

NATIONAL Assessment Centre Services (M11 & 12/009)

| | | | |
|----------------------------|---------------------------------------|-----------------------|---------|
| Date In: 18/06/2018 15:44 | Job Description | Date & Time Completed | Done by |
| Ref No: NA/LPC.18010965/14 | SAS e-billing | | |
| Veh No: GZ 8796P | B-roll (with photo, AIC 2hrs) | | |
| D.O.A: 14/06/2018 21:45 | 1-Motor Claim Form | | |
| OD TP: Rejoining Only | 1-Motor W/O (with photo, AIC 2hrs) | | |
| TP Insured: | 1-Photo Uploaded | | |
| | Assessment/Survey Report | | |
| | Assl Report by Fax/Hand to Owner/Whsp | | |

Preferred Whsp / INC Assign Whsp / OW: _____ Tel: _____ Fax: _____

TP Particulars: Yeh No: SLD 8692L INC () / Non-INC ()

Owner / Driver: _____ Tel: _____

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: _____ Time: _____

Insured/Driver Liability: () % (Note: B/L Status (WO): NI 0.20%; P: 21.79%; P: 80.100%)

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:

() Work-in-Customer | Customer's information strictly Confidential & strictly NO color of reporter.

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

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

Remarks: (INC B-roll photo 678840016) Done & Time Completed: _____ Done by: _____

1) Apply for Transition Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo (Repair Cost > \$3000) ()

Injury: _____

| Date/Time | Action |
|-----------|--------|
| | |
| | |
| | |
| | |
| | |

| Number of Particulars | Invoice Preparation Charges |
|--|-----------------------------|
| 1) ARI Accidental Reporting (\$20) | |
| 2) DA Damage Assessment (\$100) | INC (\$10) |
| 3) TP Towing Fee | \$201.00 |
| 4) PT Follow Through Survey | \$130 |
| 5) PT Follow Through Survey (Resurvey) | \$30 |
| For claims to be processed INC Only (Per 10/11/2010) | |
| 6) TR Bill Generation | \$11 |
| 7) NI (Gov DA + SMRT Survey) | \$160 |
| 8) NTUC Additional \$1150000 | |
| OII | |
| 9) NI Courtesy Car / Tpl Allowance | \$3 |
| 10) NI Repair Coordination | \$10 |
| 11) NI Post Repair Inspection | \$11 |
| 12) NI BY / Colling / Coordination | \$3 |
| 13) TP (M11) TP (Non-INC) (Colling INC) | \$10 |
| 14) NI 110000 Months | \$0 |
| Invoiced dated | Per Charge |
| Invoiced dated | Per Charge |

Checked by (Engi-In-Charge): _____

Will for Comments: _____

LI: _____

1772

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 | 18/06/2018 15:44 |
| Date Of Accident | 14/06/2018 21:45 |
| Exact Location Of Accident | TAMPINES AVE 9 TURNING INTO TAMPINES AVE 10 (TPE) |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------------------------------------|
| Vehicle Registration Number | GZ8796P |
| Insured/Policyholder | |
| Name Of Registered Owner | DENSCO ELECTRICAL ENGINEERING PTE LTD |
| Co Reg No | - |
| Email Address | TERRYYL@LIVE.COM.SG |
| Mobile Phone No | (LOCAL) +65-96662678 |
| Alternative Phone No | OFFICE-96662678 |

Vehicle Particulars

| | |
|--|--------------------|
| Manufacturer | SSANGYONG |
| Model | - |
| Exact Purpose for which vehicle was being used at time of accident | COMMERCIAL 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 | COMMERCIAL VEHICLE |

Insurance Company

| | |
|---------------------------|----------------------|
| Name of Insurance Company | LONPAC INSURANCE BHD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | NO |
| Policy Number | Z/18/VC00/101326 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | GOH CHENG CHUAN TERRY |
| NRIC No | S8827636A |
| Date Of Birth | 27/07/1988 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 08/03/2007 |
| Driving Experience | 11 YEARS AND 3 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-96440391 |
| Fax Number | |
| Contact Number | OTHERS-96440391 |
| Email Address | TERRYYL@LIVE.COM.SG |

Address BLK 676D PUNGGOL DRIVE
#04-740
Postcode 824676
Was driver an employee of the Insured's Company YES
If No, Relationship of the Driver with the Insured
Vehicle Registration Number of Driver's Own Vehicle -
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
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) 1

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

PLS REFER TO THE ATTACHED STATEMENT.

