

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	29/05/2020 14:54
Date Of Accident	28/05/2020 09:15
Exact Location Of Accident	BLK 639 PUNGGOL DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YL9760X
Insured/Policyholder	
Name Of Registered Owner	LYE KOON KENG
NRIC No	S1227165D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98514001
Alternative Phone No	OTHERS-98514001

Vehicle Particulars

Manufacturer	ISUZU
Model	FTR33P
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	Z20VC05004979
Cover Note Number	01/04/20 - 31/03/21

Driver

Name of Driver	WONG NEO
NRIC No	S0970196F
Date Of Birth	24/06/1954
Occupation	OUTDOOR
Date Of Driving Pass	10/06/2019
Driving Experience	0 YEAR AND 11 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98999326
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 217 MARSILING CRESCENT #08-83
Postcode	730217
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
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 TO 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	YQ1824Y
Vehicle Make/Model/Colour	PARKED
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LEE SOO HOO
NRIC/Passport Number	F0899998T
Contact Number	97232283
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

VEHICLE NO.: YL9760X
INSURER : Longgac
DATE & TIME: 28/5/20 9:15am

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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:

(YS) og 29/05/20
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



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TRAFFIC POLICE - SINGAPORE
HEAVY VEHICLE PROFICIENCY TEST ASSESSMENT CHECKLIST

NAME : WONG NEO ID NO : S0970196F
TEST CENTRE: WOODLANDS TEST CENTRE CLASS: 4A / (4) 5 DATE : 10/6/2019

A penalty is indicated by a tick ✓. A tick in a circle (✓) indicates 'Immediate Failure'. A tick in a box [✓] carries the number of demerit points shown beside the box.
One Immediate Failure or accumulation of 20 demerit points constitutes a failure.

DEMERIT ITEM		PENALTY		
A EMERGENCY STOP				
1	Unable to stop within stipulated distance			<input type="checkbox"/> 4
2	Incorrect technique			<input type="checkbox"/> 4
3	Fail to attain required speed			<input type="checkbox"/> 4
B NARROW COURSE				
		(a) Straight Course	(b) 'S' Course	(c) Left & Right Turns
1	Strike pylon / kerb	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10
2	Require reverse movement	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
3	No safety check	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> 4
C SIGNAL				
1	Fail to signal			<input checked="" type="checkbox"/> 2
2	Give wrong signal			<input type="checkbox"/> 2
3	Fail to cancel signal			<input type="checkbox"/> 4
D ESTIMATION OF LOAD / VEHICLE HEIGHT				
1	Difference between 10 cm to 25 cm			<input type="checkbox"/> 2
2	Difference between 26 cm to 50 cm			<input type="checkbox"/> 4
3	Difference exceeding 50 cm			<input type="checkbox"/> 8
E SECURING OF LOAD (class 4 only)				
1	Fail to secure load properly			<input type="checkbox"/> 4
F ORAL TEST ON SAFETY RULES & REGULATIONS				
1	71% to 90% correct			<input checked="" type="checkbox"/> 4
2	50% to 70% correct			<input type="checkbox"/> 8
3	Below 50% correct			<input type="checkbox"/> 10

Remarks:

SCORE		RESULT	
Number of immediate Failure <input checked="" type="checkbox"/>	Number of Demerit Points <input type="checkbox"/> 18	PASSED <input checked="" type="checkbox"/>	FAILED <input checked="" type="checkbox"/>

Driving Tester: IRWAN TAIB

Signature: *[Signature]*

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1227165D



LYE KOON KENG
賴坤庆
CHINESE
Date of Birth: 12-10-1957 M
Country of Birth: SINGAPORE

REPUBLIC OF SINGAPORE
DRIVING LICENCE NO. S0970196F



WONG NEO
黃良
CHINESE
Date of Birth: 24-06-1954 M
Country of Birth: SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE
Licence No. 970196

WONG NEO
Date of Birth: 24 Jun 1954
Sex: M
Date of Issue: 02 Jun 2000




NRIC No. S1227165D

APR 2011 31-00-1994

APR 2011 31-00-1994

APR 2011 31-00-1994

APR 2011 31-00-1994



S0970196F

LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

CLASS	VEHICLE CLASSIFICATION	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	06 Jul 1974
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	1 Feb 75

NP 425A



Licence No. S0970196F

Accident Photo



Accident Photo



Accident Photo



Accident Photo



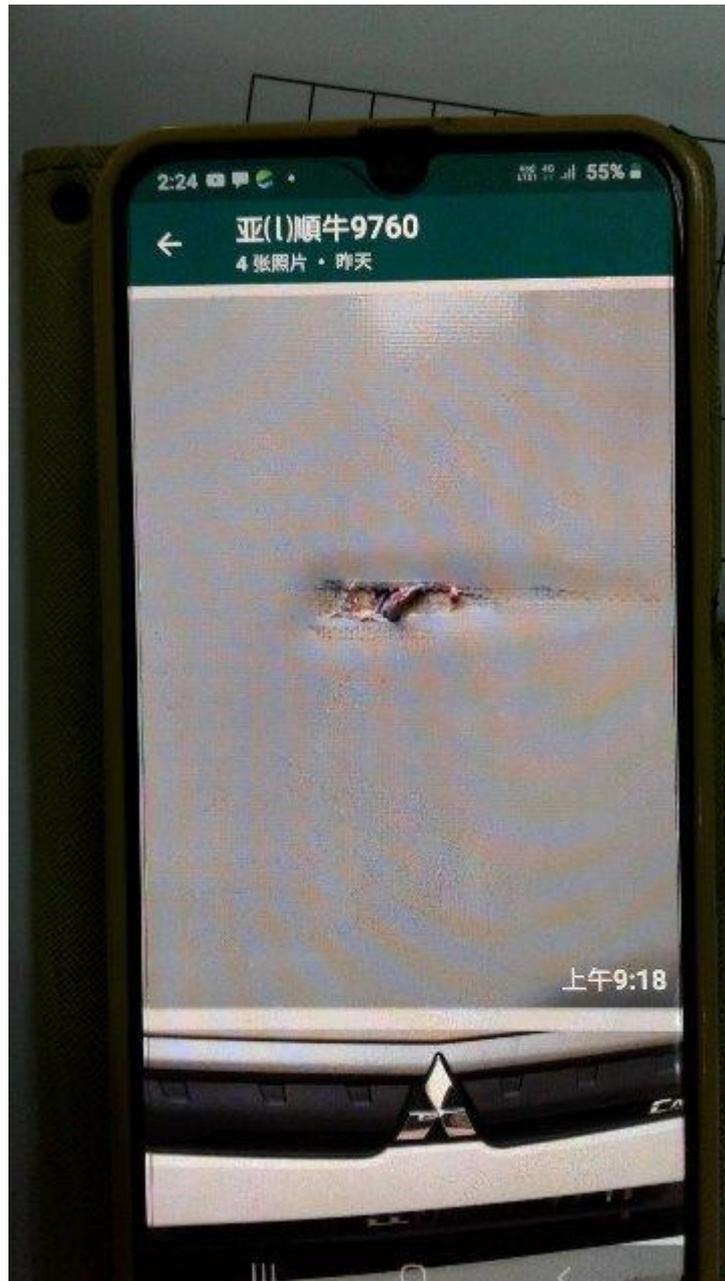
Accident Photo



Accident Photo



SCENE



SCENE



SCENE



SCENE

