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D.O.A. 08/03/2019 12:00	I-Motor W/O (V		TP (hrs).				
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TP Insurer:	Assessment/Survey Report  Ass't Report by Fax / Hand to Owner/Wish						
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Proforred Wksp / INC Assign Wksp / QW: (							
TP Particulars: Veli No: St	10566		Tel:		)		
Owner / Driver: (	od: (	)	Cover Type: (		).		
Policy No: ( ) Peri	ou. Ç	Dates ,	Time	7	)		
Insured/Driver Liability: ( %) [N	ote-Est Status (W		%; P: 21-79%	. P: 80-100	%]	41	
	arranty: YES (	)/NO(	)				
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1) Apply for Transport Allowance ( ) / Courtesy Car ( )							
1) Apply for Transport Allowance ( )/ Courtesy Car ( ) 2) QC Check / Pest Repair Inspection ( ·)							
3) Upload Resurvey Photo [Repair Cost > \$3		- ( ·					
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		Invalue dated			110.7	Chamilton Harris	

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Contact Number

EMail Address

- 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 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 GtA Records Management Centre established by the General Insurance Association of Singapore (GtA) 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,	solition the archiving of this report at the centre and to copies of the report being made available		
The second secon	ACCIDENT STATEMENT		
Date Of Report	11/03/2019 18:59		
Date Of Accident	08/03/2019 12:00		
Exact Location Of Accident	JUCNTION OF TAMPINES AVENUE 10/TAMPINES AVENE 5		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SKV7129X		
Insured/Policyholder			
Name Of Registered Owner	CHAN SENG TAH		
NRIC No	S2591966A		
Email Address	ECST86@GMAIL.COM		
Mobile Phone No	(LOCAL) +65-98536811		
Alternative Phone No	HOME-98536811		
Vehicle Particulars			
Manufacturer	SUBARU		
Model	FORESTER		
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	REPORTING ONLY		
Vehicle Category	PRIVATE CAR		
Insurance Company			
Name of Insurance Company	LONPAC INSURANCE BHD		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	Z18VP05020395		
Cover Note Number			
Driver			
Name of Driver	CHAN SENG TAH		
NRIC No	S2591966A		
Date Of Birth	13/02/1965		
Occupation	INDOOR		
Date Of Driving Pass	14/04/1993		
Driving Experience	25 YEARS AND 10 MONTHS		
Gender	MALE		
Mobile Number	(LOCAL) +65-98536811		
Fax Number			
West of the Control o			

HOME-98536811

ECST86@GMAIL.COM

Address

63 ROSEWOOD DRIVE

Postcode

737874

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

d OWNER

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)

2

involved in the accident
Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

1000

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

PLEASE REFER TO SKETCH PLAN

#### 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

SFM8555Z

Vehicle Make/Model/Colour

MITSUBISHI ATTRAGE

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

YONG TZE WOON (YANG SHIWEN)

NRIC/Passport Number

S7711994I

Contact Number

97577607

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME:

GENDER:

#### 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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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.
- 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's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personne

