

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	26/11/2020 14:29
Date Of Accident	22/11/2020 04:40
Exact Location Of Accident	SLE TOWARDS CTE EXIT 1A THE FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU6611T
Insured/Policyholder	
Name Of Registered Owner	LDC GENERAL CONSTRUCTION PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90126155
Alternative Phone No	OFFICE-90126155

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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? YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DHOM110171791900
Cover Note Number	

Driver

Name of Driver	LIM SIEW HOCK
NRIC No	SXXXX843C
Date Of Birth	29/08/1965
Occupation	INDOOR
Date Of Driving Pass	08/05/1984
Driving Experience	36 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90126155
Fax Number	
Contact Number	OFFICE 90126155

Address	3 KOVAN ROAD #05-10
Postcode	544917
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	NO COLLISION
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
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

ON THE MENTION DATE AND TIME I WAS ON MY STATED LANE THE FLOOR IS WET AS IS DRIZZLING. COME TO THE BEND AND SUDDENLY SKID AND THE CAR LOST CONTROL AND HIT ONTO THE WALL.

Attachment(s)

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


SKETCH PLAN


IMPORTANT NOTICE


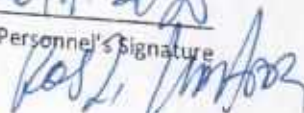
- 1) Please report correctly the details of the accident to speed up the claims process.
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- 7) By the lodgment of this report to insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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) in this accident shall be collectively referred to as the "Insurers"). The Insurers' lawyer/ 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 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 or corresponding, statement, invoices, reports, or notices to me, which could involve disclosure of certain personal data about me to bring 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 Insurer's lawyers/ law firms, may/ are permitted to collect, use or 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 lawyer/ 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 purposed stated, or;
 - ii. For complying with the requirements under any regulations, law or court orders.


Policyholder's Signature
Date & Time:


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


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

SKETCH PLAN

CTE CITY
TO YCK





A) SJU 6647


On the mention date and time I was on my
States lane the floor is wet as is Drizzling ~~weather~~
came to the Bend and suddenly skid, the ^{car} lost control
and hit on to the wall

DECLARATION

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


Policyholder's Signature
Date & Time:


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

 26/4/2020/
Reporting Centre Personnel's Signature
Name: Kesli
NRIC/ FIN No: 107009

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 22 / 11 / 20 (dd/mm/yy) Time of Accident: 04 : 45 (24-HR-FORMAT)

Vehicle No.: SJN 6611T Vehicle Make & Model: Altis Toyota

Exact location of Accident: SLE TO CTE Exit 1A the flyover

Policyholder's Name/ IC No.: _____

Driver's Name/ IC No.: LIM SIEW HOCK (S1684843C) (As Above) ☒

Driver's Contact No.: 9450 9012 6155 Company Contact No.: _____

Driver's Address: 3 Kovan Road # 05-10 544917

Insurance Company: LCI Email address (if any): _____

Relationship between Owner & Driver: 29/08/1965 08/05/1984

Owner / Spouse / Children / Friend / Parent / or Others specify: _____

What do you wish to claim? (Please TICK ONE only)

☒ Own Insurance/ ☐ Other Vehicle (The one you want to claim against)/ Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident?

☒ Private use/ ☐ Work purpose

Occupation (nature of job): ☒ Indoor/ ☐ Outdoor

No. of Passengers (Including Driver): 1

Passenger Name: _____ Gender: _____

Passenger Name: _____ Gender: _____

Weather Condition & Road Conditions? (On the day of accident)

☐ Clear & Dry/ ☐ Raining & Wet/ ☐ After-Rain & Wet/ ☒ Drizzling & Wet/ Others: _____

Was there any video captured by your Car Camera? ☐ Yes/ ☒ No

Any Injuries: ☐ Yes/ ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person's in which vehicle: _____

Police Report filed: ☐ Yes/ ☐ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name/ IC No.: _____ Vehicle No. _____

Driver's Contact No.: _____ Insurance Company (If any): _____

2. Driver's Name/ IC No.: _____ Vehicle No. _____

Driver's Contact No.: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No.: _____

Preferred Workshop Name: _____ Contact No.: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

**Business Profile (Company) of LDC GENERAL CONSTRUCTION PTE LTD
(200004024M)**

Date: 14/09/2020

The Following Are The Brief Particulars of :

Registration No.	200004024M
Company Name	LDC GENERAL CONSTRUCTION PTE LTD
Former Name if any	
Incorporation Date	09/05/2000
Company Type	EXEMPT PRIVATE COMPANY LIMITED BY SHARES
Status	Live Company
Status Date	09/05/2000

Principal Activities

Activities (I)	BUILDING CONSTRUCTION N.E.C. (41009)
Description	
Activities (II)	MANUFACTURE OF OFFICE MACHINERY AND EQUIPMENT (EXCEPT COMPUTERS AND PERIPHERAL EQUIPMENT) (28171)
Description	

Capital

Issued Share Capital (AMOUNT)	Number of Shares *	Currency	Share Type
300000	300000	SINGAPORE, DOLLARS	ORDINARY

