#### 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 witholding of material facts may allow insurance companies to repudiate policy ability.
- 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 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, yo aforesaid.	but hereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	07/12/2017 14:52
Date Of Accident	06/12/2017 15:15
Exact Location Of Accident	JALAN EUNOS
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJQ7484H
Insured/Policyholder	
Name Of Registered Owner	YAP LAY LAY AUDREY
NRIC No	S1646741C
Email Address	AUDREYY1120@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96167698
Alternative Phone No	OFFICE-96167698
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ALTIS

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken REPORTING ONLY Vehicle Category PRIVATE CAR

**Insurance Company** 

Name of Insurance Company LONPAC INSURANCE BHD

THIRD PARTY Type Of Coverage

Fleet Policy NO

Policy Number Z17VP05016331

Cover Note Number

Driver

TAN CHENG HOCK PATRICK Name of Driver

NRIC No S1585633E Date Of Birth 03/02/1963 **INDOOR** Occupation Date Of Driving Pass 11/02/1988

**Driving Experience** 29 YEARS AND 9 MONTHS

MALE Gender

Mobile Number (LOCAL) +65-96350800

Fax Number

**Contact Number** 

**EMail Address NOEMAIL**  Address 20 JALAN DUAD

Postcode 419563

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

#### **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 this accident? NO
Was any body injured in the Accident? NO
Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 2

#### **Details of Police Action**

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### **Circumstances of Accident**

REFER TO ATTACH.

#### 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 SJV8370U

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B

Name of Driver JANICE MOK WEI NING

NRIC/Passport Number S8426937I Contact Number 91161629

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **Details of Witness**

Name

Phone Number

**Email Address** 

#### Sketch Plan Pg. 1

#### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 lodgment 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - 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' lawyers/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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Policyholder's

Date & Time:

Name: NRIC/FIN No.:

7/12/1

1-35pm

audrey ll 200 gmail. com

audreyall20@ gmail. com

Reporting Centre Personnel's Signature

# Sketch Plan #2 Pg. 1

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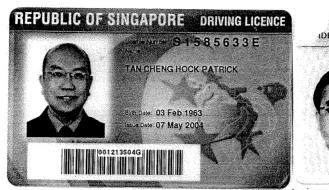
### Sketch Plan #3 Pg. 1

How the accident happen

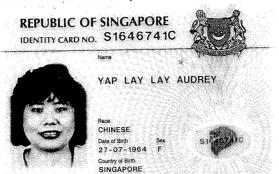
- 1. Vehicle A, driven by me, has just turned out of Jalan Awang into Jalan Eunos and filtered into Lane on a Flane Jalan Eunos towards the direction of East Coast Road with Lane 5 for cars making a U-turn to head into PIE.
- 2. Traffic was moderately heavy as there was a road work on the extreme right lane of Jalan Eunos.
- 3. Many vehicles were changing lanes from lane finto lanes 3 due to the road works ahead on extreme right.
- 4. There was about a 2-2.5 car length between me and the vehicle ahead of me as I was just about to pick up speed after coming into Jalan Eunos.
- 5. Vehicle B drove swiftly past me from my right in Lane 3 and cut straight into my Lane to coming between Vehicle A and another vehicle in front of me, occupying up whatever gap there was originally, thereby reducing the safety distance.
- 6. Vehicle B thereafter jammed her brakes.
- 7. I then tried to swerve Vehicle A to the right into Lane 3 but could not as there were on-coming cars in lane 3, as seen from my right side mirror.
- 8. I then tried to jam my brakes and was able to stop Vehicle A but not without hitting the right side of the rear bumper of Vehicle B with the left side of Vehicle A.
- 9. Vehicle B driver then drove to the left side of the road and stopped her Vehicle B after Jalan Ismail.
- 10. Since all evidence of the accident has been void by vehicle B's driver driving off from the scene, I followed suit and parked behind her.
- 11. I questioned driver of Vehicle B on her actions of cutting the lane and why did she jammed her brakes, she said that she was in a hurry for work and blamed the driver in front of her for suddenly jamming the brakes which caused her to follow suit.
- 12. I am submitting an audio recording of our conversation for your reference, with driver to Vehicle B admission on point 11.

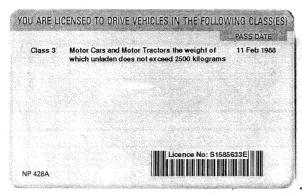
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### Sketch Plan #4 Pg. 1















# LONPAC INSURANCE BHD (S98FC5635C)

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/07. The Concourse, Singapore 199555. Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg GST Reg No.: F0-0005635-C

MX1

## **CERTIFICATE OF INSURANCE**

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE. MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE). ROAD TRANSPORT ACT 1987 (MALAYSIA).

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No.: Z17VP05016331

Type of Cover: THIRD PARTY

1. Index Mark and Vehicle Registration Number

**TOYOTA COROLLA ALTIS 1.6** 

- SJQ7484H

2. Name of Policy Holder

YAP LAY LAY AUDREY

3. Effective Date of the Commencement of Insurance for the purpose of the Act

30/11/2017

4. Date of Expiry of the Insurance

29/11/2018

5. Persons or Classes of Persons entitled to drive (A) THE POLICYHOLDER (B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS/HER PERMISSION Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

\* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

CHIEF EXECUTIVE (Singapore Branch)

User ID: BASE3 Date Issued: 29/11/2017











