

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 Report	07/01/2019 12:08
Date Of Accident	24/12/2018 16:25
Exact Location Of Accident	TRAFFIC JUNCTION BETWEEN AIRPORT RD & EUNOS LINK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB5390G
Insured/Policyholder	
Name Of Registered Owner	ADVERTISE DESIGN PTE LTD
Co Reg No	199900897D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62450611

Vehicle Particulars

Manufacturer	FIAT
Model	FIORINO 1.3MJTD (225.2L20)
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?	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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VC05001294
Cover Note Number	02/12/2018 TO 01/12/2019

Driver

Name of Driver	LEONG PEGGY
NRIC No	S9027628Z
Date Of Birth	31/07/1990
Occupation	INDOOR
Date Of Driving Pass	06/05/2014
Driving Experience	4 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-87491833
Fax Number	
Contact Number	
Email Address	PEGGYLPY3107@GMAIL.COM

Address	APT BLK 106A CANBERRA ST #15-401 (S) 751106
Postcode	
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

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 (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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

refer with 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	SKX8292P
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)	

Accident Sketch Plan Pg. 1

SKETCH PLAN

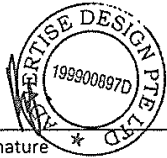
IMPORTANT NOTICE


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.
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.

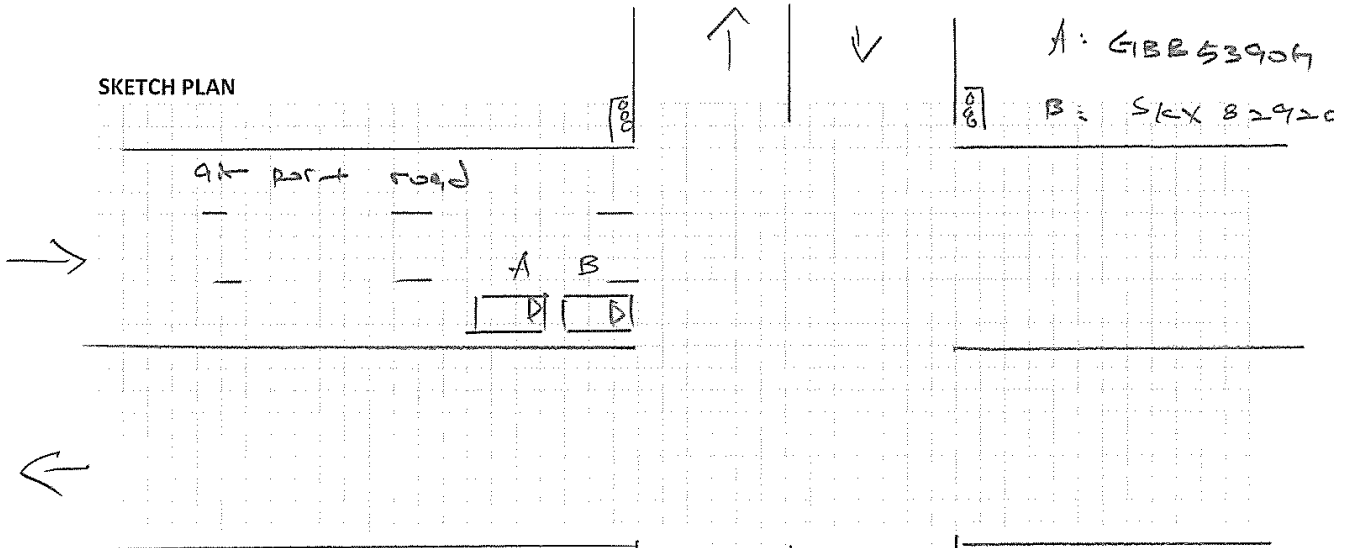
7/1/19 12.18pm
Policyholder's Signature
Date & Time:


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


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

Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24th December 2018, around 4.20pm I was driving along Airport Rd as shown as Vehical A on diagram.

At the traffic light, I stopped behind car B. While waiting for the traffic light to turn green, I went to grab a piece of my document, through this process my feet let nose of the brake and hit on car B. My vehicle do not have any damages through this bang.

DECLARATION

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

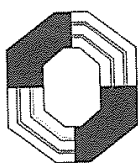
Policyholder's Signature
Date & Time:



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



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



LONPAC INSURANCE BHD
(S98FC5635C)

28 December 2018

ADVERTISE DE SIGN PTE LTD
1047 EUNOS AVENUE 5B #01-14
SINGAPORE 409668

~~By Registered Post~~
& Normal Post

Dear Sir/Mdm

CLAIM NO. : 18/18/19/VC05/021258
ACCIDENT INVOLVING GBB5390G AND SKX8292D ON 24.12.2018 AT TRAFFIC
JUNCTION OF AIRPORT ROAD AND EUNOS LINK

We refer to the above accident.