Name

NRIF/EIN No

# ACCIDENT STATEMENT

ACCIDENT DATE: (02 ) 03 1 19 )(DD/MM/	YYYY) TIME: 1 12
LOCATION: Tana 125 A 15 10 11	The state of the s
LOCATION: TAMPINES AVE 10 /	NOIDIANG PAUL
1. DETAILS OF VEHICLE	
a) VEHICLE NUMBER: SKV 7/29 X	8
b)INSURANCE COMPANY: LONDAC	
CJPOLICY NUMBER:	
D)MAKE & MODEL: JUBARU FOR	TARIY / THIRD PARTY FIRE &THEFT)
DITYPE-ISALOON / COURS / MANY OVAN	FILLY
f)TYPE:(SALOON / COUPE / MPV /VAN / LO	ORRY / MOTORCYCLE / OTHERS)
DIPURPOSE OF USING AT A COIDERT THAT	ERCIAL / MOTORCYCLE)
h)PURPOSE OF USING AT ACCIDENT TIME: i) ARE YOU CLAIMING UNDER YOUR OWN I	CHSUAL
IF NO, PLEASE STATE (THIRD PARTY CLAIM	INSURANCE (YES/NO)
2. INSURED / POLICY HOLDER	/ REPORTING ONLY)
HAT DASS MAHS : : MANIA	15
b) NRIC/FIN/PASSPORT: 52591966A	(MALE / FEMALE)
all DDDDDD	UE #04-12 5(737874)
ST COSTINGOLD ON	INE 404-12,3 (13/8)43
* CONTINUE TO 3.d IF DRIVER ALSO POLICY	HOLDER
The of passan as DRIVER	HOLDER .
(Including driver) DINAME: CHAN SENGTAH	(MALE / FEMALE)
(1) b)NRIC/FIN/PASSPORT: 53591966A	CONTACT: 985368 D
CIADDRESS: 61 ROSEWROD DRIV	E #04-12 · 5(737874)
*d) DATE OF BIRTH: (13 / 02/1965 )(0	D/MM/YYYY) ·
e OCCUPATION: (INDOOR / OUTDOOR)	2 minutes of the second
1) DATE OF DRIVING PASS 14 164	<u>/19</u> 93 .
4. WAS DRIVER AN EMPLOYEE OF THE INST	URED'S COMPANY? (YES / NO)
IT NO, RELATIONSHIP OF THE DRIVED IN	TTU INCLINED.
5. a) WEATHER CONDITION: (CLEAR / RAINING	/ OTHERS
6. WAS ANYBODY INJURED (YES / NO)	
7. a) REPORTED TO POLICE (YES / NO)	
IF YES PLEASE STATE WHICH DOUGH TO	E 15
IF YES, PLEASE STATE WHICH POLICE STATIC  8. THIRD PARTY VEHICLE	)N:
He of passenger a) VEHICLE NUMBER: SEM 8555 Z	A TOTAL BASE NOTE AND ADDRESS OF
	MODEL: MITSURISHI ATTRAGE
( ) C) NRIC/FIN/PASSPORT: 577119941	
( ) NRIC/FIN/PASSPORT: STT119941  9. THIRD PARTY VEHICLE	CONTACT: 97577607
No of passanger d) VEHICLE NUMBER:	MODEL:
The state of the s	MODEL:
Including driver f) NRIC/FIN/PASSPORT:	CONTACT:
	,
	- 84
All page	38 as as 30

email = ecst 86@gmail.com











## CERTIFICATE OF INSURANCE

MOTORI VEHICLES (THRD PARTY RISKS AND COMPENSATION) ACTICAP 1881 REPUBLIC OF SINGAPORE, MOTOR VEHICLES (THRD PARTY RISKS AND COMPENSATION) RULES 1880 (REPUBLIC OF SINGAPORE) ROAD TRANSPORT ACT 1987 (MALAYSIA).
MOTOR VEHICLES (THRD PARTY RISKS) RULES 1889 (MALAYSIA).

Certificate No. : Z18VP05020395

Type of Cover : COMPREHENSIVE

Index Mark and Vehicle Registration humber

SUBARU FORESTER 2.0

- SKV7129X

2. Name of Policy Holder

CHAN SENG TAH

Effective Date of the Commencement of Insurance for the purpose of the Sut.

4. Date of Expiry of the Insurance

29/09/2019

Persons or Classes of Persons entitled to drive
(A) THE POLICYHOLDER'S ORDER OR WITH HISHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HISHER PERMISSION
Provided that the person dwarp is permitted in accondance with the licensing or other laws or regulations to drive the Motor Vehicle or has bean su
permitted and is not disqualified by order of a Court of Law or by reason of any eractment or regulations that benefit from driving the Motor Vehicle.

E. 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.

: SS 0.00 (SECTION 1) INSURED | NAMED DRIVERS

\$\$ 2,000,00 (SECTION 1) UNNAMED DRIVERS
\$\$ 1,000,00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS
\$\$ 100,00 WINDSCRIEN EXCESS

LONPAC'S AUTHORISED WORKSHOPS

Condition : ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS

\* Limitations rendered inoposative by Section 95 of the Road Transport Act 1967 (Manyway or Section 8 of the Notor (1972) as Third Party Rights and Compensation) Act (Clap 189) Republic of Singapore are not included under heading.

WWE hereby certify that this covering hidre is insuled in accordance with the provisions of Part IV of the Road Transport Act 1561 (Malaysia) and Motor Vehicles (TransParty Risks and Compensation) Act (Ctp. 188) Resulting of Singapore.

Dulle.

CHEF EXECUTIVE (Singapore Branch)

User ID: MRMLP0014 Date | saued | 28/09/2018