

237 Alexandra Road #04-11  
The Alexcier, Singapore 159929  
Telephone: 6538 6250 Facsimile: 6538 1860  
Email: mail@oraclelaw.sg

## VIA EMAIL

|           |  |              |                           |
|-----------|--|--------------|---------------------------|
| To        | : <b>HSBC Life (Singapore) Pte. Ltd.</b>   | Date         | : 15 May 2023             |
| Attention | : Motor Claims   | From         | : Mr Stanley Bay          |
| Your Ref. | : <b>Insurer of SHC 8327U</b>  | Our Ref.     | : SB/PO/Acc/2023-0057     |
| Email     | : <a href="mailto:mt.surv@mail.life.hsbc.com.sg">mt.surv@mail.life.hsbc.com.sg</a> | No. of Pages | : 4 (including this page) |

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### IMMEDIATE ATTENTION

Dear Sirs

#### **PRE-REPAIR INSPECTION ACCIDENT INVOLVING SJS 1777S & SHC 8327U ALONG NORTH CANAL ROAD ON 12.5.2023**

We act for the owner of vehicle registration no. **SJS 1777S**.

We are instructed by our client to notify you of the above accident involving our client's said vehicle and your insured's vehicle registration no. **SHC 8327U** driven at the material time. A copy of our client's Singapore Accident Statement is enclosed herein.

As a result of the above accident, our client's said vehicle was damaged. Before our client proceeds to repair his damaged vehicle, please let us know **within the next (2) working days of your receipt of this notice** whether you 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 his said vehicle without further reference to you.**

Please note that this notification does not in any way prejudice our client's right nor shall it be deemed as a waiver of any of his rights, as such our client's rights are expressly reserved.

Yours faithfully



**Mr Stanley Bay**

#### **Details of Workshop**

Toh Painting & Services Pte Ltd  
Blk C3 Woodlands Road, 391C & 391G Yew Tee Industrial Estate  
Singapore 677966  
Tel No. 6763-1055 / 6760-7542 / 6763 1055 & 6760 7542 (O); Fax No. 6763-6151  
Person-in-charge: Miss Xiu Hui



Date of Accident : 12/05/23 Accident Time: 2235HR (24-HR-Format)  
Accident Place : NORTH CANAL ROAD  
Vehicle No. (Car Plate No.) : SJS 1777S Make/Model: BMW 118IA  
Insurance Company : EQ Policy No: DMTHQ22-000073  
Owner or Company Name /IC No. : BIG BIRD AUTOMOBILES PTE LTD /201920425K  
Owner or Company Contact No. : - Owner's Hp 8323 8899 Company Tel -  
DRIVER'S Name / IC No. : DANIEL STEPHEN RATNAM JUNIOR /S8223576J  
DRIVER'S Date Of Birth : 22/07/82 DRIVER'S License Pass Date 11/12/2000  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
DRIVER'S Address : 31 CHUN TIN ROAD #03-14 S 599717  
DRIVER'S Contact No./ Alt No. : 1) 8323 8899 2) \_\_\_\_\_  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address : T.VAELYN@YAHOO.COM.SG  
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
Number of Passengers (Including Driver): 1  
Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose  
Any Injury (If YES, Pls state): -

**Other Party Driver's Particular (if any)**

Vehicle No: SHC 8327U  
Vehicle Make\Model: \_\_\_\_\_  
Name Driver: \_\_\_\_\_  
IC No. Driver/Contact: \_\_\_\_\_

Vehicle No: \_\_\_\_\_  
Vehicle Make\Model: \_\_\_\_\_  
Name Driver: \_\_\_\_\_  
IC No. Driver/Contact: \_\_\_\_\_

**\* NEW - Passenger's name & gender:**



## 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 Authorised 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 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 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' 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;
  - (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



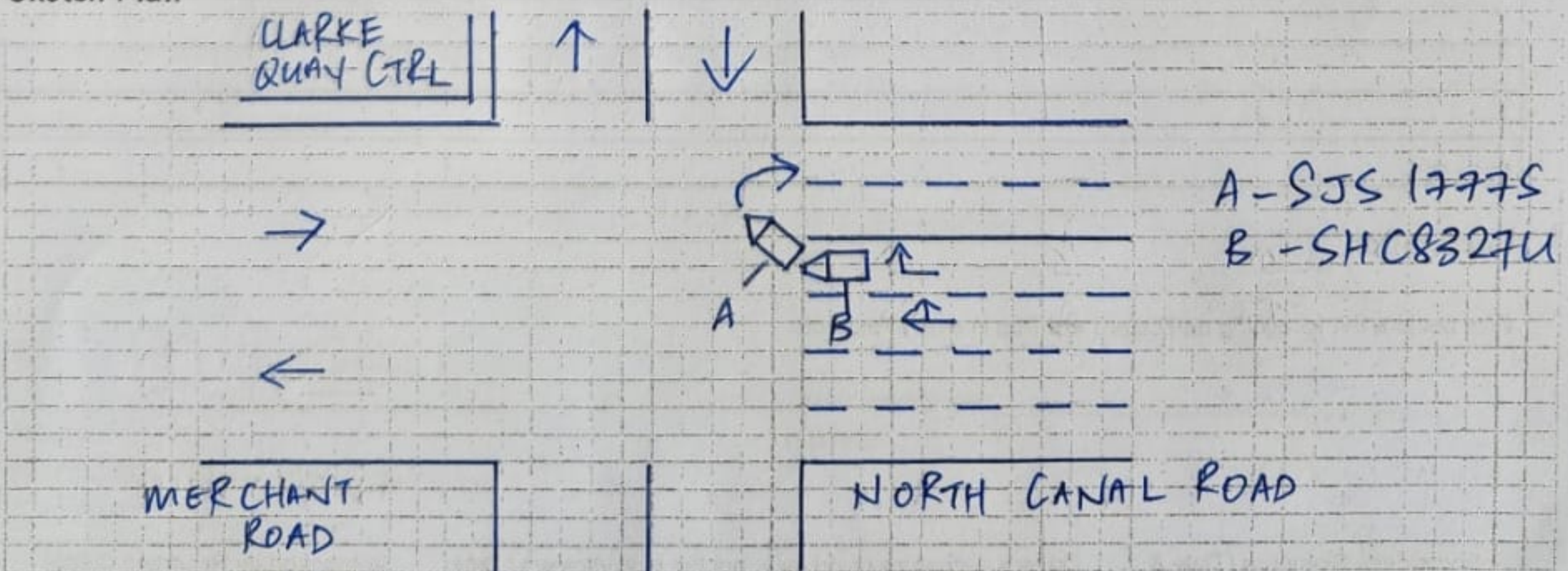
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

15/5/23

#### Sketch Plan





Describe Circumstances of the Accident


ON 12/5/23 @ ABOUT 10.35PM, I WAS STATIONARY @ TRAFFIC LIGHT ALONG  
NORTH CANAL ROAD IN MY VEHICLE SJS 1777S, PREPARING TO MAKE A U-TURN.  
WHEN GREEN ARROW CAME ON, I MADE THE U-TURN GRADUALLY & SLOWLY,  
AS THERE WAS VEHICLE AHEAD OF ME AS WELL. SUDDENLY I FELT AN IMPACT  
& REALISED TAXI VEHICLE SHC 8327U COLLIDED ONTO MY VEHICLE'S REAR  
PORTION.  
NO INJURIES, NO PASSENGERS.

Declaration

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

15/5/23

Witnessed by Reporting Centre  
Personnel