We have received a Third Party claim from Precise Auto Service.

This accident has not been reported to us. Please proceed to any of our authorized workshops to lodge the report.

Please note that we will be carrying out investigation and will proceed to defend and/ or negotiate a settlement of this claim and any further claims arising from this accident, as we deem appropriate.

If there are any further evidence which you would like to bring to our attention in support of your case and/or you have submitted a claim against the other driver please furnish us with:

- i) evidence
- ii) Status of your claim against the owner of the other vehicle involved in the case

Should you require any information or details on this claim, please contact us.

Kindly also note that you are required to notify us immediately upon receipt of all letters of claims, Writ of Summons, Traffic Police action issued against you. This includes all or any impending prosecution, inquest, fatal inquiry or offer of composition fine in connection with the above accident.

Please note that any failure on your part to observe this will result in us exercising our rights of repudiation under the motor insurance policy.

Your faithfully,
LONPAC INSURANCE BHD

Ong Li Li
Senior Executive (Claims)
Email : mt_claim@lonpac.com
Tel: 6250 7388 Ext 254
Fax: 6296 2706

c.c. Times Insurance Brokers Pte Ltd (Z70606)

PRECISE AUTO SERVICE

NO. 1 KAKI BUKIT AVE 6 #02-33/34/36
AUTOBAY @ KAKI BUKIT SINGAPORE 417883
TEL: 6745 7367 FAX: 6841 3390
CO. REG. NO. : 35766600C GST REG. NO. : 35766600C

28-12-2018

ADVERTISE DE SIGN PTE LTD

Driver : Leong Peggy (S9027628Z)

Blk 1047 Eunos Avenue 5B

#01-14

Singapore 409668

Dear Sirs,

**ACCIDENT INVOLING VEHICLE NO. SKX 8292P AND GBB 5390G ON
24 DEC 2018 @ 1625HRS ALONG TRAFFIC JUNCTION BETWEEN AIR PORT
ROAD AND EUNOS LINK.**

We are the repairer of vehicle no. **SKX 8292P**, and instructed by the owner WAYAAUTO TRADING in the above matter.

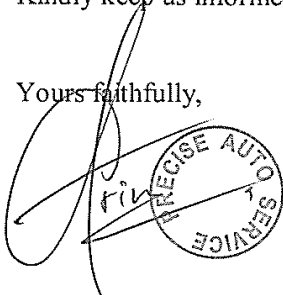
Our client instructs that on the **24 Dec 2018 @ 1625hrs**, you or your authorized driver and /or servant and /or agent was driving your vehicle no. **GBB 5390G** and was involved in an accident with our client's vehicle along *Traffic Juction Between Airport Road & Eunos Link*.

We have instructions to claim against your insurances, **M/S LONPAC INSURANCE BHD** for damages suffered by our client as a result of the said accident.

We write to notify you to lodge an accident report with your insurance company. In the event that you do not do so, your insurance will repudiate liability and in that event our client will look to you personally for all loss and damaged suffered.

Kindly keep us informed once you have lodged your accident report.

Yours faithfully,

A handwritten signature in black ink is written over a circular stamp. The stamp contains the text "PRECISE AUTO SERVICE" around the perimeter. The signature appears to be "P. Leong" or similar.



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

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. : Z18VC05001294

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

FIAT FIORINO 1.3MJTD (225.2L20)
- GBB5390G

2. Name of Policy Holder

ADVERTISE DESIGN PTE LTD

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

02/12/2018

4. Date of Expiry of the Insurance

01/12/2019

5. Person 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 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\$ 500.00 (SECTION 1)

S\$ 2,500.00 (SECTION 1) ADDITIONAL EXCESS FOR YOUNG AND/OR INEXPERIENCED DRIVERS

S\$ 100.00 WINDSCREEN EXCESS (EXCESS WILL BE DOUBLED ON SUBSEQUENT CLAIMS)

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 : ABWIN PTE LTD

CHIEF EXECUTIVE
 (Singapore Branch)

User ID: TIMESINSBRK1
 Date Issued: 26/11/2018



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S9027628Z**



Name

LEONG PEGGY

Race

CHINESE

Date of birth

Sex

31-07-1990

F

Country of birth

SINGAPORE

S9027628Z

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number

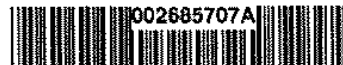
S9027628Z

Name

LEONG PEGGY

Birth Date: **31 Jul 1990**

Issue Date: **22 May 2017**



002685707A



NRIC No. S9027628Z

Date of issue
12-08-2005

APT BLK 106A CANBERRA STREET #15-401
SINGAPORE 751106

NRIC No: S9027628Z Date: 09/11/2017

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

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight \leq 2500kg **06 May 2014**



Licence No: S9027628Z

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

