com

encs

PLEASE LET US KNOW THE DATE OF THE PRE-REPAIR INSPECTION

CONFIDENTIALITY CAUTION

THIS DOCUMENT IS FOR THE ADDRESSEE(S) ONLY AND MAY CONTAIN CONFIDENTIAL INFORMATION AND/OR MAY BE SUBJECT TO LEGAL PRIVILEGE. IF YOU HAVE RECEIVED THIS IN ERROR, PLEASE CONTACT US IMMEDIATELY.

SC1G224M0007 / CHENG HOE MOTOR PTE LTD[768761] ENTRY DATE & TIME: 22/04/2022 18:28 (SGT) SUBMITTED BY: CHIONG BENG CHOON VERSION: 1 (23/04/2022 12:32 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate The issue and acceptance of this Form by insurance companies is not an admission of policy liability.
 The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for investigation.
 This report will be forwarded by the insurers of 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.

ACCIDENT STATEMENT

Date of Submission Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss	22/04/2022 18:28 (SGT) 20/04/2022 17:00 (SGT) Singapore LENTOR AVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK7770C
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No	No SATRIA AYU BIN RAMJUDI S8330463D satria83@hotmail.com (Phone) +65-84489649 +65-84489649
VEHICLE PARTICULARS	

Manufacturer	Nissan
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
Variant	-
Exact purpose for which vehicle was being used at time of	
accident	Private use
Are you claiming under your own insurance policy for repair to	
your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1197
ALL AND	

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5125577456
Cover Note Number	25/01/22 - 24/01/23

Name of Driver	SATRIA AYU BIN RAMJUDI
NRIC No	S8330463D

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver	28/09/1983 Indoor 13/04/2008 14 YEARS Male (Phone) +65-84489649 +65-84489649 satria83@hotmail.com BLK 315A YISHUN AVE 9 #04-216 - 761315 Yes - No
Insurance Company of Other Vehicle Owned by Driver	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Raining Wet
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 2 Yes Yes Yes 1
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No
CIRCUMSTANCES OF ACCIDENT	
REFER POLICE REPORT	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Was there any audio recorded?	Yes Yes SD CARD WITH TRAFFIC POLICE No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant	SMQ8950L - -

Vehicle Colour

SKET	CH	D1	AM

1.VEHICLE NO.: SAKTING.

2.INSURER CO: HTMC.

3.ACCIDENT

DATE & TIME: 2014 22 12200

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wiful misrepresentation or withholding of material facts may allow insurance comparise to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurence companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General insurance Association
- of Singapore (GIA) for archiving and that copies of this report will fer a fee be made available upon application by interested perties.
- By the lodgement of this report to this 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)

funderstand, 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 date/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' law yers/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;
- (6) 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 inelling 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 lew 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' law yers/law Tirms, 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 law yers/law firms), which may be stied outside of Singapore, for one or more of the above Purposes.

Policyhoider's Signature / Date & Driver's Signature (if driver is not the policyhoider) / Date Witnessed by Reporting Centre Personnel

Sketch Plan

PLEASE

TURN

OVER

Accident report SC1G224M0007

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Sketch Plan		4 - A - A - A - A - A - A - A - A - A -
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		A: SMK TOTOL
*		
		8: 3MQ 8750L
	X	
*		
DESCRIBE CIRCUMSTA	ANCES OF THE ACCIDENT	
	(25) SAN (18) (19) (19) (19) (19) (19) (19) (19) (19	DoA : 20/4/22 17:00
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Annual Control of the		
	ALL WAS ARRESTED BY A STATE OF THE STATE OF	
		The state of the s
Note : Please note	that your insurer may have 14days Time Frame for yo	u to submit an Own Damage Claim
	wn comprehensive policy. Please check with your pol	
DECLARATION		
I/We declare the foregoi	ng particulars are true in every respect.	
٨		
(hrt	A CONTRACTOR OF THE CONTRACTOR	(45) mg 32/4/22
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(if driver is not the policyholder)	Name: NRIC/FIN No.:
	Oate & Time: () Claim Own Policy () Claim Third Party () Ri	
	() Claim OD/TP at other workshop (and a state of the





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20220420/7041

REPORT OF A TRAFFIC ACCIDENT

Date/Time 20/04/2022	•	ade:	Vide Report No.:		Station Diary No.:	
Informant	s Particu	lars				
Name of In SATRIA A		nant: Address: BIN RAMJUDI 315A YISHUN AVENUE 9 #04-216 SINGAPORE 761315				
ID Type / ID No.: NRIC NO / S8330463D			Contact No.: Home/Office: Mobile: 84489649			
Nationality SINGAPOI		ΞN	Email: Satrie83@hotmail.com			
Sex: Male	Age: 38	Date of Birth: 28/09/1983	Type of informant: Driver			
Race: Boyanese			Language: Institution / School Name: English			
Occupation			Driving Licence Information: Class: 2B,2A,3A Date of Expiry:			

General Informati	on of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 20/04/2022 17:00		Type of Location: cross junction
Location:	Annual and the second s				
YISHUN AVENUE	E 1 and lentor ave junction				
Weather:	Road	Surface:		Road	d Speed Limit:
Raining	Wet				
Traffic Flow:	Traffic	Control:		Traff	ic Volume:
One Way Traffic Light - Working Light					
Type of Collision: Between Moving Vehicles - Head To Rear Anyone conveyed by ambulance: Yes					

Details of V	ehicle invo	lved	and place and	The second second		
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMK7770C	Car	NISSAN	qashqai	Maroon	Slightly Damaged	0
SMQ8950L	Car			White	Slightly Damaged	0



T/20220420/7041

Police Station Of Origin: **Traffic Police**

Report No. T/20220420/7041

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10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Details of Vo	ahicle insurance	117		
Vehicle No.	Insurance Company	Insurance No	Effective	Explry Date
SMK7770C	NTUC Income Insurance Co-Operative	5125577456	25/01/2022	24/01/2023
	Limited			

Driver Name	SATRIA AYU BIN RAMJUDI			5 (4 C) A (5 C) (5 C) (6 C)
	OUT THE WAY I CHANGE		ID No.	S8330463D
Related Vehicle	SMK7770C (Car)		Contact No.	84489649
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry	Class: 2B,2A,3A Date of Expiry: NIL
Date	20/04/2022	Date	20/04	1/2022

Brief Details.

My vehicle SMK7770C was stationery 0km/hr, at the cross junction (Red Light). When I felt an heavy impact from the back. I took out my handphone and step out to check what had happened. I managed took a video of the vehicle SMQ8950L who collided into my vehicle from the back. A male chinese male estimated to be in early 30s was driving the car. I asked what happen, he just kept saying sorry. I started to feel an extreme sudden shooting pain around the back of my neck and lower back. I told him to wait while i call ambulance and went back into my car to call 995 and 999 for assistance. While i was on the phone, i saw from the rear mirror that he was trying to change lane. I tried to step out of my car and gestured to him to stop but he sped off. SCDF and SPF arrived shortly and i was conveyed to KTPH for further investigation. Was discharge thereafter with 3 days MC.



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

Informant is not able to provide sketch



3 of 3

Report No. T/20220420/7041

CONTINUATION OF REPORT

Sketch	Plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/04/2022 20:08
Officer In Charge Of Case: TP / TPIB / MUHAMMAD SYAKIR BIN ADANAN Contact No.: 65476236	Classification Of Case:

NP168