

Date In: 1913118 11:12	Job description	Date & Time Completed	Done by
Ref No: NA1/LPC180050971h4	SAS e-filing		
Veh No: SGJ 768 H	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 1813118 21:15	i-Motor Claim Form		
OD: <input checked="" type="checkbox"/> Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SKK 5723 B	INC ( ) / Non-INC ( )
Owner / Driver: (	Tel:	
Policy No: (	Period: (	Cover Type: (
Confirmed by: (	Date:	Time:
Insured/Driver Liability: (	%) [Note-Est Status (WO): N: 0-20%; P: 21-79% F: 80-100%]	
Year of Registration: (	Warranty: YES ( ) / NO ( )	
Excess: (\$	Loading: \$1,000 ( ) / \$2,000 ( )	

**General Remarks:-**

( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

**Injury:** \_\_\_\_\_

Date/Time	Actions

Claimant's Particulars:-	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	1st Bill	Add Bill
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
	4) FT: Follow-Through Survey \$120		
	5) RT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QJ:		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments:-	TP (N11): TP (Non INC) against INC \$20		
Ref: 1	9) N12: Idac Mobile \$0		
Ref: 2/3	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

## 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 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 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 Report	19/03/2018 11:12
Date Of Accident	18/03/2018 21:15
Exact Location Of Accident	PIE (TUAS) 19.5KM
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ768H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WONG CHUN WAH
NRIC No	S6845510C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96321666
Alternative Phone No	OFFICE-96321666

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E250
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VP05017112
Cover Note Number	-

### Driver

Name of Driver	LIM FU GUAN
NRIC No	S9108949A
Date Of Birth	11/03/1991
Occupation	INDOOR
Date Of Driving Pass	18/08/2016
Driving Experience	1 YEAR AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96321666
Fax Number	
Contact Number	
EMail Address	NOEMAIL



Address BLK 246 JURONG EAST ST 24 #09-46  
 Postcode 600246  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured RELATIVE  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

### General Information of the Accident

Type Of Accident CHAIN COLLISION  
 Weather Conditions CLEAR  
 Road Surface DRY

### Other Information

Was any foreign vehicle involved in this accident? YES  
 Foreign Vehicle Registration Number NBP2253 (PRIVATE CAR)  
 Number of vehicles involved in the accident  
 Was any body injured in the Accident? YES  
 Was any injured conveyed to hospital by ambulance? NO  
 Was any other material or property damaged? YES  
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
 Number of Passengers (Including Driver) 6  
 Passenger 1 NAME: : WONG CHUN WAH  
 GENDER: : MALE  
 Passenger 2 NAME: : CHAN MEI LEE  
 GENDER: : FEMALE  
 Passenger 3 NAME: : WONG SHI QI  
 GENDER: : FEMALE  
 Passenger 4 NAME: : WONG HUI QI  
 GENDER: : FEMALE  
 Passenger 5 NAME: : LIM QIU XIA  
 GENDER: : FEMALE

### Details of Police Action

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name TRAFFIC POLICE DIVISION HQ  
 Police Station Address ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: 65470000 - FAX NO:  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

### Attachment(s)

Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? YES  
Remarks/ Reasons: WITH DRIVER  
Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKK5723B  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHB8407C  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category TAXI  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SGH8205Z  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SHB6295X  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category TAXI  
Name of Driver

NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number SFE606E  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 6

Vehicle Registration Number NBP2253  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 7

Vehicle Registration Number SCE101E  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 8

Vehicle Registration Number SJS1627S  
Vehicle Make/Model/Colour



## Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name LIM FU GUAN  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? SGJ768H  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance?  
Address  
Postcode

**DETAILS OF INJURED PERSON 2**

Name WONG CHUN WAH  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? SGJ768H  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance?  
Address  
Postcode

**DETAILS OF INJURED PERSON 3**

Name CHAN MEI LEE  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? SGJ768H  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance?  
Address  
Postcode

**DETAILS OF INJURED PERSON 4**

Name WONG SHI QI  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? SGJ768H  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance?  
Address  
Postcode

**DETAILS OF INJURED PERSON 5**

Name	WONG HUI QI
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SGJ768H
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

#### DETAILS OF INJURED PERSON 6

Name	LIM QIU XIA
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SGJ768H
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

## 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 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:
  - (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' 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.

