NATIONAL Assessment Cent				Don	e by
Date III. 18 19 119 11:30	Jeb description		Date & Time Completed	1,7011	0.01
Ref 110 MAI LPG 19.0 16466164	SAS c-filling		i		
VehiNo SKQ 3002E	E-mail (schio	ālus, AIC 2hrs)			
1719119 21:00.	i-Motor Cini	m Form	4		
OH Reporting Only	I-Motor W/C	(Within: OD 2hrz	Tr 4hrs)		
	l-Photo Uplo	aded			
TP Insurer:	Assessment/St		<u> </u>		
	Ass't Report b	y Fax / Hand t	o Owner/Wksp	THE REAL PROPERTY AND PERSONS ASSESSMENT OF THE PERSONS ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT	MATERIAL PROPERTY.
Proformit Wksp / INC Assign Wksp / QW: (`		ax:)
TP Particulars: Veh No:	SLG 270 H.	, INC(
Owner / Driver: (-			Tel:		
	eriod: (Cover Type: (
Confirmed by : (DI	Date:	Time:	00%1	
The state of the s			0%; P: 21-79%. P: 30-1	0076	
THE COLUMN TWO IS NOT THE OWNER OF THE COLUMN TWO IS NOT THE COLUM	Warranty: YES (000 ()/\$2,000)/NO(
The state of the second	NAME OF TAXABLE PARTY OF TAXABLE PARTY.		A STATE OF THE PARTY OF THE PAR	TEST TO THE	-
General Reiningles : 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			INVESTIGATION OF THE PERSON OF	TOWN BY	
() Walk-In Customer's Info		nnoenual & Su	ictly NO 19181 Of Teparier.		
() Total Loss Case : to e-mail Insur					
Drive-In ()/ Towed-In (); Invoic			owing Co: (· , '	***************************************	THE THE PERSON NAMED IN
Remarks: $z = 0.00C$ hothar 26798 4616)8	Strain the Hottes		Diteschinitationist-54f	skie in Done	py ·
1) Apply for Transfort Allowance ()/(Courtesy Car ()			
2) QC Check / Post Repair Inspection	(·)	-			
3) Upload Resurvey Photo [Repair Cost > \$	3000] (-)			
Injury:					
Distriction of Actions (Control of Control	TO THE STATE OF	AT INCOME AND A STATE OF		THE COUNTY	TANK MANAGEMENT
	deran de antigen de la superiories.	elafat Problem (harried se	Prayersors and second and the angle of the second and the second a	Abyer Butla as	
	1				
	,		A STATE OF THE PARTY OF THE PAR		
				लागकार सम्बद्धीयोगा	reserve var
	04	Invoice Pre	aranon Checking (4)		Arama(1)
humants Paericulary is 1	SPOONSKULVALIDAGE	1) AR : Accident	Reporting (530);		
A CONTRACTOR OF THE PROPERTY O	Language Allon	2) DA : Damege / 3) TF : Towing Fe	(\$100); INC (\$8	0) (545	
iver/Owner:		4) FT : Follow-Th	rough Survey	\$120	
ontact No:		5) PT : Follow-Th	rough Survey (Resurvey) ainst INC Only (wef 10 Jan 200)	330	
mäged Portion:		6) TR: Re-Inspec	lion	\$160	
The state of the s	- 1	7) N1 : Idao DA + 8) NTUC Addition	Charles many		
Checked by (Engr-In-Charge):	1	On.	Cer / Tpt Allowance	22	
5 7 7 6 7 7		* NG: Repair Co	-ordination	\$10 \$25	
rditors Comments :		*N7; Post Reps *N8: DV / Coll	eot Excess Coordination	55	
1	AND A MELLY AND CHEDOLE	TP (N11): TP	(Nun INC) against INC	30	1,5
2/3		9) N12: Idao Moli Involve dated	Fee Charged		white facts
		Invoice dated	Fee Charged	MAC IN	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Gender

Mobile Number

Fax Number 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.
- 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.

0.007/000036		
Secretary and the second secretary and the second	ACCIDENT STATEMENT	-
Date Of Report	18/09/2019 11:30	
Date Of Accident	17/09/2019 21:00	
Exact Location Of Accident	BLK 691 HOUGANG ST 61 OPEN CARPARK	
Country/State of Loss	SINGAPORE	
等。1200年120日 1200年120日 1200日 1	DETAILS OF OWN VEHICLE	78
Vehicle Registration Number	SKQ3002E	
Insured/Policyholder		
Name Of Registered Owner	ONG SOK TING	
NRIC No	S6933252H	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-97989809	
Alternative Phone No	OFFICE-97989809	
Vehicle Particulars		
Manufacturer	BMW	
Model	5281	
Exact Purpose for which vehicle was being used at time of accident	PARKED	
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	Z19VP05023374	
Cover Note Number	The control of the co	
Oriver		
Name of Driver	CHAN HONG POW @ VINCENT	1300
NRIC No	S1721075J	
Date Of Birth	22/10/1965	
Occupation	INDOOR	
Date Of Driving Pass	11/04/1991	
Priving Experience	28 YEARS AND 5 MONTHS	
and the second s		

MALE

NOEMAIL

(LOCAL) +65-97989809

Address

BLK 691 HOUGANG ST 61 #03-286

Postcode

530691

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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?

