

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	27/08/2020 16:31
Date Of Accident	24/08/2020 19:00
Exact Location Of Accident	37 WOO MON CHEW ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE4967J
Insured/Policyholder	
Name Of Registered Owner	MAGIC MOMENTS DOG TRAINING
Co Reg No	53005915X
Email Address	MELVYNK@ROCKETMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-96282100

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	TRANSPORTER-2.0 D TDI (A)
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	Z20VC05005634
Cover Note Number	

Driver

Name of Driver	KOH KHENG LENG MELVYN
NRIC No	S7104101H
Date Of Birth	05/02/1971
Occupation	INDOOR
Date Of Driving Pass	30/01/1992
Driving Experience	28 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96282100
Fax Number	
Contact Number	
Email Address	MELVYNK@ROCKETMAIL.COM

Address	70 WOO MON CHEW ROAD
Postcode	455146
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	4
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	NO
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

AT 7PM I WAS DRIVING AT ABOUT 25KM/H ALONG WOO MON CHEW ROAD. WHEN MY LEFT FRONT HIT THE RIGHT SIDE OF VEHICLE B(SKJ 6676 D) WHICH WAS STATIONARY. I THEN MANAGED TO STOP AND BRAKE AFTER GENTLY HITTING ANOTHER CAR INFRONT (SLJ 1417 E) WHICH ROLLED DOWN THE SLOPE TO HIT (SMT 318 A).

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKJ6676D
Vehicle Make/Model/Colour	
Details Of Properties	CAR B
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLJ1417E
Vehicle Make/Model/Colour	
Details Of Properties	CAR C
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)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SMT318A
Vehicle Make/Model/Colour	
Details Of Properties	CAR D
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

SKETCH PLAN

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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.
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.

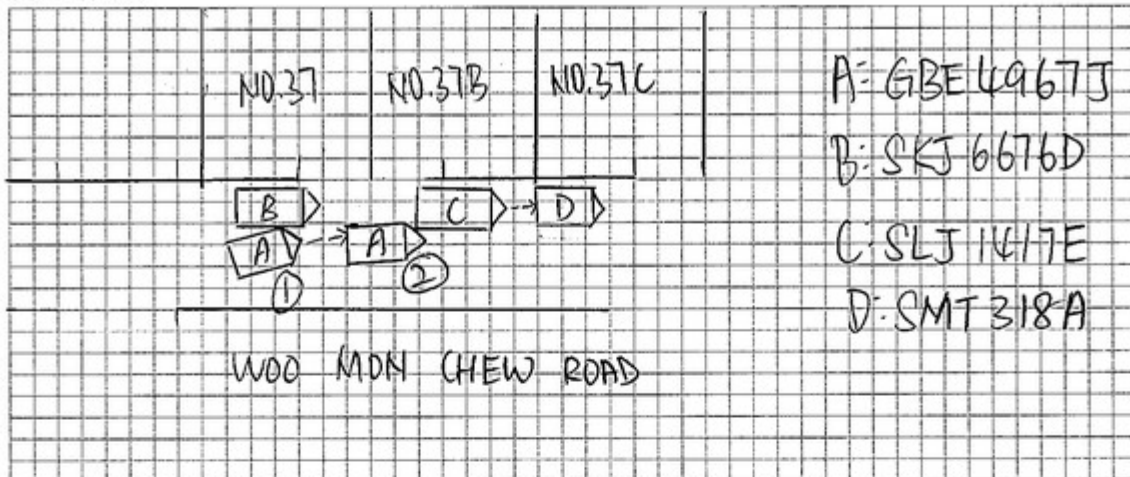
Magic Moments Dog Training
Biz Reg No. 43005915X
1003 Tox Payoh Ind. Pk.
#05-1509 Singapore 319075
H/P: 9455 1795 Fax: 3250 2482

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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At 7pm i was driving at about 25km/h along Wood Mon Chew Road. When my left front hit the right side of vehicle B (SKJ 6676D) which was stationary. I then managed to stop and brake after gaily hitting another car infront (SLJ 1417E) which rolled down the slope to hit (SMT 318A).

DECLARATION

I hereby declare the foregoing particulars are true in every respect.

Magic Motors & Car Training
 Biz Reg No. 53005015X
 1003 Toa Payoh Ind. Pk.
 #05-1509 Singapore 319075
 H/P: 9458 1795 Fax: 3250 2482

Policyholder's Signature
 Date & Time:

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

27/8/20
 1655 hr.

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





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) 6256 3767 Website: www.lonpac.com.sg
GST Reg No.: F0-6005635-C

MZ300

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).
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA).
THE MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No. : Z20VC05005634

Type of Cover : THIRD PARTY

1. Index Mark and Vehicle Registration Number
VOLKSWAGEN TRANSPORTER T5 2.0 TDI A/T 5DR (3T) CAAC
- GBE4967J
2. Name of Policy Holder
MAGIC MOMENTS DOG TRAINING
3. Effective Date of the Commencement of Insurance
for the purpose of the Act
28/06/2020
4. Date of Expiry of the Insurance
27/06/2021
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 use
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 TRIAL OR SPEED TESTING.
USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

* 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: ABLIM3
Date Issued: 24/06/2020

NRIC CARD NO. S7104101H

Name
KOH KHENG LENG MELVYN

许庆龙

Race
CHINESE

Date of Birth
05-02-1971

Sex
M

Country of Birth
SINGAPORE

NRIC No. S7104101H

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7104101H

Name
KOH KHENG LENG MELVYN

Birth Date 05 Feb 1971

Issue Date 25 Apr 2012

002060667B

NRIC No. S7104101H

70 WOO MON CHEW ROAD
SINGAPORE 455146

NRIC No: S7104101H

Date: 10/05/2011

No: 6733763

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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	04 May 1990
Class 2A Motorcycles between 201 cc and 400 cc	25 May 1991
Class 2 Motorcycles > 400 cc	07 Jul 1992
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	30 Jan 1992

Licence No: S7104101H

NP 428A