

Claim Number	
Own Insured Vehicle Number	GBE2909H
Date of Accident	10 MARCH 2021
Third Party Vehicle Number	SMD1192T
Third Party Claimant Name	LIM CHEE YING
Third Party Claimant ID	S7614053A

GB LAW CHAMBERS

ADVOCATES & SOLICITORS, Notary Public & Commissioner For Oaths

Reg No. 53170395X

175 North Bridge Road #13-72 Central Point Singapore 038175

Tel : 6702 9685, Fax : 6702 6149, E-mail: claims@gblaw.com.sg

Our ref : PI.191616/ag

Your ref : GBE2909H

Date : 17 MAY 2021

NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

75 Bras Basah Road

Level 5 Income Centre

Singapore 189557

Attention: Motor Claims Department

WITHOUT PREJUDICE

BY HAND

Dear Sir,

CLAIMANT: LIM CHEE YING – DRIVER OF SMD1192T

PERSONAL INJURY CLAIM ARISING FROM ROAD TRAFFIC ACCIDENT INVOLVING MOTOR VEHICLES NO. SMD1192T AND GBE2909H ALONG SCOTTS ROAD ON 10 MARCH 2021 AT ABOUT 1710 HOURS

We act for LIM CHEE YING, driver of SMD1192T who was involved in the above accident.

We are instructed by the above named to claim damages against your insured in connection with a road traffic accident on **10 MARCH 2021 ALONG SCOTTS ROAD** involving GBE2909H driven by you / your insured's driver at the material time.

We are instructed that the accident was caused by your / your insured driver's negligence. As a result of the accident, our client suffered personal injuries which particulars are set out in the medical report[s] annexed to this letter.

Table of injuries: -

1. Contusion of neck
2. New onset paresthesia over left hand and left foot

Our client has been put to loss and expenses, particulars of which are as follows:

a)	General Damages	: S\$ 13,000.00
b)	Medical Expenses	: S\$ 135.64 and continuing
c)	Transport Expenses (1 trip)	: S\$ 30.00
d)	Loss of Income	: To be Assessed
e)	Medical report fee	: S\$ 110.00
f)	LTA search / GIA report fee	: S\$ 7.49
g)	Public Trustee fee	: S\$ 225.00
h)	Incidentals	: S\$ 150.00
i)	Costs	: S\$ 3,000.00
Total		: S\$ 16,725.68

A copy each of the following supporting documents is enclosed:

- (1) Medical Report dated 4 May 2021 from Sengkang General Hospital;
- (2) Medical report fee receipt;
- (3) Medical receipts;
- (4) Medical certificates;
- (5) Our client's GIA/TP report; and
- (6) LTA search

Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

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In compliance with the pre-action protocol under the State Courts' Practice Direction 38, we propose using the medical practitioner who treated our client as a single joint expert.

Please note that you or your insurer should send to us an acknowledgement of receipt to us within 14 days of your receipt of this letter. Should you/your insurer fail to acknowledge receipt of this letter within 14 days, our client may commence Court proceedings against you without further notice to you or your insurer. Please also inform us, within 14 days of your acknowledgement of receipt of this letter, whether you have any objections to our proposed medical experts or whether you wish to propose other medical experts.

If you wish to have our client examined by your own medical expert, this should be stated in your acknowledgment of receipt. Please also advise within 14 days of the acknowledgment of receipt, where and when examination of our client is to take place so that we may arrange for our client to attend. Please note that we deem you/your insurer has no interest in conducting medical examination if the request is not made within the timeline stated above.

If you have any evidence on the issue of liability against our client in any form in your possession, kindly let us have the same immediately or as soon as such evidence comes into your possession. If such evidence is produced at a later stage, our client(s) will not be liable for any such costs incurred in proceeding with the claim herein.

Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully

G B LAW CHAMBERS

Encl

TO OWNER OF GBE2909H
JOLLY ENTERPRISE PTE. LTD
3 Ubi Road 6
#02-56 Zertec
Singapore 723121

CERTIFICATE OF POSTING
(WITHOUT ENCLOSURES)

Our Reference: MR/02943/2021 [LAWYERS] (Request No 202103460)

04 May 2021

G B Law Chambers
175 North Bridge Road
#13-72 Central Point
Singapore 038175

Re: MEDICAL REPORT FOR MR LIM CHEE YING (S7614053A)

1. Mr Lim Chee Ying was seen in Sengkang General Hospital's Emergency Department on the 11th of March, 2021 by Dr Davis Chew at 2.05AM.
2. Mr Lim was allegedly involved in a Road Traffic Accident(RTA) along Scott's Road on the 10th of March, 2021 where he was the driver of a stationary car who was rear ended by another vehicle at around 5pm. He was wearing a seatbelt at the time of the incident and sustained a flexion-extension injury of his neck. He did not have any immediate symptoms but developed neck pain and paresthesia over his left hand and left foot a few hours later.
3. On examination, Mr Lim Chee Ying was found to have parasthesia over his left hand and the posterior aspect of his left calf and the sole of his left foot and toes along with tenderness over both sides of his trapezius muscles.
4. Mr Lim Chee Ying was diagnosed with
 1. Contusion of Neck(post RTA)
 2. New onset Paresthesia (post RTA) pending further investigation
5. Mr Lim Chee Ying was planned for a Computed Tomography (CT) of his Brain and Cervical Spine and an inpatient admission to the Orthopaedic Spine Department in lieu of his neurological presentation of paresthesia to rule out spinal cord involvement. Mr Lim however, declined admission despite being counselled on the risk of incurring potential paralysis and permanent neurological deficits if his condition/presentation was not worked up.
6. Mr Lim Chee Ying was discharged against medical advice from the Emergency Department. He was given 7 days of outpatient medical leave (EMD202131108) as well as analgesia (Ketoprofen Plaster, Paracetamol, Gabapentin) on discharge with an outpatient appointment to the Orthopedics (Spine) Department. He was seen by Dr David Chiu (Orthopedics/Spine) – please write in to him if you need details on his progress during his follow up.



SINGAPORE ACCIDENT STATEMENT

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. 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	11/03/2021 17:21 (SGT)
Date of Accident	10/03/2021 17:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SCOTTS ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD1192T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	STRAIGHT CAR PTE LTD
Company Reg No	2XXXXX450D
Email Address	HARRISGLORY@SINGNET.COM.SG
Mobile Phone No	(Phone) +65-91279372
Alternative Phone No	+65-91279372

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Voxy
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire

INSURANCE COMPANY

Name of Insurance Company	Total Aqua
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	20-MS009520-R01
Cover Note Number	-

DRIVER

Name of Driver	LIM CHEE YING
NRIC No	SXXXX053A
Date Of Birth	21/01/1976
Occupation	Outdoor

Date Of Driving Pass	27/05/1997
Driving experience	23 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91279372
Alt. Phone Number	-
Email Address	HARRISGLORY@SINGNET.COM.SG
Address	BLK 233D PUNGGOL FIELD
Address complement	#15-281
Postcode	828233
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Sengkang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003438999
Alt. Police Station Phone No	(Fax) +65-63438939
Police Station Address	2 Sengkang Square #01-02
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBE2909H
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	SHYADUMUN VASANTHIM
Passport No/FIN	GXXXX531W

Contact Number	(Phone) +65-97321205
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LIM CHEE YING
Address	BLK 233D PUNGGOL FIELD
Address Complement	#15-281
Post Code	828233
Approximate Age Years Old	-
Injuries Sustained	BACK, NECK, LEG AND HAND AREA PAIN
Injured person in which vehicle?	SMD1192T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