* Number of Shares includes number of Treasury Shares

Paid-Up Capital (AMOUNT)	Number of Shares	Currency	Share Type
300000		SINGAPORE, DOLLARS	ORDINARY

COMPANY HAS THE FOLLOWING ORDINARY SHARES HELD AS TREASURY SHARES

Number Of Shares	Currency
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**Business Profile (Company) of LDC GENERAL CONSTRUCTION PTE LTD
(200004024M)**

Date: 14/09/2020

Registered Office Address	10 KAKI BUKIT ROAD 1 #03-04 KB INDUSTRIAL BUILDING SINGAPORE (416175)
Date of Address	08/03/2011
Date of Last AGM	28/06/2019
Date of Last AR	29/07/2019
FYE As At Date of Last AR	31/12/2018

Audit Firms**NAME**

LEE S F & CO

Charges

Charge No.	Date Registered	Currency	Amount Secured	Chargee(s)
C201712190	29/11/2017		All Monies	DBS BANK LTD.
C201912730	13/11/2019		All Monies	CIMB BANK BERHAD
C201913941	13/12/2019		All Monies	CIMB BANK BERHAD
C201913943	13/12/2019		All Monies	CIMB BANK BERHAD
C201913944	13/12/2019		All Monies	CIMB BANK BERHAD

Officers/Authorised Representative(s)

Name	ID	Nationality/Citizenship	Source of Address	Date of Appointment
Address		Position Held		
LIM SIEW HOCK	S1684843C	SINGAPORE CITIZEN	OSCARS	09/05/2000
3 KOVAN ROAD #05-10 KOVAN RESIDENCES SINGAPORE (544917)		Director		
NG TECK LENG	S1651693G	SINGAPORE CITIZEN	OSCARS	03/08/2009

Authentication No. : V20622444T

Page 2 of 4

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**Business Profile (Company) of LDC GENERAL CONSTRUCTION PTE LTD
(200004024M)**

Date: 14/09/2020

Officers/Authorised Representative(s)

Name	ID	Nationality/Citizenship	Source of Address	Date of Appointment
Address		Position Held		
222 SERANGOON AVENUE 4 #01-248 SERANGOON GREEN SINGAPORE (550222)		Director		
POH SIONG HOI	S0658382B	SINGAPORE CITIZEN	ACRA	09/05/2000
701 SIMS DRIVE #03-07 LHK BUILDING SINGAPORE (387383)		Secretary		

Shareholder(s)

Name		ID	Nationality/Citizenship Place of incorporation/ Origin/Registration	Source of Address	Address Changed
Address					
1	LIM SIEW HOCK	S1684843C	SINGAPORE CITIZEN	OSCARS	02/02/2012
3 KOVAN ROAD #05-10 KOVAN RESIDENCES SINGAPORE (544917)					
Ordinary(Number)		Currency			
300000		SINGAPORE, DOLLARS			

Abbreviation

UL - Local Entity not registered with ACRA

UF - Foreign Entity not registered with ACRA

AR - Annual Return

AGM - Annual General Meeting

FS - Financial Statements

FYE - Financial Year End

OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority.

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Page 3 of 4

INFORMATION RESOURCES

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**Business Profile (Company) of LDC GENERAL CONSTRUCTION PTE LTD
(200004024M)**

Date: 14/09/2020

Note :

- The information contained in this product is collated from lodgements filed with ACRA, and/or information collected by other government sources.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sg.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA200914165539

DATE : 14/09/2020

This is computer generated. Hence no signature required.



Authentication No. : V20622444T

Page 4 of 4



UNITED OVERSEAS INSURANCE LTD

Certificate of Insurance

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules 1990
Road Transport Act 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules 1959 (Malaysia)

ORIGINAL

CERTIFICATE NO.	DHOM110171791900	Excess:	\$600/- ALL DRIVERS \$3000/- APPL TO <25 YRS & OR <3YRS EXP \$100/- WINDSCREEN DAMAGE CLAIM
Type of Cover	COMPREHENSIVE		
Vehicle Number	SJ06611T		
Name of Insured	LDC GENERAL CONSTRUCTION PTE LTD		
Restricted Driver(s)	NOT APPLICABLE		

Period of Insurance 27 November 2019 to 17 December 2020

Engine# 3ZZ4948436
Chassis# MR053ZEE106160497

Private Car-Office (PA 4)

AUTHORISED DRIVER

Any person who is driving on the Insured's order or with their permission

LIMITATIONS AS TO USE

Use only for social domestic and pleasure purposes and for the Insured's business.
THE POLICY DOES NOT COVER:

- (1) Use for hire or reward or pace making reliability trial or speed testing
- (2) Use for the carriage of goods other than samples in connection with any trade or business
- (3) Use for any purpose in connection with the Motor Trade

Provided that the person 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

*Limitation rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and part IV of the Road Transport Act, 1987 (Malaysia)

UNITED OVERSEAS INSURANCE LTD

FCADJ Date : 27/11/2019

For the Company