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 SLD8692L
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver MOHAMED YUSOF BIN ABDULAH
NRIC/Passport Number
Contact Number 96834026
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name GOH CHENG CHUAN TERRY

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SLIGHT

GZ8796P

YES

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.



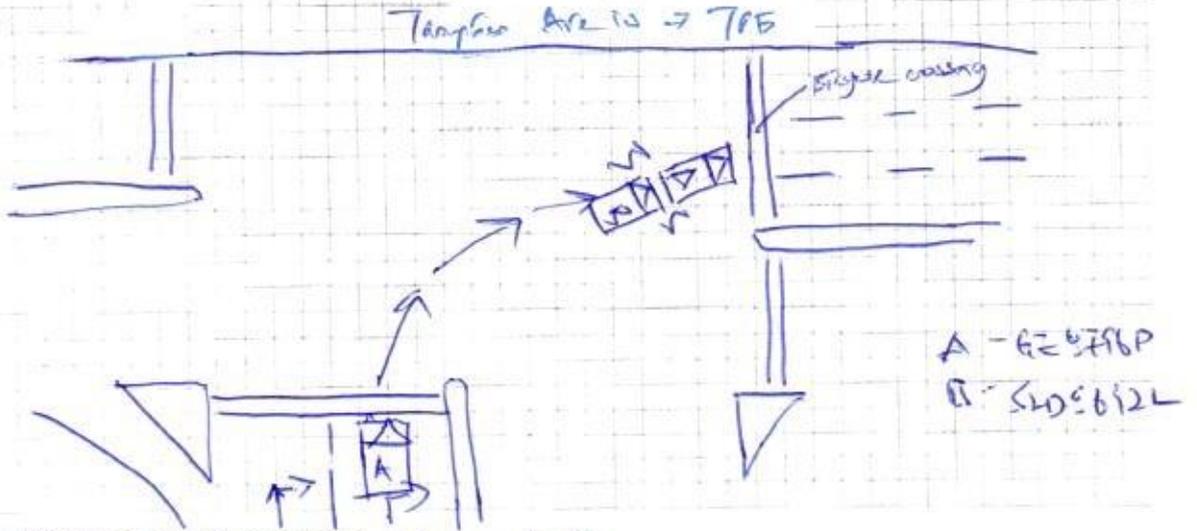
Policyholder's Signature
Date & Time:

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

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

18/6/2018

SKETCH PLAN



A - 6E 8796P
B - 2D 8692L

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Temples Ave 9

I was driving along Temples Ave 9 driving into Temples Ave 10 (towards TPE). I stopped as to give way to bridge crossing the road (Green Man). Out of the sudden, veh (B) came from the rear and collided directly with the rear portion of my vehicle.

A - 6E 8796P
B - 2D 8692L

[Large handwritten signature]

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

[Handwritten signature]

