## 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

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	ACCIDENT STATEMENT
Date Of Report	11/12/2018 11:32
Date Of Accident	07/12/2018 17:05
Exact Location Of Accident	TRAFFIC JUNCTION OF MANDAI ROAD AND SLE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GU997E
Insured/Policyholder	
Name Of Registered Owner	PEST-PRO MANAGEMENT PTE LTD
Co Reg No	201005550C
Email Address	ADMIN@PESTPRO.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-63008385
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	GRACE H100 M
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	Z18VC05000933
Cover Note Number	
Driver	
Name of Driver	AIDHIL BIN JANTAN
NRIC No	S7434208F
D-4- Of Distle	40/40/4074

NRIC No S7434208F

Date Of Birth 18/10/1974

Occupation OUTDOOR

Date Of Driving Pass 05/03/2012

Driving Experience 6 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-83560802

Fax Number

Contact Number

EMail Address NOEMAIL

**BLK 201 YISHUN STREET 21** Address

#02-59

Postcode 760201

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

Insurance Company of Driver's Own Vehicle

#### **General Information of the Accident**

**COLLISION - HEAD TO REAR** Type Of Accident

Weather Conditions AFTER RAIN

Road Surface WET

#### Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles involved in the accident 2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver) 1

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

NO Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

### **Circumstances of Accident**

PLEASE REFER TO SKETCH PLAN.

## Attachment(s)

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

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

GBE5624S Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category **COMMERCIAL VEHICLE** 

Name of Driver SU YING-JU S8189794H NRIC/Passport Number

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan Pg. 1

#### **SKETCH PLAN**

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- 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.

Policyholder Str

11 DEC 201

NANA

Driver's Signature

(If driver is not the policyholder)
Date & Time: 1 1 DEC 2018

11. ---

11:2010

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Name

Poh Kwee Choo S6840583A

#### Sketch Plan Pg. 2

# **SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT** At Traffic junction; when the green light-turned to red light. The front vehicle (GBE ± 6245) Stopped and Draked, I couldn't stop on time and hit onto the back of the vehicle (GBE 56245) the myvehicle dented and daninged **DECLARATION** I/We declare the egoing particulars are true in every respect.

Driver's Signature

(If driver is not the policyholder)

Date & Time: 1 1 DEC 2018

Policyholder Signal Date & Time:

11 DEC 2018

GIARIWO StatchPlanform, VB

Page 4 of 10

Reporting Centre Personnel's Signature

Poh K Choo

S68 33A

Name:

NRIC/FIN No.:

#### CERTIFICATE OF INSURANCE Pg. 1



# LONPAC INSURANCE BHD (S98FC5635C)

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

MZ300

# 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.: Z18VC05000933

Type of Cover: THIRD PARTY

1. Index Mark and Vehicle Registration Number

HYUNDAI GRACE H100 M - GU997E

2. Name of Policy Holder

PEST-PRO MANAGEMENT PTE LTD

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

01/11/2018

4. Date of Expiry of the Insurance

31/10/2019

Person 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.

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 TRIALOR SPEED TESTING.

USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

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.

nele.

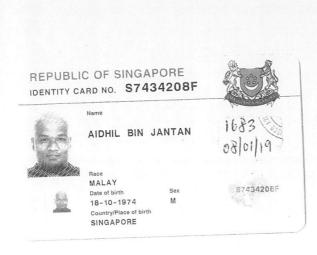
CHIEF EXECUTIVE (Singapore Branch)

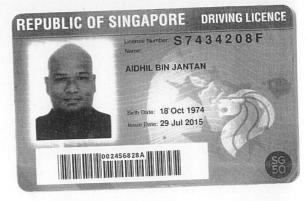
User ID: TIMESINSBRK1 Date Issued: 12/10/2018



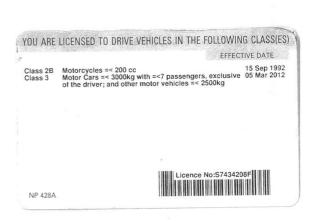
<sup>\*</sup> Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

## DRIVER'S NRIC + DRIVING LICENCE Pg. 1









# **Accident Photo**



# **Accident Photo**



# **Accident Photo**



# **CHASSIS NUMBER**