\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



# SKETCH PLAN

I — SJS 1627S  
 H — SCE 101E  
 G — NBP 2253  
 F — SFE 606E  
 E — SHB 6295X  
 D — SGH 8205Z  
 C — SHB 8407C  
 A — SGJ 768H  
 B — SKR 5723B

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the police report T/20180319/2006

### DECLARATION

I/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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date of Accident : 18/3/18 Accident Time 21:15 (24-HR-Format)  
Accident Place : Along PIE  
Vehicle No. (Car Plate No.) : SGJ 768H Make/Model: Mercedes-Benz E250  
Insurance Company : Longac Policy No: Z18VP05017112  
Owner or Company Name /IC No. : Wong Chun Wah / 56845510C  
Owner or Company Contact No. : \_\_\_\_\_ Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : Lim Fu Guan / 59108949A  
DRIVER'S Date Of Birth : 11/2/1991 DRIVER'S License Pass Date 18/8/2016  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: relative  
DRIVER'S Address : Blk 246 Jurong East St 24 #29-46  
DRIVER'S Contact No./ Alt No. : 1) \_\_\_\_\_ 2) 5600246  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address : \_\_\_\_\_  
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): 6  
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): yes

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

Vehicle No: SKK 5723B (NTU)

Vehicle No: SHB 8407C

Vehicle Make/Model: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_

Name Driver: \_\_\_\_\_

Name Driver: \_\_\_\_\_

IC No. Driver/Contact: \_\_\_\_\_

IC No. Driver/Contact: \_\_\_\_\_

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

Wong Chun Wah (M)  
Chan Mei Lee (F)  
Wong Shi Qi (F)  
Wong Hui Qi (F)  
Lim Qiu Xia (F)

(D) SGH 8205Z  
(E) SHB 6295X  
(F) SFE 606E  
(G) NBP 2253  
(H) SCE 101E  
(I) SJS 1627S





# SINGAPORE POLICE FORCE



T/20180319/2006

1 of 4

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

Report No. T/20180319/2006

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/03/2018 01:20	Vide Report No.:	Station Diary No.:
--	------------------	--------------------

### Informant's Particulars

Name of Informant: LIM FU GUAN	Address: APT BLK 246 JURONG EAST ST 24 #09-46 HDB JURONG EAST SINGAPORE 600246		
ID Type / ID No.: NRIC NO / S9108949A	Contact No.:	Mobile: 96321666	
Nationality: SINGAPORE CITIZEN	Home/Office:	Email:	
Sex: Male	Age: 27	Date of Birth: 11/03/1991	Type of Informant: Driver
Race: Chinese	Language: English	Institution / School Name:	
Occupation: OPERATIONS	Driving Licence Information: Class: 3,4		Date of Expiry:

### General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 18/03/2018 21:15	Type of Location:
Location: Along Road 1 PAN ISLAND EXPRESSWAY  PIE(TUAS) 19.5KM				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
NBP2253	Car					0
SCE101E	Car	MERCEDES BENZ	E200 AVG (R18 LED)	Green		0
SFE606E	Car	TOYOTA	HARRIER 2.0 ELEGANCE AT ABS D/AIRBAG 2WD	White		0





**SINGAPORE  
POLICE FORCE**



T/20180319/2006

2 of 4

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

Report No. T/20180319/2006

**CONTINUATION OF REPORT**

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGH8205Z	Car	TOYOTA	RUSH 1.5 A	Green		0
SGJ768H	Car	MERCEDES BENZ	E250 SEDAN (SR)(R18)			5
SHB6295X	Car	HYUNDAI	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO	Blue		0
SHB8407C	Car	HYUNDAI	I30 GDH 1.6 TCI 5DR DCT	Silver		0
SJS1627S	Car	BMW	525I XL	Grey		0
SKK5723B	Car	VOLKSWAGO N	GOLF A7 1.4 TSI AT BMT 5G14JZ SR HID	White		0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM FU GUAN	ID No.	S9108949A
Related Vehicle	SGJ768H (Car)	Contact No.	96321666
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Name	LAU CHEE SUN	ID No.	-
Related Vehicle	SHB8407C (Car)	Contact No.	91167315
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL



**SINGAPORE  
POLICE FORCE**



T/20180319/2006

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

3 of 4

Report No. T/20180319/2006

**CONTINUATION OF REPORT**

<b>Driver</b>				
Name	NEO JUN LEONG		ID No.	S8404632I
Related Vehicle	SKK5723B (Car)		Contact No.	96489545
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

**Brief Details.**

ON THE ABOVE MENTIONED DATE AND TIME,

I WAS DRIVING ALONG PIE ON THE EXTREME RIGHT LANE IN MY VEHICLE SGJ768H. AS I WAS DRIVING I SAW THAT THE TAXI SHB8407C, THAT WAS INFRONT OF ME, HAD HAD HIS BRAKE LIGHTS ON SO I JAMMED THE BRAKES TO AVOID COLLISION. I STOPPED MY CAR IN TIME HOWEVER, THE VEHICLE SKK5723H THAT WAS BEHIND ME, COLLIDED WITH THE REAR OF MY VEHICLE, CAUSING MY CAR TO SURGE FORWARD AND COLLIDE ONTO SHB8407C. WE GOT OFF OUR VEHICLES AFTERWARDS AND 2 OF MY PASSENGERS, MY AUNT AND COUSIN, WERE NOT FEELING WELL SO THE LTA OFFICER WHO ASSISTED US, CALLED AN AMBULANCE WHO THEN CONVEYED THEM TO THE HOSPITAL. THE TRAFFIC POLICE ARRIVED AFTER AND GAVE ME A CASE CARD AND TOLD ME TO GO TO TRAFFIC POLICE HQ TO FIND IO PHILIP.





**SINGAPORE  
POLICE FORCE**



T/20180319/2006

4 of 4

Report No. T/20180319/2006

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

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

C

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:  
TP /  
ZENG ZI CONG

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
Staff Sgt MOHAMMAD ZULKARNIAN BIN  
SAMSUDIN  
Contact No.: 65476429

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
19/03/2018 01:20

Classification Of Case:

 <p>SINGAPORE POLICE FORCE</p>
Signature: 



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9108949A



Name  
LIM FU GUAN  
林福源  
Race  
CHINESE  
Date of birth  
11-03-1991  
Sex  
M  
Country of birth  
SINGAPORE

S9108949A

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S9108949A

Name  
LIM FU GUAN

Birth Date 11 Mar 1991  
Issue Date 18 Aug 2016



002600148J

3860213



SPIC No. S9108949A



Date of issue  
23-03-2006

Address  
APT BLK 248 JURONG EAST STREET 24  
#09-46  
SINGAPORE 600246


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		EFFECTIVE DATE
C	Class 3 Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	18 Aug 2016
	Class 4 Heavy motor cars and motor tractors > 2500 kg	15 Mar 2017

S / No. 9000257537

NP 428A

License No. S9108949A



**LONPAC INSURANCE BHD** (S98FC5635C)

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 199555.

Tel: (65) 6250 7368 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: P9-0005635-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. : Z18VP05017112

Type of Cover : **COMPREHENSIVE**

1. Index Mark and Vehicle Registration Number **MERCEDES-BENZ E250 2.0 (A)  
- SGJ768H**
2. Name of Policy Holder **WONG CHUN WAH**
3. Effective Date of the Commencement of Insurance  
for the purpose of the Act **11/02/2018**
4. Date of Expiry of the Insurance **10/02/2019**
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.

Excess : S\$ 500.00 (SECTION 1) INSURED / NAMED DRIVERS  
S\$ 3,500.00 (SECTION 1) UNNAMED DRIVERS  
S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS  
S\$ 100.00 WINDSCREEN EXCESS

**LONPAC'S AUTHORISED WORKSHOPS**Condition : **ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS**

\* 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.

**H.P. Owner : MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD****CHIEF EXECUTIVE**  
(Singapore Branch)User ID: SINGCHEW1  
Date Issued: 16/01/2018