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)

0

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

HOUGANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4890999 - FAX NO: 63128989

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT T/20190918/2005

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH DRIVER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLG270H

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)

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.
- 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.
- 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.
- 3. 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 inionerary 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.:

SKETCH PLAN					
		B	A		A - SKQ 3000
Bus	691 Hongang	st G	Open	Curpark	
DESCRIBE CIRCUMSTAN	CES OF THE ACCIDENT				
Refer t	o the poli	.0 0-		<u></u>	19.9.1
Keter 1	The poli	ce Ke	port	7/30	190918/2005
	- 118				
CLARATION We declare the foregoing par	ticulars are true in every re	espect.			distribution
licyholder's Signature te & Time:	Driver's Signature (If driver is not the			Reporting C	Centre Personnel's Signature

Date & Time:

NRIC/FIN No.:





Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

1 of 3 Report No. T/20190918/2005

REPORT OF A 1	RAFFIC	ACCIDENT
---------------	--------	----------

Date/Time Report Made: 18/09/2019 00:52		Made:	Vide Report No.:	Station Diary No.:	
Informa	int's Partic	ulars		Season and the season of the s	
CHAN F	f Informant: IONG POW		Address: APT BLK 691 HOUGANG ST 530691	REET 61 #03-286 SINGAPORE	
ID Type / ID No.: NRIC NO / S1721075J Nationality: SINGAPORE CITIZEN		75J	Contact No.: Home/Office: Mobile: 97989809 Email:		
		ΈN			
Sex: Male	Age: 53	Date of Birth: 22/10/1965	Type of Informant: Vehicle Owner		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Employment agent/Labour contractor		Labour contractor	Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run		Drink Drive: No	Date/Time of Accident:	Type of Lo Car Park	ocation
Location: Along Road 1 HOUGANG S B/691 Hougan	TREET 61			17/09/2019 21:00		
Weather: Clear		Road Surface: Dry			Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled			Traffic Volume: Light	
Type of Collisi Moving Vehicle	on: e Against - Parked Ve	hicle	1		Anyone conveye ambulance: No	d by

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SKQ3002E	Car			100		0
SLG270H	Car					0





Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

2 of 3 Report No. T/20190918/2005

CONTINUATION OF REPORT

Brief Details.

On 17/09/219 at about 1730hrs, I parked my vehicle bearing registration number SKQ3002E at B/691 Hougang St 61 Open carpark (Unknown Lot number) and nothing was amiss.

On 17/09/2019 at about 2235hrs, I went to my vehicle and discovered that my front right portion of vehicle and right fender suffered scratches and a minor dislodged on the right side bumper.

As such I then went to view the CCTV which were installed in my vehicle and noticed that there was one vehicle bearing registration number SLG270H which were parked on the lot next to my vehicle on the right side was seen to have collided onto my right portion of vehicle while it was moving out at about 2101hrs.

There is no notice or contact details being left behind. I am not sure of the said vehicle owner. There is a CCTV at the vicinity of my block.

As such I am making this report for Traffic Police assistance.





Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

3 of 3 Report No. T/20190918/2005

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:	Signature Of Informant:
Sgt 3 SYED NAFIS BIN SYED HUSSAIN	de la
Signature Of Interpreter: Not applicable	Date/Time: 18/09/2019 00:52
con- souce end	10/03/2019 00:52
Officer In Charge Of Case: TP / HRT /	Classification Of Case:
Sr Staff Sgf TAN JEOK LENG Contact No.: 65476144	
Authentication Stamp	*

9	101.0
Date of Accident	: 17 9 9 Accident Time: 21-00 (24-HR-Pormat)
Accident Place	: at Hougary st 61 open carpork
Vehicle. No. (Car Plate No.)	: SKQ 300 2 E Make/Model: BMW 528 I
Insurace Company	: Lon pac Policy No: 219 V PU50 > 3374
Owner or Company Name /IC No.	: Ong sok Ting /56933252H
Owner or Company Contact No.	:Owner's HpCompany Tel
DRIVER'S Name / IC No.	: chan Hong Pow / S1721075J
DRIVER'S Date Of Birth	:
Relationship of Owner & Driver	: Spoyse \ Parents \ Children \ Sibling \ Employee\ Others:
DRIVER'S Address	: BIK 691 Hory of St 61 #03-286 553069/
DRIVER'S Contact No./ Alt No.	:1) 97989809 2)
DRIVER'S Occupation	: INDOOR \OUTDOOR (e.g. working inside or outside office)
Email Address	
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Da	river): NO
Was there any video Captured by car Exact purpose for which vehicle was Any Injury (If YES, PIs state):	being used at the time of accident: Private use \ Work purpose
Other P	arty Driver's Particular (if any)
Vehicle, No: SLG1 2701-	Vehicle, No:
Vehicle Make\Model:	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:

* NEW - Passenger's name & gender:



LONPAC INSURANCE BHD (S98FC5635C)

Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 199555. Tel: (65) 6250 7388 Fax: (65) 6296 3787 Website: www.lonpac.com.sg GST Reg No.: F0-0005635-C

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.: Z19VP05023374

Type of Cover: COMPREHENSIVE

Index Mark and Vehicle Registration Number

BMW 528I 2.0 - SKQ3002F

Name of Policy Holder

ONG SOK TING

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

21/05/2019

Date of Expiry of the Insurance

20/05/2020

- 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.
- 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

Excess

: S\$ 0.00 (SECTION 1) INSURED / NAMED DRIVERS

S\$ 1,000.00 (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

AN ADDITIONAL EXCESS OF \$500 FOR 2ND & SUBSEQUENT CLAIM DURING THE POLICY PERIOD (FOR COMPREHENSIVE

: 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.

mele.

CHIEF EXECUTIVE (Singapore Branch)

User ID: SERENEYEO Date Issued: 08/05/2019