NATIONAL Assessment Centre Services	[4.0" · Ja-10-3]		1		
Date In: 10 04 2019 14:03 Job descripti		Date d	Time Completed	Done	hv
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OD TP Reporting Only I-Motor W	//O (Within: OD 2hrs	TP 4hrs)	ļ 		
TP Insurer: Assessment	Survey Report	 			
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Proferred Wksp / INC Assign Wksp / QW: (Tol:	THE HEAD AND ADDRESS OF THE PARTY OF THE PAR	ax:	
TP Particulars: Veh No: PC 136 L.	. INC()/N	on-INC()		
Owner/ Driver: (Tel:)	
Policy No: () Period: ()		Type: (- 	
Confirmed by : (Date:		Tlme:	; '	
Insured/Driver Liability: (%) [Note-Est Status	(WO): N: 0-20	0%; P:	21-79%. F: 80-1	100%]	
Warranty: YES	()/NO()		-	
	00()	-			
Seneral Remarks:	8480 W. 1822	RESERVE OF	於子在中央人。 (1)		800041306
() Walk-In Customer's Information strictly (Confidential & Str	ictly NC	refer of repairer,	F1.11C=2/S-2864C-2/Sa	11/11/2003
() Total Loss Case : to e-mail Insurer URGENTLY	Y. ·	chtrebt chrosse			
Drive-In () / Towed-In (); Invoice: YES () /	NO();T	owing (0. ()
1) Apply for Transport Allowance ()/ Courtesy Car (2) QC Check/Post Repair Inspection (3) Upload Resurvey Photo [Repair Cost > \$3000] ()		Time Compleied		
Injury:					11000
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C Checked by (Engr-In-Charge):	1) AR: Accident 2) DA: Damage 3) TF: Towing F 4) FT: Follow-Ti 5) FT: Follow-Ti For claiming as 6) TR: Re-impec 7) N1: Idao DA: 8) NTUC Additio On: •N5: Courtesy •N6: Repair Co •N7: Post Repair N8: DV / Col	Reporting Assessment of hrough Sun hrough Sun seinst INC stilon FART S onal Service Cer / Tp o-ordinate hir Inspect lect Exce (Non INC	(\$30); at (\$100); INC (\$2.5) Evey Evey Only (Wef 10 Jan 200) Days (Wef 10 Jan 200) Allowance In lon i Coordination	\$120 \$120 \$30 \$55 \$55 \$560 \$5 \$5 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50	400

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.
- 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.

	ACCIDENT STATEMENT
Date Of Report	10/04/2019 14:03
Date Of Accident	08/04/2019 17:45
Exact Location Of Accident	TANAH MERAH COAST ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YN8937A
Insured/Policyholder	
Name Of Registered Owner	SASHTHA CONSTRUCTION PTE LTD
Co Reg No	Security Control Contr
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91046747
Alternative Phone No	OFFICE-91046747
Vehicle Particulars	
Manufacturer	ISUZU
Model	#530000000
Exact Purpose for which vehicle was being used at time of accident	WORK
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VC05000406
Cover Note Number	
Driver	
Name of Driver	RASEL
Passport No/FIN	G8139367U
Date Of Birth	10/06/1983
Occupation	OUTDOOR
Date Of Driving Pass	28/11/2013
Driving Experience	5 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91046747
Fax Number	
Contact Number	OTHERS-91046747
EMail Address	NOEMAIL

Address D WALL PTE LTD

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

*

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE
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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES

2

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

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 PC136L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category BUS

Name of Driver

NRIC/Passport Number

Contact Number 92992875

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudlate policy liability</u>.
- 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:
 - 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 .:

	Tanah Merah coast Rd	A-YN8937 B-PC136
A		
	A	

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle to was driving along tanah Merah Coast Rd When Vehicle A turning night at the same time Vehicle B also turn right and was too close and hit on Vehicle A Left side portion. Vehicle A front door side was slightly damages,
When Vehicle A turning night at the same time
Vehicles also turn right and was too close
and hit on Vehicle A Left side portion.
Vehicle A front door side was slightly
damagos,
0

DECLARATION

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

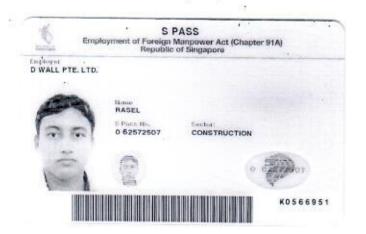
Policyholder's Signature Date & Time:

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

Name: NRIC/FIN No.:

GIARMI SketchPlanForm V3

Ž.









Name RASEL

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

Class 3 Motor care with unladen weight =< 3000kg with =< 7 28 Nov 2013 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

Licence No:G8139367U

NP 428A



LONPAC INSURANCE BHD (598FC5635C)

(incorporated in Makeysia)

Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 199555. Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpec.com.sq GST Reg No.: P9-0005635-C

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTYRISKS 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.: Z18VC05000406

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

ISUZU NNR85UH4A

- YN8937A

2. Name of Policy Holder

SASHTHA CONSTRUCTION PTELTD

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

26/08/2018

4. Date of Expiry of the Insurance

25/08/2019

5. 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.

6. Limitations as to us

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.

Excess

: S\$ 1,400.00 (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)

: 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.

IWE 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.

Duck.

CHIEF EXECUTIVE (Singapore Branch)

User ID: MEICHEE Date Issued: 10/08/2018