

# NATIONAL Assessment Centre Services.

[ver 1 Jan 2003]

MNA 1190699P

Date In: 10/5/19 17:11	Job description	Date & Time Completed	Done by
Ref No: NAI LPC 19008356/64	SAS e-filing		
Veh No: SKP 4088G	E-mail (within 3hrs, AIC 2hrs)		
DOA: 10/5/19 06:40	I-Motor Claim Form		
OD: <input checked="" type="checkbox"/> Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksip		

Preferred Wksp / INC Assign Wksp / QW: ( ) Tel: ( ) Fax: ( )

TP Particulars: Veh No: CB 6841D INC ( ) / Non-INC ( )

Owner / Driver: ( ) Tel: ( )

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

Confirmed by: ( ) Date: ( ) Time: ( )

Insured/Driver Liability: ( ) % [Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]

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

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

General Remarks: ( )

( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

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

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

Remarks: ( )

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

2) QC Check / Post Repair Inspection ( )

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

Injury: ( )

Date/Time: ( )

Actions: ( )

( )

( )

( )

( )

( )

( )

( )

( )

( )

( )

( )

( )

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( )

( )

( )

( )

( )

( )



## 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	10/05/2019 17:11
Date Of Accident	10/05/2019 06:40
Exact Location Of Accident	JLN JURONG KECHIL TURNING TO JLN ANAK BUKIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKP4088G
Insured/Policyholder	
Name Of Registered Owner	GOH KIAN GUAN
NRIC No	S0217405G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96915853
Alternative Phone No	OFFICE-96915853
Vehicle Particulars	
Manufacturer	NISSAN
Model	TEANA 2.5L CVT
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VP05019719
Cover Note Number	-
Driver	
Name of Driver	GOH KIAN GUAN
NRIC No	S0217405G
Date Of Birth	27/10/1943
Occupation	INDOOR
Date Of Driving Pass	06/03/1965
Driving Experience	54 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96915853
Fax Number	
Contact Number	OFFICE-96915853
Email Address	NOEMAIL

Address	42 TOH TUCK PLACE
Postcode	596718
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	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 - CHANGE/CROSS LANE
Weather Conditions	AFTER RAINED
Road Surface	WET

#### 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)	2
Passenger 1	NAME: : UNKNOWN
	GENDER: : FEMALE

#### 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 ATTACHED STATEMENT.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	CB6841D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
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.
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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.**
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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:
  - (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:

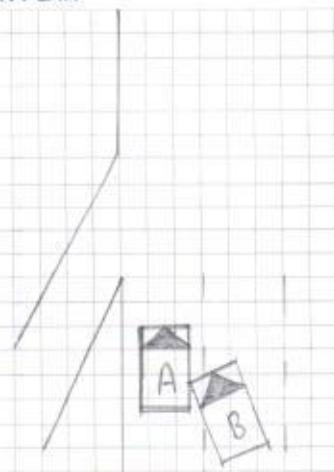


Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# SKETCH PLAN

A = SKP4088G.  
B = CB 6241D.

Jln Anak Bukit

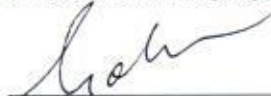


## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to statement

## 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.:

ON 10 MAY 2019 AT 6:40AM, I WAS TURNING FROM JALAN JURONG KECHIL ON THE THIRD RIGHT TURN LANE TO JALAN ANAK BUKIT. AFTER ENTERING JALAN ANAK BUKIT, I KEPT TO THE SAME LANE HEADING STRAIGHT TOWARDS DUNEARN RD, AT ABOUT 10 METERS FROM THE JUNCTION, MY CAR WAS HIT BY A SCHOOL BUS CB6841D ON THE RIGHT SIDE.



# ACCIDENT STATEMENT

ACCIDENT DATE: ( 10 / 5 / 19 ) (DD/MM/YYYY), TIME: ( 6 : 40 ) (HH:MM)

LOCATION: Jalan Jurong Keah:1 turning to Jln Anak Bukit

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKP 4088 G.  
 b) INSURANCE COMPANY: LPC  
 c) POLICY NUMBER:  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL:  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: Private Use  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: Goh Kian Guan. (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT:  
 c) ADDRESS: CONTACT: 96915853.

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: As Above. (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT:  
 c) ADDRESS: CONTACT:

\*d) DATE OF BIRTH: ( / / ) (DD/MM/YYYY)  
 e) OCCUPATION: (INDOOR / OUTDOOR)  
 f) YEARS OF DRIVING EXPERIENCE:

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner.

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS After Rain)  
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: CB 6841 D MODEL:  
 b) DRIVER'S NAME:  
 c) NRIC/FIN/PASSPORT: CONTACT:

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: MODEL:  
 e) DRIVER'S NAME:  
 f) NRIC/FIN/PASSPORT: CONTACT:

\* No of passenger  
 (Including driver)  
 ( 2 )

/  
 F

\* No of passenger  
 (Including driver)  
 ( )

\* No of passenger  
 (Including driver)  
 ( )

waiting driving license. Email =

fax =

video = Yes.

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0217405G



Name

GOH KIAN GUAN



吴建源

Race

CHINESE

Date of Birth

27-10-1943

Sex

M

Country of Birth

SINGAPORE

S0217405G

1890664



NRIC No. S0217405G

Blood Group

O+

Date of issue

31-03-1994

Address

42 TOH TUCK PLACE  
SINGAPORE 2159



**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number: **S0217405G**

Name:

**GOH KIAN GUAN**

Birth Date: **27 Oct 1943**

Issue Date: **03 Mar 2003**





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

PASS DATE

**Class 3**    **Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms**

**06 Mar 1965**

NP 428A





**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

MX1

**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. : Z18VP05019719

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

NISSAN TEANA 2.5  
- SKP4088G

2. Name of Policy Holder

GOH KIAN GUAN

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

08/09/2018

4. Date of Expiry of the Insurance

07/09/2019

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/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 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.

Excess : S\$ 0.00 (SECTION 1) INSURED / NAMED DRIVERS  
S\$ 2,000.00 (SECTION 1) UNNAMED DRIVERS  
S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS  
S\$ 100.00 WINDSCREEN EXCESS

LONPAC'S AUTHORISED WORKSHOPS

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.

CHIEF EXECUTIVE  
(Singapore Branch)

User ID: ABLIM4

Date Issued: 07/08/2018