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

[Handwritten signature]
18/6/2018

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

| | | | |
|--|--|-------------------------|--------------------------|
| Vehicle No. | GZ 8796P | Model / Make | SsangYong Musso |
| Date of Accident | 14/6/18 | | |
| Time of Accident | 9.45 pm | HRS | |
| Location of Accident | Tempra Ave 9 turning into Tempra Ave 10 (TPS) | | |
| Exact purpose use during accident | Commercial use | | |
| Name of Owner | Densed Electrical Engineering P/L | | |
| Telephone No. | H/P: 9666 2678 | Home: | Office: 6749 8988 |
| NRIC | A03082/1990 R | | |
| Address | 209, Kaki Bukit Ave 1, S(416034) | | |
| Claim type | OD (THIRD PARTY) REPORTING ONLY | | |
| Insurance Company | Lampac | | |
| Type of Coverage | Comprehensive (Third Party) Third Party / Fire / Theft | | |
| Policy No. | 7/18/1400/101526 | | |
| Name of Driver | As Above If No, Goh Cheng Chuan Terry | | |
| NRIC | S0827636A | Any Passengers: | NI |
| Date of birth | 22/7/1989 | | |
| Occupation | (Outdoor) / Indoor | | |
| Driving License Pass Date | 08/2/2017 | | |
| Gender | (Male) / Female | | |
| Contact No. | H/P: 96414039 | Home: | Office: |
| Address | Bldg 6760, Punggol Pk, Unit 770, S(824676) | | |
| Driver have any own vehicle | No, If yes, Reg No. | | |
| Relationship | (Employee), If no, state | | |
| Weather condition | (Clear) Raining Other | | |
| Road Surface | (Dry) Wet Other | | |
| Any Injuries | No, If Yes, Who? | | |
| Name And Contact No. | Goh Cheng Chuan Terry | | |
| Name And Contact No. | | | |
| Police Report | No, If Yes, Where? | | |
| Vehicle B No. | SLD 8692L | Any Passengers: | NI |
| Name of Driver | Mohamed Yusof Bin Abdullah | Contact No.: | 96334026 |
| Vehicle C No. | | Any Passengers: | |
| Vehicle D No. | | Any Passengers: | |
| Vehicle E no. | | Any Passengers: | |
| Vehicle F No. | | Any Passengers: | |
| Vehicle G No. | | Any Passengers: | |
| Witness Name | | Witness Contact: | |
| Accident Portion | Rear Portion | | |
| Camera Recorder | Yes / (No) | | |
| Email Address | terryYL@live.com.sg | | |
| PARTICULAR WORKSHOP | Two Car Automation | | |
| CONTACT NO. | 6842 0051 / 6744 0510 | | |
| CONTACT PERSON | Kris | | |
| FAX NO | 6741 0510 | | |
| WORKSHOP EMAIL ADDRESS | sales@n5i.com.sg | | |

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S8827636A

Name:

GOH CHENG CHUAN TERRY

Birth Date: 27 Jul 1988

Issue Date: 23 Nov 2006



001460852E

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8827636A



Name:

GOH CHENG CHUAN TERRY

吴振铨

Race:

CHINESE

Date of birth:

27-07-1988

Sex:

M

S8827636A

Country of birth:

SINGAPORE

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PASS DATE

| | | |
|----------|---|-------------|
| Class 2B | Motorcycles <= 200 CC | 23 Nov 2006 |
| Class 2A | Motorcycles between 201 CC and 400 CC | 22 Jan 2008 |
| Class 2 | Motorcycles > 400 CC | 27 Apr 2012 |
| Class 3 | Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg | 08 Mar 2007 |

S8827636A

S/No. 9000143870



Licence No: S8827636A

IP 428A



3508922



NRIC No: S8827636A

Date of issue:

20-03-2004

APT BLK 6760 PUNGGOL DRIVE #04-740
SINGAPORE 824676

NRIC No: S8827636A

Date: 01/08/2016



LONPAC INSURANCE BHD (S98FC5635C)

MZ300

(Incorporated in Malaysia)

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

Tel: (65) 6250 7388 Fax: (65) 6296 3787 Website: www.lonpac.com.sg

GST Reg No.: P0-0005635-C

CERTIFICATE OF INSURANCE

Intermediary's Copy

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. : Z/18/VC00/101326

Type of Cover : THIRD PARTY

- 1. Index Mark and Vehicle Registration Number : SSANGYONG MUSSO4X2 AT
- GZ 8796P
- 2. Name of Policy Holder : DENSCO ELECTRICAL ENGINEERING PTE LTD
- 3. Effective date of the Commencement of Insurance for the purpose of the Act. : 27/03/2018
- 4. Date of Expiry of the Insurance : 26/03/2019

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/THEIR 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 IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES. THE POLICY DOES NOT COVER:- USE FOR HIRE OR REWARD OR FOR RACING, PACEMAKING, RELIABILITY TRIAL OR SPEED TESTING. USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

Excess : S\$1000.00 (SECTION 2) EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS

* 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 : eslinyeo / nfwong
Date Issued : 23-02-2018

17VC00/Feb v-s.7.0 - Z10256 - VM1